

We are the regulator: Our job is to check whether hospitals, care homes and care services are meeting essential standards.

Freestones Residential care Home

85 Finedon Road, Irthlingborough,
Wellingborough, NN9 5TY

Tel: 01933650430

Date of Inspection: 29 May 2013

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2013

We inspected the following standards as part of a routine inspection. This is what we found:

Care and welfare of people who use services	✓	Met this standard
Requirements relating to workers	✓	Met this standard
Assessing and monitoring the quality of service provision	✓	Met this standard
Complaints	✓	Met this standard

Details about this location

Registered Provider	Mrs Claire Louise Davidson & Mr Karl James Davidson
Registered Manager	Mrs. Claire Davidson
Overview of the service	Freestones Residential Care Home is located close to the centre of Irthlingborough in Northamptonshire. Accommodation and personal care is provided for up to 19 older people with a range of needs, including people with dementia.
Type of service	Care home service without nursing
Regulated activity	Accommodation for persons who require nursing or personal care

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Summary of this inspection

Why we carried out this inspection

This was a routine inspection to check that essential standards of quality and safety referred to on the front page were being met. We sometimes describe this as a scheduled inspection.

This was an unannounced inspection.

How we carried out this inspection

We carried out a visit on 29 May 2013, talked with people who use the service, talked with carers and / or family members and talked with staff. We reviewed information given to us by the provider.

What people told us and what we found

People who used the service told us that they liked living at the home. A person who used the service told us "I am really happy here, the staff always have time for me, it is a great place." One relative told us, "The staff are really good, they have to deal with so much." A relative of another person who used the service told us, "The whole place is fantastic from the manager downwards they give a great service."

We found that staff were attentive to people's needs and that staff spoke to people they supported in a calm, polite and reassuring manner.

You can see our judgements on the front page of this report.

More information about the provider

Please see our website www.cqc.org.uk for more information, including our most recent judgements against the essential standards. You can contact us using the telephone number on the back of the report if you have additional questions.

There is a glossary at the back of this report which has definitions for words and phrases we use in the report.

Our judgements for each standard inspected

Care and welfare of people who use services

✓ Met this standard

People should get safe and appropriate care that meets their needs and supports their rights

Our judgement

The provider was meeting this standard.

People experienced care, treatment and support that met their needs and protected their rights.

Reasons for our judgement

People's needs had been assessed and care and treatment had been planned and delivered in line with their individual care plan. Those plans included clear guidance for staff about how to support people. Staff we spoke with demonstrated that they understood people's needs and we saw further evidence of that when we observed a staff handover.

Care plans had been reviewed every month which meant that staff had the latest information about people's needs and how they should be supported.

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A person who used the service told us "I am really happy here, the staff always have time for me, it is a great place."

Staff supported people to participate in meaningful activities with other people who used the service or by themselves. Staff had been able to do that because they knew what people were interested in doing. The service had a programme of activities that were displayed in a lounge. We saw that staff had provided the activities that had been scheduled on the day of our inspection.

We saw evidence that staff had been alert and recognised changes in a person's health and that GPs or nurses had been called to the home. Staff had informed relatives of such occasions.

There were arrangements in place to deal with foreseeable emergencies.

Requirements relating to workers

✓ Met this standard

People should be cared for by staff who are properly qualified and able to do their job

Our judgement

The provider was meeting this standard.

People were supported by suitably qualified, skilled and experienced staff.

Reasons for our judgement

The service had recruited new staff since our last inspection. We therefore reviewed the service's recruitment procedure.

We found that the service had effective recruitment and selection processes in place. Those procedures meant that applicants for positions at the home had undergone robust selection procedures that ensured that only people who were suitable to work at the home were interviewed. Candidates were asked questions that tested their suitability and aptitude. After a suitable candidate had been identified a series of identity and security checks were carried out. Two references were required along with the result of an enhanced criminal records check. People had not been allowed to start work until all checks had been satisfactorily completed.

New staff were not allowed to work with people who used the service until they had completed an induction period of 5 days. They then shadowed regular staff with supervision. A longer period of induction was offered if this was required

Assessing and monitoring the quality of service provision

✓ Met this standard

The service should have quality checking systems to manage risks and assure the health, welfare and safety of people who receive care

Our judgement

The provider was meeting this standard.

The provider had an effective system to regularly assess and monitor the quality of service that people receive.

Reasons for our judgement

People who used the service, their representatives and staff were asked for their views about their care and treatment and they were acted on.

Decisions about care and treatment were made by the appropriate staff at the appropriate level, there was evidence that learning from incidents / investigations took place and appropriate changes were implemented and the provider took account of complaints and comments to improve the service.

We spoke with the manager who was also the provider at the home. She demonstrated a clear understanding about the purpose of the service. The manager led and supported a strong staff team who focused on delivering a quality service. The service had policies and procedures that covered important aspects of care and service delivery which was available to staff. These were reviewed and updated centrally, in line with current research and practice.

There were systems in place which checked that staff followed policies and procedures in practice, and ensured that care was consistently delivered to meet people's needs.

Records were of a good standard and were routinely completed. People who used the service and also their representatives were aware of the complaints procedures and safety arrangements.

Complaints

✓ Met this standard

People should have their complaints listened to and acted on properly

Our judgement

The provider was meeting this standard.

There was an effective complaints system available. Comments and complaints people made were responded to appropriately

Reasons for our judgement

Freestones Residential Care Home had a complaints procedure in place. During this visit we looked at the service's complaints register. Clear information was recorded about any complaints, when they were received, investigated and any action that had been taken as a result of this information.

The manager and staff promptly reported any incidents or concerns that affected the locations or the people who used the service.

The manager stated that the service had a robust complaint process that was open and accessible to the people who lived at the home, their families and or representatives. A copy of the complaints procedure was provided to the people who used the service in their service user guide.

About CQC inspections

We are the regulator of health and social care in England.

All providers of regulated health and social care services have a legal responsibility to make sure they are meeting essential standards of quality and safety. These are the standards everyone should be able to expect when they receive care.

The essential standards are described in the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009. We regulate against these standards, which we sometimes describe as "government standards".

We carry out unannounced inspections of all care homes, acute hospitals and domiciliary care services in England at least once a year to judge whether or not the essential standards are being met. We carry out inspections of other services less often. All of our inspections are unannounced unless there is a good reason to let the provider know we are coming.

There are 16 essential standards that relate most directly to the quality and safety of care and these are grouped into five key areas. When we inspect we could check all or part of any of the 16 standards at any time depending on the individual circumstances of the service. Because of this we often check different standards at different times.

When we inspect, we always visit and we do things like observe how people are cared for, and we talk to people who use the service, to their carers and to staff. We also review information we have gathered about the provider, check the service's records and check whether the right systems and processes are in place.

We focus on whether or not the provider is meeting the standards and we are guided by whether people are experiencing the outcomes they should be able to expect when the standards are being met. By outcomes we mean the impact care has on the health, safety and welfare of people who use the service, and the experience they have whilst receiving it.

Our inspectors judge if any action is required by the provider of the service to improve the standard of care being provided. Where providers are non-compliant with the regulations, we take enforcement action against them. If we require a service to take action, or if we take enforcement action, we re-inspect it before its next routine inspection was due. This could mean we re-inspect a service several times in one year. We also might decide to re-inspect a service if new concerns emerge about it before the next routine inspection.

In between inspections we continually monitor information we have about providers. The information comes from the public, the provider, other organisations, and from care workers.

You can tell us about your experience of this provider on our website.

How we define our judgements

The following pages show our findings and regulatory judgement for each essential standard or part of the standard that we inspected. Our judgements are based on the ongoing review and analysis of the information gathered by CQC about this provider and the evidence collected during this inspection.

We reach one of the following judgements for each essential standard inspected.

✓ Met this standard This means that the standard was being met in that the provider was compliant with the regulation. If we find that standards were met, we take no regulatory action but we may make comments that may be useful to the provider and to the public about minor improvements that could be made.

✗ Action needed This means that the standard was not being met in that the provider was non-compliant with the regulation. We may have set a compliance action requiring the provider to produce a report setting out how and by when changes will be made to make sure they comply with the standard. We monitor the implementation of action plans in these reports and, if necessary, take further action. We may have identified a breach of a regulation which is more serious, and we will make sure action is taken. We will report on this when it is complete.

✗ Enforcement action taken If the breach of the regulation was more serious, or there have been several or continual breaches, we have a range of actions we take using the criminal and/or civil procedures in the Health and Social Care Act 2008 and relevant regulations. These enforcement powers include issuing a warning notice; restricting or suspending the services a provider can offer, or the number of people it can care for; issuing fines and formal cautions; in extreme cases, cancelling a provider or managers registration or prosecuting a manager or provider. These enforcement powers are set out in law and mean that we can take swift, targeted action where services are failing people.

How we define our judgements (continued)

Where we find non-compliance with a regulation (or part of a regulation), we state which part of the regulation has been breached. Only where there is non compliance with one or more of Regulations 9-24 of the Regulated Activity Regulations, will our report include a judgement about the level of impact on people who use the service (and others, if appropriate to the regulation). This could be a minor, moderate or major impact.

Minor impact – people who use the service experienced poor care that had an impact on their health, safety or welfare or there was a risk of this happening. The impact was not significant and the matter could be managed or resolved quickly.

Moderate impact – people who use the service experienced poor care that had a significant effect on their health, safety or welfare or there was a risk of this happening. The matter may need to be resolved quickly.

Major impact – people who use the service experienced poor care that had a serious current or long term impact on their health, safety and welfare, or there was a risk of this happening. The matter needs to be resolved quickly

We decide the most appropriate action to take to ensure that the necessary changes are made. We always follow up to check whether action has been taken to meet the standards.

Glossary of terms we use in this report

Essential standard

The essential standards of quality and safety are described in our *Guidance about compliance: Essential standards of quality and safety*. They consist of a significant number of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009. These regulations describe the essential standards of quality and safety that people who use health and adult social care services have a right to expect. A full list of the standards can be found within the *Guidance about compliance*. The 16 essential standards are:

Respecting and involving people who use services - Outcome 1 (Regulation 17)

Consent to care and treatment - Outcome 2 (Regulation 18)

Care and welfare of people who use services - Outcome 4 (Regulation 9)

Meeting Nutritional Needs - Outcome 5 (Regulation 14)

Cooperating with other providers - Outcome 6 (Regulation 24)

Safeguarding people who use services from abuse - Outcome 7 (Regulation 11)

Cleanliness and infection control - Outcome 8 (Regulation 12)

Management of medicines - Outcome 9 (Regulation 13)

Safety and suitability of premises - Outcome 10 (Regulation 15)

Safety, availability and suitability of equipment - Outcome 11 (Regulation 16)

Requirements relating to workers - Outcome 12 (Regulation 21)

Staffing - Outcome 13 (Regulation 22)

Supporting Staff - Outcome 14 (Regulation 23)

Assessing and monitoring the quality of service provision - Outcome 16 (Regulation 10)

Complaints - Outcome 17 (Regulation 19)

Records - Outcome 21 (Regulation 20)

Regulated activity

These are prescribed activities related to care and treatment that require registration with CQC. These are set out in legislation, and reflect the services provided.

Glossary of terms we use in this report (continued)

(Registered) Provider

There are several legal terms relating to the providers of services. These include registered person, service provider and registered manager. The term 'provider' means anyone with a legal responsibility for ensuring that the requirements of the law are carried out. On our website we often refer to providers as a 'service'.

Regulations

We regulate against the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009.

Responsive inspection

This is carried out at any time in relation to identified concerns.

Routine inspection

This is planned and could occur at any time. We sometimes describe this as a scheduled inspection.

Themed inspection

This is targeted to look at specific standards, sectors or types of care.

Contact us

Phone: 03000 616161

Email: enquiries@ccq.org.uk

Write to us
at: Care Quality Commission
Citygate
Gallowgate
Newcastle upon Tyne
NE1 4PA

Website: www.cqc.org.uk

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