

Fodderty House Care Home Service

Fodderty
Dingwall
IV15 9UE

Telephone: 01997 421 243

Type of inspection:
Unannounced

Completed on:
7 November 2024

Service provided by:
Fodderty Care Ltd

Service provider number:
SP2008009920

Service no:
CS2007152586

About the service

Fodderty House is a care home for older people located between Dingwall and Strathpeffer. It is registered to provide a care service to a maximum of 16 older people; this included one bed for respite. The provider is Fodderty Care Ltd.

The care home building is a house which had been converted and extended. The home is situated within its own grounds, set back from the road. The two-storey building had 16 bedrooms over two floors, some of which have en suite facilities.

The first floor accommodation can be accessed via the stairs or by the passenger lift. There are two lounges, one of which included the communal dining area.

The garden to the rear of the house had been landscaped to create an outside area for people to enjoy, this includes a summer house with non-slip decking to ensure people can enjoy the outside space safely.

About the inspection

This was an unannounced inspection which took place between 04 and 07 November 2024. The inspection was carried out by one inspector from the Care Inspectorate.

To prepare for the inspection we reviewed information about this service. This included previous inspection findings, registration information, information submitted by the service and intelligence gathered since the last inspection.

In making our evaluations of the service we:

- spoke with five people using the service and four of their family and representatives
- spoke with seven staff and management
- observed practice and daily life
- reviewed documents
- spoke with visiting professionals
- reviewed survey responses from people using the service, their relatives, staff, and visiting professionals.

Key messages

- There were warm and positive relationships between staff and people using the service.
- Documentation relating to consent should be improved.
- There was an established and dedicated staff team in place.
- Formal personal plan reviews were not being carried out every six months.
- There was access to a wide variety of activities indoors, outside, and within the local community.

From this inspection we evaluated this service as:

In evaluating quality, we use a six point scale where 1 is unsatisfactory and 6 is excellent

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| How well do we support people's wellbeing? | 4 - Good |
| How good is our staff team? | 5 - Very Good |

Further details on the particular areas inspected are provided at the end of this report.

How well do we support people's wellbeing?

4 - Good

We evaluated this key question as good, where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

People were supported by staff who were kind and respectful. Staff had warm relationships with people and knew them well, this meant people received responsive and compassionate care. People had support to access facilities such as a shower or bath at a time of day which suited them. One person told us:

"We have the most wonderful bath here that lifts you in. It's excellent."

There were a variety of opportunities available for people to join both indoor and outdoor activities. The home had a minibus which allowed them to access the local area, this meant activities were not limited by its rural location. Fodderty House had established good links with the local community and events had been held at the home which provided people with the opportunity to socialise with their wider local community. Many activities planned, encouraged people to move and change positions, such as seated exercise sessions, this helped people to remain as active as possible. There were regular visitors to the home through the day, one relative told us:

"I find the home very welcoming and I am confident they are caring for [my relative] as best as they can."

Procedures were in place to safely support people with administration of their medication. A digital system is used to manage medication and regular audits were being carried out, some recent medication count errors were highlighted at the inspection for the service to address. Protocols for the administration of PRN 'as required' medication would benefit from additional details and this was discussed during the inspection.

Personal plans were completed for each person and a new digital care planning system was being used by the service. Care plans contained detailed information relating to people's health and wellbeing, and a variety of healthcare screening tools were used to update these, this ensured staff had the necessary information to support people. Care plans were audited and updated regularly, however, formal six-monthly reviews were not currently being carried out by the service. All services are legally required to formally review people's care on a six-monthly basis to evaluate how support is meeting a person's outcomes, as identified in their care plan (**see area for improvement 1**).

Where people were at risk of falls, sensor mats and other equipment were in place to alert staff; the service did not have all the necessary signed consents in place for people who were not able to fully express their wishes and preferences in relation to these (**see area for improvement 2**).

Meals were prepared, cooked and delivered to Fodderty House from a neighbouring care home. Mealtimes were relaxed and homely. When people did not want an item from the menu staff prepared an alternative light meal on site. Residents' meetings were used as a forum for people to provide feedback on menu choices, one person told us:

"The food is superb for me. There's always a choice, and if my choice isn't on it, they always ask what I would like."

Areas for improvement

1. The service should ensure every person has a formal and person-centred review at least every six months that evaluates how support is meeting their needs, as identified in their care plan. Reviews should include input from people and/or their legal representatives.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'I am fully involved in developing and reviewing my personal plan, which is always available to me' (HSCS 2.17).

2. Where people's independence, choice and control are restricted, for example to prevent a fall, the service should ensure all legal arrangements and consents are in place. Where people are not able to fully express their wishes and preferences, the necessary consents must be signed by the person's legally appointed guardian. This includes all restrictive measures such as, but not limited to, equipment such as sensor mats and wheelchair lap belts.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'I experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.11); and

'My rights are protected by ensuring any surveillance or monitoring device that I or the organisation use is necessary and proportionate and I am involved in deciding how it is used' (HSCS 2.7).

How good is our staff team?

5 - Very Good

We found significant strengths in aspects of the care provided and how these supported positive outcomes for people, therefore we evaluated this key question as very good.

The manager has been able to recruit and develop a very good team of motivated staff who are experienced and knowledgeable. Staff worked well together and were flexible to support each other in their roles. Staff members told us:

"I feel very respected and supported by my colleagues."

"Everybody gets on so well, everyone can approach everyone. The staff team is great, I love coming to work every single day."

Staff reported they felt well supported by the management team who had an 'open door' policy, this promoted effective communication and created a positive work culture where employees felt valued.

Staffing numbers were calculated using the 'Indicator of Relative Needs' (ioRN) dependency tool and the manager's knowledge of the service, there were additional staff working beyond calculations to account for the layout of the building and people's needs varying. This meant staffing arrangements allowed for more than people's basic care needs to be met and ensured there was time for meaningful interactions between people and staff.

Staff 'champions' had been introduced and relevant training had been undertaken for each role, this provided the staff team with in house experts in different areas of practice such as medication, dementia care, and reducing falls.

Sampling of recruitment files demonstrated that safer recruitment guidelines were being followed. The service is currently fully staffed and now has a stable team in place, this meant people received support from a consistent team who provided a warm and familiar atmosphere.

People told us they had confidence in the staff team at Fodderty House, and felt that staff knew them well. Some people told us:

"Staff are very easy to talk to. They're great, very good natured."

"I think the staff are super attentive, they anticipate your needs."

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

Detailed evaluations

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| How well do we support people's wellbeing? | 4 - Good |
| 1.3 People's health and wellbeing benefits from their care and support | 4 - Good |
| How good is our staff team? | 5 - Very Good |
| 3.3 Staffing arrangements are right and staff work well together | 5 - Very Good |

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