

CQC Inspections and reports

The Care Quality Commission make unannounced inspections on all providers of health care in England and Wales. This valuable resource is to maintain high standards as well as to put failing homes into special measures. We welcome these inspections as it enables us to see where we can improve and also to see what we do well.

Our last inspection was on the 1st and 2nd February 2017 at an unfortunate time for Firlawn. Our Manager was on long term sick leave and our Operations Director was on annual leave. Our final report, which we do not believe to be truly accurate, gave us a rating of 'improvements required'. Although disappointed with the report it made us work doubly hard to improve our standards in as fast a time as possible. However, CQC are not concerned enough to want to come back to see us soon, so we have to wait until the next inspection before we can show how good we are.

Here are the main issues in the report and what we have done to address them:-

- Medicines – the documentation to confirm how some medicines should be given and when medicines had administered had not been consistently completed and therefore there was no assurance people received their medicines as prescribed. Medicines were not always stored securely.

What Firlawn has done to put this right.

Our Medication Procedure has been reviewed and rewritten. Medication training for all Registered Nurses completed by an external Training Company.

- **Medication and other Audits are completed monthly and reviewed by the Manager and the Operations Director. Feedback is then given to the Nurses.**
- Systems to monitor the quality of the service were not always effective and did not ensure all issues were properly identified and addressed.

What Firlawn has done to put this right.

Audits of care plans, wound ,nutrition, infection control, health and safety are completed monthly and reviewed by the Manager and the Operations Director. Monthly Head of Department meetings continue and team meetings for staff are 5 to 6 weekly

- Incomplete records in relation to nutrition and hydration.

What Firlawn has done to put this right.

Audits of care plans, wound ,nutrition are completed monthly and reviewed by the Manager and the Operations Director. Forms continue to be sent to the Chef with nutritional needs identified.

- Areas of the Home were in a poor state of repair, there was a programme of refurbishment program in place but CQC did not feel certain areas had been prioritised.

What Firlawn has done to put this right.

- **The refurbishment programme has been reviewed and communal areas prioritised as suggested by CQC. The Maintenance team have been concentrating on Residents**

rooms. Firlawn has had positive comments by relatives ,residents and staff about the work being completed since the inspection.

- Quality of food was poor – this had already been identified the Kitchen processes had been reviewed and a New Chef was due to commence employment then the new processes and menu could be implemented.

What Firlawn has done to put this right.

- **We had already served notice on the outside catering company at the time of the inspection. We now run the kitchen ‘in-house’ and the comments from residents about the food have been extremely complimentary.**
- People, their relatives and staff told CQC not always sufficient numbers of staff to support people in line with their needs. Whilst reported there had recently been improvements to staffing 1 member of staff told CQC there were still not enough staff.

What Firlawn has done to put this right.

- **Staff numbers are reviewed on a daily basis and agency staff are employed to fill vacancies. We have given our own staff a sizeable pay increase to help us with recruitment.**
- People told CQC that staff treated them with dignity and respect and always knocked and waited before entering their rooms. However this was not consistently evident from CQC s observations during the inspection

What Firlawn has done to put this right.

- **Staff continue with their in-house training programme presented by our Training Manager along with external training to ensure that they have the necessary skills and knowledge to meet the standards demanded by ourselves and CQC.**

CQC also noted in their report that:-

- Staff received regular supervision and appraisals and reported that these meetings were productive and helpful.
- People said they felt safe and staff were able to explain how they would identify signs of potential abuse and how they would report safeguarding concerns.
- Staff were able to demonstrate good awareness around the principles of the Mental Capacity Act 2005.They told us decisions had been made in peoples best interests for those who lacked the capacity to make specific decisions and these had been made with the least restriction as possible. However documentation to support these decisions were not available in the care records.
- The quality of documentation in peoples care plans had improved since last inspection – Firlawn had implemented new monitoring tools to ensure plans were reviewed in a timely manner.
- People, relatives and staff told CQC that the management team were approachable and they would feel confident in raising issues or concerns if they arose. One person said “I feel valued and listened to”. It was reported that resident and staff meetings had not been as regular since the Registered Manager had been absent.

To read the full report on the CQC website click [here](#).