

The Fortune Centre of Riding Therapy

Wootton Hall Farm

Inspection report

FCRT, Wootton Hall Farm
Tiptoe Road
New Milton, BH25 5SJ
Tel: 01425 673297
Website: www.fortunecentre.org

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Ratings

Overall rating for this service	Good	
Is the service safe?	Good	
Is the service effective?	Good	
Is the service caring?	Good	
Is the service responsive?	Outstanding	
Is the service well-led?	Good	

Overall summary

This comprehensive inspection took place on 9,10 and 13 July 2015. The first day was unannounced.

The Fortune Centre of Riding Therapy (FCRT) provides a three year residential Further Education Through Horsemastership Course for 16 to 25 year old people with learning difficulties and disabilities. Students live in a supported environment where they develop greater independence and life skills through the interaction with horses.

Wootton Hall Farm (WHF) is one of three registered sites that make up the FCRT. WHF offers residential and learning support for up to 33 students between the ages

of 16 to 25. WHF accommodates mainly first and second year and a small number of third year students in premises located a few miles away from the main FCRT site which is located near Bransgore.

At the time of the inspection there were 18 students living at WHF and a registered manager was in position. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

Summary of findings

Students told us they generally felt safe at WHF, they knew who to speak to if they had any concerns and told us names of staff members they could speak to if they were worried. Parents told us they felt WHF provided a very safe environment and the students were very happy living there. Staff knew how to identify, prevent and report abuse. There was a dedicated member of staff nominated for Safeguarding Adults.

The premises and equipment were well maintained throughout and provided clean, modern accommodation for the students to relax, live and learn in.

Students received personal care and support in an individualised way and their privacy was protected. Staff knew students well and were able to demonstrate a good understanding of how they wished their care to be provided. Students were treated with dignity and respect.

Medicines were administered appropriately, stored securely and managed and disposed of safely.

Student's needs were rigorously assessed and care, support and guidance was planned and delivered to meet their needs. Records showed an assessment of need had been carried out to ensure risks to student's health were managed effectively.

Students and their relatives were fully involved in assessing and planning the care and support they received. Students were referred to health care professionals as required.

Improvements to the training system were in the process of being completed to ensure staff received relevant training courses and refresher training as required. Staff were knowledgeable about their role and spoke positively regarding the induction and training they received.

The manager told us they had recruited a number of new staff within the last year and said they had enough skilled and appropriately trained staff to meet student's needs. Staff felt well supported by the management team and received supervision sessions and appraisals.

Staff sought consent from students before providing care. Where students lacked mental capacity to make particular decisions about their care, staff were guided by the principles of the Mental Capacity Act 2005 to ensure specific decisions were in the student's best interest.

Students received personalised care, guidance and support from staff who were responsive to their needs and knew them well. Staff created a happy, friendly, calm atmosphere which resulted in a positive, open culture at WHF.

Student's and relatives knew how to make a complaint and felt confident they would be listened to if they needed to raise concerns or queries. The provider sought feedback from people and changes were made if required.

People told us they had confidence in the management team and felt the service was well led. Students and relatives spoke positively about the management team and praised the staff stating, "The staff are wonderful, they achieve incredible results" and, "The Fortune Centre is just fantastic in every way".

There was a process in place to ensure improvements were made in regard to the safety and quality of the service provided. Accidents and incidents were documented and discussed to ensure lessons could be learnt in order to minimise the likelihood of them reoccurring.

Summary of findings

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

The service was safe. Medicines were managed safely, stored securely and records completed accurately.

Staff demonstrated a good understanding of the signs of abuse and neglect. They were aware of what action to take if they suspected abuse was taking place.

Sufficient numbers of staff were employed at the service. Staff were recruited safely and pre-employment checks had been conducted prior to staff starting employment.

The premises and equipment were well maintained

Good



Is the service effective?

The service was effective. Staff received on-going support from senior staff who had the appropriate knowledge and skills. Induction and supervision processes were in place to enable staff to receive feedback on their performance and identify further training needs.

Staff followed the principles of the Mental Capacity Act 2005 which protected people's rights to make decisions.

Students were offered a four weekly menu of healthy, home cooked food and drink.

Staff supported students to access the services of healthcare professionals as appropriate.

Good



Is the service caring?

The service was caring. Students and relatives told us that staff were kind, caring and compassionate.

Staff knew students well and were aware of their preferences. This enabled staff to provide person centred care.

Staff were friendly and supportive, and treated students with respect and dignity.

Good



Is the service responsive?

The service was responsive. Student's needs were rigorously assessed and care and support was planned and delivered to meet their needs.

Students were supported to enjoy a range of activities, went out regularly and used local facilities such as community centres, clubs and sports centres.

There was a process in place that encouraged people to comment or raise a concern or complaint. Students felt confident that they could approach a member of staff they felt comfortable with if they were concerned or unhappy about something.

Outstanding



Is the service well-led?

The service was well led. Staff felt well supported by the management team and felt comfortable to raise concerns if needed and confident they would be listened to.

Good



Summary of findings

Observations and feedback from students, relatives and staff showed us the service had a positive open culture. There was good staff morale and students and relatives felt involved in their care.

The provider had a range of audits in place to monitor the quality of the service provided and kept up to date with changes in practice.

Wootton Hall Farm

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This comprehensive inspection took place on 9, 10 and 13 July 2015 and the first day was unannounced. Two CQC inspectors visited the home on two days and one inspector visited on the final day.

Before the inspection we reviewed the information we held about the service. This included information about incidents the provider had notified us of and contacting health professionals on their views of the service. The

provider had completed a Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what it does well and improvements they plan to make.

During the two day inspection we met most of the 18 students living at WHF and spoke with ten of them following the inspection visits we also spoke with five relatives. We requested written feedback from health professionals on their views of the care provided at the home. We also spoke with the director, the manager, the nurse and five members of staff during our inspection.

We observed how students were supported and reviewed three students' Individual Learning Plans (ILP's), treatment and support records and all of the WHF students Medication Administration Records (MARs). We also looked at records relating to the management of the service including staff recruitment and training records, premises maintenance records and the provider's quality assurance records.

Is the service safe?

Our findings

Our inspection visit took place during the last week of the summer term. During this time many students were excited about returning home and some were anxious about their future and the thought of leaving WHF where they had lived for three years. We spoke to ten students living at WHF and they told us they generally felt safe living at WHF but recently some students had been arguing and shouting in the evenings. We discussed these issues with the director and manager who explained the systems they had put in place to manage the last few weeks of the summer term which historically could lead to a charged atmosphere in the evenings. The systems ensured adequate levels of experienced staff were on duty and students continued to receive a structured programme with a variety of activities to support their independence and social skills.

Students told us they were happy living at WHF. We received a mixed response when we asked the students if they felt safe living at WHF. The majority of students said they felt safe and told us they would happily talk to staff if they felt anxious or had any concerns. Some students said they normally felt safe and one student said recently they felt safe sometimes. All the students felt confident they could talk to a member of staff if they felt unsafe and that they would be listened to. Students told us about the “feelings” box that was located in WHF. The feelings box was a small “post box” where students could write down their concerns in private and staff would ensure the students worries and concerns were managed in a sympathetic way. One student told us, “If I have a problem, I speak to Mrs X, she will always sort it out”

We spoke to five parents who all told us they felt WHF provided an excellent, safe service. One said, “It’s been brilliant, it’s the best thing that has ever happened for [student], I have total peace of mind”. Another parent told us, “It’s fantastic; the change in [student] is incredible, she has so much more confidence, I never have to worry”.

Staff demonstrated a good knowledge about the procedure for reporting allegations of potential abuse. Staff told us they had completed training in protecting people from abuse and were aware of the provider’s policy for safeguarding people. We checked the provider’s safeguarding policy and saw it was up to date and included relevant contact details for the local authority. The policy was scheduled to be reviewed in the summer break during

July /August 2015. Clear pictorial posters explaining the roles of safeguarding were prominently displayed around the premises of FCRT. We saw training records that confirmed there was a process in place to ensure staff had completed their safeguarding adults training courses and would be booked for refresher training in the future. The provider had a whistleblowing policy which staff were aware of. There was a system in place to protect the students from financial abuse.

The premises and equipment were managed to keep people safe. We reviewed the providers system for maintenance of the premises and saw the provider kept the premises and equipment well maintained. The provider had a maintenance team of three people employed to ensure FCRT including WHF site was safely maintained. Records showed regular checks covering all areas of the premises were conducted, examples of checks completed included, water systems and legionella testing, portable electrical appliance testing and fire systems and tree safety (legionella are water-borne bacteria that can cause serious illness). Water temperatures were monitored to reduce the risk of legionella growth in warm water stored at the wrong temperature. Hazardous substances were locked away when not in use. There were systems in place for checking and servicing equipment such as, lifts and emergency lighting and all horse related equipment such as saddles and bridles were regularly checked to ensure they were maintained to a safe standard for both student and horse. Staff told us all the equipment was well maintained and there was enough equipment available to ensure people were cared for safely.

At the WHF premises windows had restrictors incorporated into their design and radiators were covered to prevent students accidentally scalding themselves. Hot water was thermostatically controlled and set at a safe temperature.

Communal areas were bright, clean, modern and well lit. Bedrooms were personalised and reflected student’s hobbies and interests. Some areas had been recently refurbished and newly decorated and the students had been involved in choosing the colours for the paint. Furnishings were modern and clean and helped give an overall homely atmosphere to WHF. The manager showed us the addition of a drying room which when completed would ensure the students could remove their wet clothes

Is the service safe?

and boots which would then be dried out ready for their use the next day. The manager showed us the new washstands that had been purchased for each bedroom and which would be installed over the summer break.

The provider had a system in place to monitor incidents and accidents to establish whether there were any trends or themes; actions were then taken to address any issues.

There were enough staff employed to meet student's needs. The manager showed us the system they used to ensure there were enough staff on duty through the day and night. Staff told us they felt there were enough staff on each shift to manage the needs of the students living at WHF. Students required varying levels of staff support to ensure they remained safe. The staffing rota allowed for this, with sufficient staff on duty to support students both at WHF and when they went out. At night there were two members of staff on duty, sleeping at WHF site once the students had gone to bed. The two night time staff could contact a further two members of staff who were on call should they need additional support.

We reviewed four staff recruitment records, one of which had been recently recruited. Records showed recruitment practices were safe and that the relevant employment checks, such as Disclosure and Barring Service (DBS) checks, proof of identity, and appropriate references had been completed before staff began working at FCRT and WHF. The provider did not use agency staff to fill any short term vacancies due to sickness or absence but used previous staff known to them as a bank resource. This ensured continuity of service for the students.

Staff had received training and had been assessed for their competency in administering medicines.

We checked the storage and stock of medicines. The medicine cupboard at WHF was not compliant with current regulations however; the provider had sourced a new medicine cupboard and had placed an order before our inspection visit concluded. The cupboard would be installed over the summer break and would be in operation for the start of the new term in September 2015.

Items were correctly listed in the WHF medicines register and the levels of medicine stock were accurately reflected in the register, this showed returned medicines were accounted for accurately. Students had their allergies recorded and guidance on the use of 'PRN' as required medicines was clearly recorded. Body maps were used to identify any areas of injury and were accurately completed.

We reviewed all of the Medicines Administration Records (MARs) for the students living at WHF. The nurse showed us the new system they were introducing for WHF medicines management. Each student had their own file with their prescribed drugs, allergies, body maps and MARs. We noted there were some gaps in the recording of the MARs sheets for a number of students. These gaps largely co-incided when students had returned home for weekend breaks or had been away for a scheduled absence. The nurse stated she would be running training sessions for all staff on the correct completion of MARs. The files did not have a current photograph of the student; we discussed this with the nurse who agreed for best practice, they would put a photo of each student on their file to ensure the correct medicines were given to each student as prescribed.

Is the service effective?

Our findings

Following our inspection we spoke with five parents regarding the service their daughter or son received at WHF. Every parent spoke extremely positively about the service. One parent said, "I can't believe the difference being at the Fortune Centre has made, they are like a different person so much confidence and they love it there". Parents told us, "All the staff are wonderful, they are so supportive and always do everything they can to help, the support is fantastic and it continues throughout the year, I can't praise them enough".

We reviewed four staff supervision and annual appraisal records. These were detailed and gave staff members the opportunity to comment and request further learning and development opportunities. The process allowed staff to reflect on their performance and what support or resources they needed to develop within their role and the FCRT. Staff supervisions were generally conducted each term and positively written, giving encouragement and praise for work well done. We spoke to four staff regarding the support, supervision and appraisal process. Each member of staff stated they felt very well supported by a strong experienced staff team. One staff member said, "There is always someone you can go to for advice". Staff told us the supervision and appraisal process was "Very helpful and thorough". We spoke to two members of staff about the induction process. One told us it was, "Very, very thorough, enjoyable and it gave me the opportunity to get to know the students and to give them the right help and support". Newly employed staff were mentored by an existing member of staff to ensure they were given the correct level of support and had additional monthly supervisions for their first term.

There was a system in place to manage on-going training. Records showed approximately fifty per cent of the required refresher training such as Safeguarding Vulnerable Adults, Health and Safety and Mental Capacity Act 2005 was out of date. We saw the provider had identified this process as a risk and had recruited a member of staff, specifically to manage all the staff training and development requirements for FCRT. Records showed refresher training had been scheduled and staff booked on for their required

training across a range of subjects. The provider had a system that effectively used the quieter weeks during the students holiday periods for delivering mandatory training to ensure all staff received their required courses.

Staff commented they felt the training they received was of a good standard and said they were encouraged to attend specific training courses that would help them develop in their role, for example; epilepsy, autism and challenging behaviour.

The service followed the principles of The Mental Capacity Act 2005 (MCA) where students had mental capacity they made their own decisions. Where students may have required additional support and guidance to make specific decisions about their care, staff were guided by the principles of the MCA. Staff told us about examples of students decision making that showed they understood the MCA including the right to make a capacitated decision that might be seen as unwise such as getting a tattoo.

There was a challenging behaviour policy that supported staff to understand how to recognise and defuse potential incidents. There had been an incident where staff had needed to restrain one student to prevent harm to others. The director acknowledged staff required up to date training on restraint to make sure any action they needed to take was lawful and the least restrictive option. They confirmed they would arrange training to ensure staff had the correct guidance.

The manager was aware of their responsibilities in regard to the Deprivation of Liberty Safeguards (DoLS). These safeguards aim to protect people living in care services and hospitals from being unlawfully deprived of their liberty. These safeguards can only be used when there is no other way of supporting a person safely. The manager told us they did not have any students that were subject to a DoLS living at WHF.

WHF ran weekly corridor meetings, which provided a forum for students to freely express any concerns or comments they had. Written notes of these meetings were available at WHF for all WHF students to read.

We asked students for their views on the food they received at WHF. Students told us they enjoyed the food, comments included, "It's lovely" and "I like the food" and when asked if there was enough students replied, "Yes, we can always have more if we want it".

Is the service effective?

WHF students had breakfast their at WHF premises, which normally consisted of toast, cereals, porridge or eggs and then joined the other students at the FCRT premises near Bransgore. Lunch was provided at FCRT and was usually a hot meal such as jacket potato and salad, quiche or a pasta based meal. Dinner was a hot meal that was cooked back at WHF premises. The menu followed a four week cycle and if students did not like what was on the menu they could have the alternative vegetarian option.

We observed the main lunchtime meal during our inspection visit which was taken in the gallery /dining room. Students could choose where they sat and who they sat with; dessert was a selection of fruit. If the students were away from FCRT at lunch time they were provided with a packed lunch.

Students were provided with snacks throughout the day, these were mainly fruit or yoghurts and fresh water, coffee, tea and cordials were also available. A separate fridge was available in the dining room for additional snacks such as yoghurts and milkshakes for those students that required additional nutrition.

The kitchen equipment and fittings were well maintained. The kitchen had been recently assessed by the local environmental authority and had been awarded a 4 star rating out of 5. The manager told us the kitchen staff completed daily, weekly and monthly cleans.

Students had their weight recorded at the beginning of each term and records showed any major fluctuations in weight were responded to appropriately. Students were supported to maintain their health. Records showed students were supported to visit local GP's and health professionals when required. Staff told us they would accompany and support a student if they wished or needed to go to the local GP; the majority of students had regular checks with their own optician or Dentist. FCRT employed their own physiotherapists and three nurses and students were referred to other health care professionals such as speech therapists, social workers and dieticians, according to their needs.

Student's needs were taken into account when the premises were adapted and decorated. Clear pictorial signage was displayed throughout the FCRT and WHF. People's bedroom doors had their own personalised sign with their name on them in addition to their bedroom number. Throughout the FCRT and WHF there were clear pictorial displays that encouraged learning and independence for the students. For example, in the washrooms there were pictures and guidance on the importance of washing hands which was linked to the effectiveness of washing the horses.

Is the service caring?

Our findings

We spoke to five relatives who all spoke extremely positively about the service and care their daughter/son received at WHF. One relative told us, "All the staff are fantastic; they genuinely care for all the students". Another relative said, "It's fantastic, the staff treat everyone as an individual, everything is done for the students best interest, I can't fault it". One parent told us, "They understand my daughter so well and know what works best for her".

Every relative we spoke to stated they felt fully involved and consulted in their daughters/sons care. Parents told us at the beginning of term students can suffer from homesickness; if this happened staff kept them involved and worked with the student and the parent to resolve the issue.

Staff we spoke with demonstrated a thorough knowledge of the students, how they preferred their care to be given and what interactions worked best for each student. Staff were familiar with how students preferred to communicate and all parents told us staff treated each student individually as an adult. Throughout the inspection we observed the atmosphere between students and staff was warm, friendly and relaxed with staff interacting positively with students. Students actively sought out staff for help, advice or just for a chat or to share a joke, which all helped create a friendly, helpful environment for students to learn in.

FCRT and WHF ran a student council. Students told us they could raise issues or concerns with the council and these would then be taken up directly with the staff management team. Students commented this was a helpful process and they were happy to use it and felt issues would be resolved. This meant the students were able to express their views and be involved in making decisions about their care and treatment.

We saw records that showed students views had been listened to and acted upon. For example, students had requested Skype and web cams, this suggestion was put forward to the management team and resources allocated and equipment purchased in time for the 2014/2015 academic year. Students had also requested more access

to their mobile phones in the evening. The students wrote their own Acceptable Use Policy for their mobile phones which was agreed and in September 2014 all staff were instructed on the new mobile phone use policy.

All parents and students received a copy of the FETH Course Handbook before starting at FCRT. The handbook provided detailed information and guidance on all aspects of living at FCRT and clearly outlined the provider's expectations for each student. The student copy of the handbook had been completed with pictorial images to help the students understand the content. Students, parents and guardians were asked to sign an acknowledgement form confirming they had read and understood the handbook and agreed to abide by its contents. This meant people were aware of the rules before they commenced their education at FCRT and WHF.

The ethos of FCRT is to promote student independence and enable them to live as independently as possible within a supportive, safe community. Students were encouraged to participate in the normal household tasks such as sorting and doing laundry, learning to budget for food and groceries and learning to manage their money. In the second and third years at FCRT students were encouraged to learn to become more independent and learn to cook their own meals, manage a budget, travel independently and move into a working environment. Students were treated with dignity and respect by all staff and were taught to respect and care for each other through sharing living accommodation and the interaction with the horses.

Students were supported to understand their care and treatment choices. Students had a pictorial version of their weekly itinerary. The clear pictorial format ensured students could follow their own support plan and feel involved in their daily schedule.

Students had their own bedrooms which they locked when they were not in them to protect their privacy. Some bedrooms had en-suite facilities. If a student did not have en-suite facilities in their own bedroom they shared a bathroom with a small number of other students. Student could personalise their bedrooms by providing their own duvet and pillow cases, posters and photographs.

Is the service caring?

Students could telephone or skype their relatives in the evening during their free time. Parents told us if they knew they could contact the staff at any time if they needed to speak to their son/daughter in an emergency.

Students told us their birthdays were celebrated at WHF; a cake would be made and presented at the main meal where the students would all sing happy birthday.



Is the service responsive?

Our findings

Relatives spoke very positively about the support their Sons/daughters received at WHF. One parent commented they had very high expectations and had stated, "I've found the whole process a lot less stressful than I imagined, the staff have been excellent and the whole service is brilliant". Another parent said, "Their whole ethos of teaching independent living and working is fantastic and just what my daughter needs".

Every parent we spoke with said they had been fully informed and felt involved in their sons/daughters care and support. Parent stated communication was, "Excellent" and "Prompt". One parent explained how staff had reacted with sensitivity and thoughtfulness when their daughter had lost some confidence in her riding ability. They said the staff continued to actively involve her in the riding lessons as an unmounted student. This enabled her to gain her confidence at her own pace until she felt ready to get back onto the horse again.

All students were assessed before they were offered a place at FCRT. Assessments were a three phase approach with the first assessment being an initial visit and the second assessment conducted over one full day. If these were successful the student went on to complete a seven day residential assessment. The seven day assessment enabled both the student and staff members to assess the skills and needs of the student. The residential assessments were offered during term time so that students got a good understanding of living at FCRT and WHF.

During the inspection visit we tracked the care of three students. This involved meeting the student, observing staff interactions and reviewing the student's Individual Learning Plan (ILP), other supporting records and their medication records. Each student had a person centred risk management assessment completed to ensure students remained safe and healthy. We viewed additional records that supported the student's ILP's such as their daily activities and goals that supported the targets detailed in their ILP.

We saw support plans that gave clear advice and guidance around how to manage people's particular health conditions, for example clear advice for staff to follow if students were diabetic or epileptic. The provider had a

system in place that recorded daily interventions with each student. The entries reflected all the action and interventions the staff had supported the student with and gave a clear record of any events or incidents that occurred.

Student's ILP's were developed in the students first term as part of their on-going assessment. The ILP's addressed what support each student required in their decision making and where possible linked each learning topic to a horse related scenario. For example, one student's ILP stated they needed support with choosing appropriate clothing, for instance they may not dress warmly enough for the time of year. The ILP stated how the student would be supported to dress appropriately while learning about the situations when horses would need extra rugs and blankets to keep them warm in the winter. ILP's were reviewed and updated each term and reflected the student's achievements and goals for the coming term.

Staff told us another example of using the horses to aid learning. One student had developed a fear of injections and needed to have blood tests. The staff arranged for the student to watch while a horse had some routine injections to show how calm and unafraid the horse was. The student then had their own blood tests calmly.

ILP's focussed on promoting students independence and described the best methods staff could support the student to achieve this, for example travelling independently into a local town by themselves. Staff supported students to learn how to use and understand transport timetables, budget for their ticket, buy the ticket and independently traveling to and from the town by themselves. Money management was a core topic taught to all students to support them and provide independent living skills.

The ILP's we reviewed gave specific achievable goals for each student and were updated each term. The ILP's promoted the use of transferable skills between caring for the horses, for example tying knots to secure the horses and engaging the students fine motor skills by practicing the method of tying the knot. These skills could then be transferred into everyday use as an aid for independent or supported living in the future.

FCRT offered a varied activity programme and in the evenings students had the opportunity to participate in a range of activities such as; gym, swimming, youth clubs, boxercise classes, cycling, nature clubs and cinema visits.



Is the service responsive?

The routine evening activities were also planned to teach students self-care, care of equipment and belongings and independent living skills such as cleaning, laundry and washing and basic cooking.

Students were supported to take part in a large variety of activities both in groups or on an individual basis. One student told us about the evening ride they had taken part in the previous day. They told us they really enjoyed the ride and told us a small group of students had been accompanied out into the forest to ride to a local pub, where they had some fish and chips. They said, "It was really good". There was a variety of scheduled activities on offer for all students. These included a Youth Activity Day which offered a range of physical activities for the students to take part in such as; tree climbing, canoeing, low and high ropes, raft building and an adventure course.

Students had also been given the opportunity to camp for three days at The Badminton Horse Trials. Students told us they had really enjoyed the experience, especially sleeping in the tents and watching the professional event riders go around the cross country course.

A future programme of weekend activities was advertised and students were encouraged to participate if they wished, examples of activities included; Dorset Heavy Horses, trips into Kimmeridge Bay and a trip to a local equestrian show.

Students and relatives told us they knew how to make a complaint if they needed to and were confident any concerns would be addressed, although none of them had ever needed to raise a complaint. We saw there was written up to date guidance available for people in the FCRT handbook and guidance in the reception of WHF on how to make a complaint and who to contact. The manager confirmed the service had not received any formal complaints since the last Care Quality Commission inspection. We reviewed the provider's complaints policy which gave up to date information for people on how to make a complaint or raise a concern.

There was a system in place to provide support and assistance for students and their relatives when they completed their three year Further Education Through Horsemastership (FETH) course. Staff were available to ensure each student was given as much support and guidance as possible to decide what they wanted to do post college, in order for them to maintain an independent lifestyle.

Is the service well-led?

Our findings

Relatives we spoke with told us they felt FCRT and WHF were well led and had a clear management structure. Parents commented the management team kept them fully informed about the centre and were open and honest about the day to day experiences of students living there. All parents we spoke with told us they felt that communication at FCRT and WHF was excellent.

Comments and views from parents, students and health professionals indicated the culture at FCRT and WHF was a friendly, open and supportive one. Students were actively encouraged to become more independent and relatives and guardians were regularly consulted regarding their sons/daughters care and learning.

Students were actively encouraged to take part and support the local community. Students had work experience and community awareness placements. This enabled students to maintain their independence and allowed them to prepare for the working environment. Examples of work experience were; cafés, riding establishments and gardening.

Staff told us they felt very well supported by the management team. One member of staff said, "There is always someone to ask if you need further help". Staff commented the manager was very supportive, approachable and always available to give advice, help and support.

Staff confirmed they had regular reviews and annual appraisals with their manager and found these to be very useful. They commented the appraisal process was very

helpful and ensured they were given the opportunity to request any specific training or courses that they wanted to complete. Records we saw confirmed staff reviews were completed on a regular basis.

We checked a range of policies the manager had in place which covered a range of core topics such as; safeguarding, grievance and disciplinary processes and recruitment.

The provider had a system in place to monitor the quality of the service provided. This included questionnaires that FCRT sent out each June to ensure they consulted with parents, guardians and students. The questionnaires covered topics such as; conflict management, communication, student progress and community awareness. The questionnaires were reviewed and analysed once completed to ensure any areas requiring improvement were acted upon.

The provider completed a series of quality audits on different aspects of the service such as, the environment, medicine management and health and safety. Records showed daily, weekly and monthly cleaning and maintenance checks were completed to ensure FCRT and WHF provided a safe environment.

Accidents and incidents were recorded and there was a helpful flow chart for staff guidance on what to do and who to contact in the event of a critical incident. Concerns were then discussed with the staff team with a view to reducing the risk of re-occurrence. Plans would then be put in place to ensure any re-occurrence of the incident was reduced. Analysis was completed on a regular basis which allowed the management team to track for any themes or trends.