

Oldfield Farm

Quality Report

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Date of inspection visit: 8 September 2017
Date of publication: 17/11/2017

This report describes our judgement of the quality of care at this location. It is based on a combination of what we found when we inspected and a review of all information available to CQC including information given to us from patients, the public and other organisations

Overall summary

We do not currently rate independent standalone substance misuse services.

We carried out this unannounced focused inspection to assess whether the provider had met the requirement notice we served following our inspection in September 2016 related to regulation 12 (safe care and treatment) Health and Social Care Act 2008 (regulated activities) regulations 2014 and whether action had been taken over our concerns.

During this inspection we looked at four key questions, safe, effective, caring, and well-led where we had previously identified concerns. We did not inspect responsive.

We found the following areas of improvement since the last inspection:

- The service now had a comprehensive ligature risk assessment, which highlighted ligature points in each room. The assessment included an action plan to either remove or reduce any identified risk.
- Staff now received regular supervision. The manager documented this in staff records.
- All staff had the right training to care for clients. The manager had ensured this included Mental Capacity Act training.
- Clients now had individualised early exit plans. Staff knew who to inform if clients chose to leave the service before their treatment ended. These were included in each client's care notes.
- The provider had contact details of advocacy services on a noticeboard and in the resident's handbook. The manager knew about changes to services and kept the information up to date.
- Staff and clients now held residents house meetings. Staff recorded feedback in minutes, including when changes had been made as a result of the meeting.
- The manager had improved the quality assessment of the service. Staff could now see where improvements to care had been made.

Summary of findings

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Summary of this inspection

Background to Oldfield Farm

Oldfield Farm was registered with CQC in November 2014 and started to accept clients in February 2016. The service is registered to provide the following regulated activities:

Accommodation for persons who require treatment for substance misuse.

Good News Family Care (Homes) Ltd is a Christian based registered charity that provides services at Oldfield Farm. Funding for client placements can be through local authority or privately.

Oldfield Farm provides accommodation for up to four women aged 18 to 64 and women with their children (aged zero to seven) who have been assessed as being in need of residential support to assist in their recovery from addiction to alcohol, drugs or other life controlling issues such as self-harm. Staff at the service monitor and ensure safe administration if individuals require detoxification from controlled drugs. Referrals come from churches,

prisons, drug and alcohol teams and social care. Oldfield Farm provides a structured recovery programme consisting of a combination of work-skills projects and therapeutic courses to support residents in their recovery.

On the day of inspection, two clients were present and there were no children.

The registered manager was present on the day of inspection. A registered manager is a person who has registered with the Care Quality Commission to manage the home. 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 home is managed.

We previously inspected this service in September 2016 and found Regulation 12 (safe care and treatment) of the Health and Social Care Act 2008 (regulated activities) regulations 2014 had been breached along with other concerns.

Our inspection team

The team that inspected the service comprised CQC inspector Nicholas Warren (inspection lead), and one other CQC inspector.

Why we carried out this inspection

We carried out this unannounced focused inspection to assess whether the provider had met the requirement notice we served following our inspection in September

2016 related to regulation 12 (safe care and treatment) Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 and whether action had been taken over our concerns.

How we carried out this inspection

To understand the experience of people who use services, we ask the following five questions about every service:

- Is it safe?
- Is it effective?
- Is it caring?
- Is it responsive to people's needs?
- Is it well led?

Summary of this inspection

Before the inspection visit, we reviewed information we held about the service. Some concerns were raised in our previous inspection and we reviewed these concerns alongside the breach.

During the inspection visit, the inspection team:

- Looked at the quality of the physical environment
- spoke with one client
- spoke with the registered manager and the charity manager
- spoke with three support workers employed by the provider
- collected feedback using comment cards from one client

- spoke to the community nurse of one client
- looked at two care and treatment records, including medicines records, for clients
- looked at policies, procedures and other documents relating to the running of the service.

Before the inspection visit, we reviewed information we held about the service. We received no information that would cause us to re-inspect the responsive key domain. Therefore, during this unannounced inspection, we focussed on the safe domain where we had previously told the provider action must be taken for improvement and reviewed the concerns previously found in the effective, caring and well led domains.

Information about Oldfield Farm

Oldfield Farm follow an initiative called 'freedom2live'. The 'freedom2live' residential recovery programme is an initiative designed by Good News Family Care to help women break free from substance dependency and destructive behaviours, providing an opportunity for a change of lifestyle to women who are committed to overcoming life-controlling dependencies such as alcohol, drug dependency and self-harm. The programme is supported by the principles of the 12-step

model of abstinence, which is a set of guiding principles outlining a course of action for recovery from addiction. As well as addressing issues of addiction, the care programme offers help to build skills needed to move on into the community and live independently. The length of stay was expected to be six months before the client would move on to the next stage of recovery offered by Good News Family care at another location.

What people who use the service say

We spoke with one client and looked at feedback from others. Clients felt safe and able to express their feelings. They described staff as caring and helpful. Clients believed that staff understood their needs and responded effectively to them.

Summary of this inspection

The five questions we ask about services and what we found

We always ask the following five questions of services.

Are services safe?

We do not currently rate standalone substance misuse services.

We focussed our inspection on concerns relating to safety of the environment.

On this inspection we found the following areas of good practice:

- The manager had completed a comprehensive ligature risk assessment identifying ligature points around the building. This helped reduce any risk clients could hurt themselves easily and made sure staff were aware of where risks were.
- All staff now received mandatory training including safeguarding, mental capacity act and risk assessment.
- Staff completed risk assessments before and on admission. Clients were involved with their risk assessment.
- Staff knew what incidents to report and how to do this.
- The service reported no incidents between 1 June 2017 and 8 September 2017.

Are services effective?

We do not currently rate standalone substance misuse services.

We focussed our inspection on three areas relating to staff supervision, training and care plans.

On this inspection we found:

- Staff now had regular supervision and the manager recorded this in staff records.
- All staff had completed Mental Capacity Act training.
- Clients now had individualised early exit plans so staff knew who to inform if clients chose to leave the service before their treatment ended.

Are services caring?

We do not currently rate standalone substance misuse services.

We focussed our inspection on two areas relating to advocacy and involving clients in their care.

On this inspection we found:

- Staff and clients now knew about advocacy service. The manager knew about changes to advocacy services and updated client information regularly.

Summary of this inspection

- Community meetings now took place monthly and clients could give feedback on their care. Minutes of these meetings recorded the action staff took in response to the client feedback.

Are services responsive?

We did not inspect this area on this inspection.

Are services well-led?

We do not currently rate standalone substance misuse services.

We focussed our inspection on one area relating to assessing performance.

On this inspection we found:

- Information seen showed the provider had collected data relating to how care had improved and that the information had been shared with the staff.

Detailed findings from this inspection

Mental Capacity Act and Deprivation of Liberty Safeguards

The manager had provided Mental Capacity Act training to all staff.

Staff understood what capacity meant and could demonstrate the guiding principles of the Mental Capacity Act. Clients were assessed when referred to the service and clients were not admitted if they lacked capacity.

The staff understood Deprivation of Liberty safeguards and would discuss any concerns of capacity immediately with the manager.

Substance misuse services

Safe

Effective

Caring

Well-led

Are substance misuse services safe?

We do not currently rate standalone substance misuse services.

Safe and clean environment

- The layout of Oldfield Farm meant that staff could not observe all areas from a central point. When in the building clients spent most of their time with staff in communal areas. Staff observed clients regularly and in response to any identified risks.
- The manager completed a ligature risk assessment that identified the ligature points at Oldfield Farm. Identified ligature points had either been removed or action taken to reduce risks around them such as restricting access. A ligature point is a place to which patients' intent on self-harm could tie something to harm themselves. Ligatures are usually cloth or rope items used by patients to harm themselves.
- The service accommodated only women and so complied with current guidance on same sex accommodation.
- The lounge, kitchen and bathrooms were clean and tidy. Cleaning rotas were in place and demonstrated regular cleaning. There was a homely and relaxed feel to rooms.
- Staff followed infection control principles. The service displayed hand-washing posters at each sink in the building and provided suitable hand gels. A specialist had tested the water supply for Legionnaires' disease and the annual test was next due in November 2017.
- Electrical appliance testing stickers were visible and in date. Oldfield Farm employed a maintenance person who ensured equipment was maintained safely. Staff and clients shared responsibility for maintaining a safe and clean environment.

- The fire service had carried out a risk assessment of the premises which demonstrated that Oldfield Farm was compliant with fire service standards.
- There was an environmental health and safety risk assessment in place. Staff had completed this in August 2017 and no issues had been found.
- Staff did not use emergency alarms as the building was small. Staff and clients could summon assistance by calling for help. There had been no incidents since the service had started to accept clients in February 2016.

Safe staffing

- Good News Family Care (Homes) Limited employed four support workers and a registered manager at Oldfield Farm. The manager used staff from the provider's other local facility to cover annual leave and sickness. No staff had left or been off sick between 1 June 2017 and 8 September 2017.
- This service had enough staff to cover shifts and did not use agency or bank staff. If necessary, the manager was able to adjust numbers with staff from the provider's other local facility. These staff were all familiar with Oldfield Farm.
- There were support workers on duty during the day. Numbers varied, between one and three depending on client need and activity level. One support worker was present at night to meet the needs of clients.
- The manager was available from nine to five during the week and was an addition to the number of support workers on duty. The charity manager was available on call 24 hours a day. The duty rota reflected these shift patterns.
- The local GP surgery provided medical cover and clients registered with the surgery on admission. Clients would see the GP at the local medical clinic. If a GP visited, they

Substance misuse services

would see the client in their room. Oldfield Farm kept no emergency equipment on site. Out-of-hours and emergency medical care was provided by the GP service or by dialling 999.

- All clients had an allocated worker who provided one to one time at least weekly. Clients confirmed this took place.
- The service had enough staff which meant that clients did not have their leave or activities cancelled. Outdoor activities were sometimes rearranged due to poor weather.
- All staff received mandatory training. Staff recorded training in a register that was monitored by the manager. Staff mandatory training levels were 100%. Training included safeguarding adults and children, substance misuse, health and safety, fire, first aid, and risk assessment.

Assessing and managing risk to clients and staff

- The provider had designed the risk assessment and it included areas such as physical health, mental health, and previous risks. The assessments were completed prior to and on admission in conjunction with the client. Staff updated the plans regularly. Risk management plans were relevant to the risks identified.
- The provider had some blanket restrictions in place that included the use of phones, access to leave and receiving visitors. These restrictions were justified and the manager gave a clear basis for each. Staff discussed blanket restrictions with clients on admission and clients signed an agreement to say they understood and consented to the restrictions. Staff reviewed and changed restrictions as clients progressed through treatment.
- The location did not accept clients detained under the Mental Health Act. Clients received treatment on a voluntary basis and could leave if they wished to.
- The provider had policies for observation and for staff searching clients suspected of using or bringing banned substances into the building. Risk plans reflected the observation policy.
- Staff knew how to identify safeguarding concerns and what actions to take. Safeguarding training compliance was 100%. The local authority provided training for

safeguarding for vulnerable adults, children and young people. The service had an identified safeguarding lead who staff could go to for further support. Staff had not reported any safeguarding alerts or concerns to the CQC from 1 June 2017 to 8 Sept 2017.

- The location had policies regarding children visiting and included when visits could take place in the agreement. Prior to admission, staff would clarify with the referring authority or referrer if there were any issues with children visiting the client.

Track record on safety

- There had been no incidents or serious incidents reported between 1 June 2017 and 8 September 2017.

Reporting incidents and learning from when things go wrong

- Staff understood what an incident was and how to report them. The manager discussed how they would support staff with reflective practice and supervision in the event of a serious incident. If a serious incident took place, the manager said they would also offer debrief. Debrief is a meeting of the people involved in an incident and is designed to allow people to talk about the event to minimise any personal trauma to those involved.
- The manager described how they would share lessons learnt in team meetings as well as share feedback from residents house meetings. Minutes from community meetings demonstrated staff made changes following client feedback.
- All staff said they encouraged openness and honesty with clients. Client feedback reflected staff explained things when they went wrong.

Duty of candour

- The manager and staff knew about duty of candour but had not had to use it from the time they had opened in February 2016. The duty of candour is a legal duty on providers to inform and apologise if there have been mistakes in their care that has led to significant harm.

Substance misuse services

Are substance misuse services effective? (for example, treatment is effective)

We do not currently rate standalone substance misuse services.

Effective Skilled staff to deliver care

- During this inspection, staff said they had regular supervision. Records showed that the manager carried out and recorded supervision every six to eight weeks. This was in line with the provider's policy.
- The manager had arranged for all staff to have Mental Capacity Act training. Training records showed that all staff had completed this training. Staff demonstrated a good understanding of mental capacity.

Management of transition arrangements, referral and discharge

- Clients now had individualised early exit plans included in their care notes. The exit plan we looked at was complete. It detailed the discussion held with the client and included all information needed to assist a client if they decided to leave before their treatment had ended.

Are substance misuse services caring?

We do not currently rate standalone substance misuse services.

The involvement of clients in the care they receive

On this inspection we found:

- Staff were aware of advocacy services. Advocacy contact details were provided in the admission packs given to

clients and the information booklet in the lounge. The local advocacy service was not currently operating and the manager was waiting for further information to update the client information. In the meantime, arrangements were in place to use another advocacy service in another area.

- Residents house meetings now took place monthly. Minutes showed where clients had expressed concerns staff had listened to and acted upon them where appropriate.
- Clients said staff were caring and helpful and they felt understood, could express their feelings and staff responded to their needs effectively. Clients said they felt safe. Feedback left by previous clients supported this.

Are substance misuse services well-led?

We do not currently rate standalone substance misuse services.

- On this inspection, the provider had collected data relating to how care had improved. The quality assessment framework developed reflected the CQC standards for this type of service and showed how the provider would meet these requirements. Quality assurance frameworks allow providers to look at their strengths and weaknesses and continuously improve their quality of service. The manager shared this information with staff at team meetings. The manager also attended the monthly board meetings and fed back improvements there.