

Alma Care Homes Telford Limited

The Farmstead

Inspection report

Bryce Way
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Ratings

Overall rating for this service	Good ●
Is the service safe?	Good ●
Is the service effective?	Good ●
Is the service well-led?	Requires Improvement ●

Summary of findings

Overall summary

About the service

The Farmstead is a nursing home providing personal and nursing care to 35 people aged 65 and over at the time of the inspection.

The Farmstead can support up to 66 people across three floors, in one purpose-built building. Each floor has its own communal dining and living areas with a kitchenette. A passenger lift gives people and staff access to all floors.

People's experience of using this service and what we found

The provider had systems in place which recorded and monitored the quality of care staff provided at the home. However, improvement was needed to ensure effective management oversight of these and the whole home. There had been a lack of consistent leadership and management since our previous inspection, which had affected staff confidence in managers.

People with dementia would benefit from some improvement to the home's environment to ensure it fully met their needs and was dementia friendly.

People had a positive experience at the home and praised staff for their support and encouragement. Some people were admitted from hospital for rehabilitation to enable them to go back to their usual place of residence.

People were protected from avoidable harm and abuse because staff understood the support people needed and how to recognise and report safety concerns. People were supported to stay safe because risks were assessed and planned for. People were supported by enough staff. People received their medicines when they needed them.

Infection control practices helped to keep people safe from the risk of cross infection. The provider had updated their policies and practices during the current pandemic to ensure guidance and legislation around COVID-19 was followed.

People's needs were assessed and their care was planned for. Staff worked in partnership with local health and social care professionals to help keep people healthy and achieve their goals. Staff knew how to meet people's needs. People were supported to eat and drink enough.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection

The last rating for this service was requires improvement (published 12 November 2019).

Why we inspected

We received concerns in relation to the culture at the home, leadership and management and concerns around some people's care. As a result, we undertook a focused inspection to review the key questions of safe, effective and well-led only.

We reviewed the information we held about the service. No areas of concern were identified in the other key questions. We therefore did not inspect them. Ratings from previous comprehensive inspections for those key questions were used in calculating the overall rating at this inspection.

We looked at infection prevention and control measures under the safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to COVID-19 and other infection outbreaks effectively.

The overall rating for the service has changed from requires improvement to good. This is based on our findings at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for The Farmstead on our website at www.cqc.org.uk.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. We will work with the local authority to monitor progress. If we receive any concerning information we may inspect sooner.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Good ●

The service was safe.

Details are in our safe findings below.

Is the service effective?

Good ●

The service was effective.

Details are in our effective findings below.

Is the service well-led?

Requires Improvement ●

The service was not always well-led.

Details are in our well-led findings below.

The Farmstead

Detailed findings

Background to this inspection

The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Care Act 2014.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

Inspection team

The inspection was carried out by two inspectors.

Service and service type

The Farmstead is a 'care home'. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

The service did not have a manager registered with the Care Quality Commission and no applications had been received. This meant the provider is legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection

This inspection was unannounced. We attempted to give short notice of the inspection from outside the home, but our telephone call to the home was not answered. We wanted to give short notice due to the risks associated with Covid-19. We needed to know of the Covid-19 status in the home and discuss the infection, prevention and control measures in place on our arrival.

What we did before the inspection

The provider was not asked to complete a provider information return prior to this inspection. This is

information we ask providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report.

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and other professionals who work with the service. We used all of this information to plan our inspection.

During the inspection

We spoke with five people who used the service about their experience of the care provided. We spoke with 13 members of staff including care and nursing staff, the regional manager, quality manager and regional director.

We reviewed a range of records. This included five people's care records and multiple medication records. We looked at two staff files in relation to recruitment and a variety of records relating to the management of the service, including policies and procedures.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same.

This meant people were safe and protected from avoidable harm.

Preventing and controlling infection

- Although staff had sufficient supplies of and access to personal protective equipment (PPE), there was a lack of PPE stations, dispensers and disposal points across the home. The provider rectified this during our visit and wall mounted dispensers were purchased and installed across the home whilst we were there.
- We were assured the provider was admitting people safely to the service. People admitted to the home were isolated for 14 days in accordance with current national guidance.
- We were assured the provider was accessing testing for people using the service and staff.
- We were assured the provider was using PPE effectively and safely. Staff wore PPE in accordance with current national guidance.
- We were assured the provider was promoting safety through the layout and hygiene practices of the premises. The provider's cleaning arrangements at the home helped to keep people protected from the risk of infection. Good practice made sure the environment, including people's rooms and equipment were clean and hygienic.

Staffing and recruitment

- Before prospective staff started work at The Farmstead, they were subject to reference and identity checks and checks with the Disclosure and Barring Service (DBS). DBS checks are used to vet staff and prevent unsuitable people from working in care. Although Right to Work information was not completed for the records we viewed, the provider had obtained all other necessary identity checks which ensured staff were eligible to work in the UK. This was discussed with the regional manager, who had already started audits of all staff recruitment files to identify any actions needed.
- On the day of our inspection, there were sufficient staff to support people to stay safe and meet their needs. People told us they felt there were enough staff on duty to support them on a daily basis.
- The provider ensured registration details for nursing staff were checked with the Nursing and Midwifery Council to ensure these were valid and current.

Systems and processes to safeguard people from the risk of abuse

- People felt they were protected from harm. One person told us, "I feel safe with the staff and when they were moving me around on the hoist. It's a lovely place and I feel very safe staying here."
- The provider had systems in place to respond to and report concerns about people's safety. Staff had worked with the local authority where concerns had been raised, which helped to ensure people were protected from avoidable harm.

Assessing risk, safety monitoring and management

- Staff were aware of risks associated with people's care and knew the support they needed to help keep them safe. For example, we saw one staff member explain to a person why they needed additional support to safely move. A second staff member was quickly available to safely support this person.
- People were supported to stay safe and identified risks to people had been assessed, monitored and managed by staff. Staff were supported by health and social care professionals, such as social workers and physiotherapists, to identify and manage these risks.
- The provider ensured people lived in a safe environment. Risks associated with the premises and equipment were managed through a programme of safety checks and maintenance at the home. This included ensuring equipment was in good working order and all utilities were serviced and safe.

Using medicines safely

- People were supported by staff to take their medicines when they needed them. We saw staff support people to safely take their medicine and they completed the required records accurately.
- The provider had safe systems in place to ensure the proper and safe use of medicines. When medicine errors were detected, staff took action to ensure the safety of the person. This included contacting the person's GP if needed, investigating the error and informing relevant external agencies as required.

Learning lessons when things go wrong

- The provider had a system in place to record individual incidents and accidents. Report forms were completed by staff with good detail and reviewed by management. Reports we viewed showed these had been seen by the home managers with lessons learnt and further actions identified as necessary.
- Staff understood their responsibilities to report incidents, accidents and any concerns they may have about people's safety.

Is the service effective?

Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

At the last inspection this key question was rated as requires improvement. At this inspection this key question has now improved to good.

This meant people's outcomes were consistently good and people's feedback confirmed this.

Ensuring consent to care and treatment in line with law and guidance

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The Act requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA.

In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS).

We checked whether the service was working within the principles of the MCA.

- Since our previous inspection, the provider had made improvements to how people's ability to make decisions had been incorporated into their care plans. This helped staff to understand who needed extra time or support to make their own decisions or if staff needed to make decisions for them.
- At the time of our visit, no DoLS had been authorised. The regional manager confirmed applications had been submitted for people who required them and these were with the local authority for assessment.
- People told us staff asked them for their permission before they assisted them with their care and we saw this happened throughout our visit.

Supporting people to eat and drink enough to maintain a balanced diet

- The provider had made improvements since our previous inspection and staff now recorded what people drank. For example, people had daily fluid targets and staff were more knowledgeable about the importance of people drinking enough.
- People had the support they needed to eat and drink enough. We saw people had drinks and snacks offered to them throughout the day of our visit. Staff offered people choices at lunch time regarding seating, drinks, food and if they wanted protective coverings for their clothes.
- The regional manager had already started to implement further improvements in people's dining experiences. They told us, "Meal times are a big part of the day and they (people) are not being involved."

This is about them, not us and them having choices."

Staff support: induction, training, skills and experience

- Staff told us they had regular supervision within their roles but felt more supported by their colleagues, rather than management. During their induction into their roles staff confirmed they had worked alongside other staff when they first started, but did not feel they had a structured induction. We spoke with the regional manager about this who agreed to look at this.
- Staff had the skills they needed to support people. People told us they felt staff were well trained and praised the permanent staff for their knowledge, skills and support they gave to them. One person told us staff understood what they needed and how to support them with their specific health condition. They said, "They are patient, friendly and I can have a laugh with them."

Adapting service, design, decoration to meet people's needs

- Although there was some signage around the home, the environment did not fully support people with dementia or visual impairment. At the time of our visit, due to the home not being fully occupied, this caused little impact for people. The regional manager told us they had already identified the environment needed to be more dementia friendly and this work would soon be started. We will check this at our next inspection.
- People had the benefit of The Farmstead being a purpose built nursing home. Doorways and corridors were wide to enable wheelchairs and equipment to move through them unhindered. Handrails were fixed to corridor walls which all helped people move around the home with ease. One person told us, "It really is a lovely environment with plenty of space to get around."

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- People's care and support needs were assessed and care was planned to meet those needs. External specialist support was utilised to help ensure people's needs were met and current best practice guidance was used and followed.
- People who were admitted to the enablement beds had a rehabilitation assessment completed. They had individual goals identified so they could get back to their usual place of residence, for example one person's goal was to mobilise independently. This person told us, "They really and truly have helped me." They spoke about the patience, support and encouragement staff had given them to enable them to walk without their support.
- One person told us they were happy with their achievement at being able to walk an increased distance on the day of our visit. We saw this and also saw them being praised and encouraged by at least three staff members.

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- The provider worked with other organisations to help people receive a joined up approach to their care and support. People told us they saw professionals from outside the home such as physiotherapists, tissue viability nurses and community health teams.
- People who were admitted to the home from hospital had assessments completed to identify the support and rehabilitation they needed. This support was then provided in liaison with the local authority and other organisations.

Is the service well-led?

Our findings

Well-Led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

At the last inspection this key question was rated as requires improvement. At this inspection this key question has remained the same.

This meant the service management and leadership was inconsistent. Leaders and the culture they created did not always support the delivery of high-quality, person-centred care.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- The home has not had a registered manager in post since March 2020 and we have not received any application for one prior to our inspection. This is a ratings limiter for well-led, therefore we cannot improve the rating of requires improvement.
- Since our previous inspection, in August 2019, we are aware of at least three different managers being in post at the home. None had applied to register with us as manager. It is a requirement of the provider's registration with us that they have a registered manager in post.
- A week prior to our inspection and due to changes in the management company the provider used to manage the home, there had been a significant change in senior management at the home. The provider had recognised improvement was needed at the home and had also employed a regional manager who reported directly to them. The regional manager was acting as interim home manager.
- The provider's governance arrangements were not always supported by all staff. The oversight of people's care records needed some improvement, such as daily records and reviewing care plans. Staff recorded how much people drank, but it was not always clear if these records had been checked and monitored. Although this had not caused any impact on people, if people's health declined there was a potential risk this may not be identified.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- People and staff had differing opinions of the culture at the home. People we spoke with praised the atmosphere, environment and the staff who supported them. Whereas staff told us they did not feel valued or respected due to the numerous changes in management at the home.
- Staff told us they had a lack of confidence in previous managers and were not confident to raise concerns due to their poor experiences when they had done so previously. One staff member told us there had been a culture of staff being allowed to get away with not completing records or following protocols, which was demoralising. Staff told us they were nervous of yet another change of management and were, "cautiously optimistic" with the new management.

Continuous learning and improving care

- Although the provider has achieved a rating of good in the safe domain, the systems in place to monitor

this need some improvements. We saw evidence of quality audits completed however there was a lack of oversight to show any actions required, if the actions had been completed and if the actions had been followed up from one month to the next. It was therefore difficult to see how the provider monitored improvements.

- The regional manager and new management had already identified many of the concerns we had been made aware of prior to our inspection. They demonstrated either during or after our site visit they were already taking action, such as recognising the oversight of people's care records was an area that required improvement. This was a positive step in showing they were able to identify and take action to mitigate risk within the home. We will check improvements have been made at the next inspection.

How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- Prior to our inspection we had received concerns the provider did not always follow the duty of candour for being open and honest. Due to the change in management and lack of records it was difficult to follow this up. However, we made the regional manager aware of our concerns and they followed this up with us after our visit. The regional manager was aware of and understood the duty of candour requirements and we were therefore assured.

- Prior to our inspection we were made aware of an incident at the home, which involved a serious injury. The provider had failed to notify us of this incident at the time it happened. This incident had occurred before the previous home manager was in post but they rectified this and submitted a retrospective notification to us.

- The previous inspection rating was displayed in the home and on the providers website, in line with our requirements.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- Staff did not feel involved in the running of the home. One staff member said, "This home could be fabulous with the right management". Another staff member said, "Leadership and management is at the core of what needs to improve at this home. We need to be led, recognised and supported as a staff team."

- People told us they had been supported to make telephone and video calls to their family during the current pandemic. The regional manager told us they were reviewing socialisation and activities for people to ensure no one ever felt lonely.

- The new management company and regional manager had organised a staff meeting which took place on the day of our visit. This meeting was to ensure staff were fully informed of the management changes and would have their questions answered by the new senior managers.

Working in partnership with others

- Prior to our inspection, external stakeholders told us they did not feel management had been collaborative or shared information with them effectively. We will work with external stakeholders to monitor this.

- People spoke positively about the treatment and care they received. They told us staff and external health professionals encouraged them in line with their agreed goals.

- The service worked in partnership with other agencies to ensure people's needs were met. People told us they felt fully involved in their own care and were visited regularly by health professionals.