

Health and Home (Essex) Limited

Barling Lodge

Inspection report

399 Little Wakering Road
Little Wakering
Essex
SS3 0GA

Tel: 01702216132

Date of inspection visit:
27 July 2021

Date of publication:
26 August 2021

Ratings

Overall rating for this service	Inspected but not rated
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Is the service safe?	Inspected but not rated
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Summary of findings

Overall summary

About the service

Barling Lodge is a residential care home providing accommodation and personal care to eight people aged 65 and over at the time of the inspection. Some people were living with dementia. The service can support up to 47 people in one adapted building. No people were residing on the first floor of the service.

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

This was a targeted inspection that looked at the service's fire safety arrangements. The provider had a fire risk assessment in place and a designated fire officer. Improvements were required to ensure the service's fire officer and other staff employed at the service were appropriately trained. The provider had updated the escape route floor plan for the service. Personal Emergency Evacuation Plans [PEEPs] were completed for people using the service but minor improvements were required to ensure these were consistently completed.

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 18 June 2021).

At this inspection we found improvements had been made and the provider was no longer in breach of Regulation 12 [Safe care and treatment].

Why we inspected

We undertook this targeted inspection to check whether the Warning Notice we previously served in relation to Regulation 12 [Safe care and treatment] of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 had been met relating to the service's fire safety arrangements. The overall rating for the service has not changed following this targeted inspection and remains Requires Improvement.

CQC have introduced targeted inspections to follow up on Warning Notices or to check specific concerns. They do not look at an entire key question, only the part of the key question we are specifically concerned about. Targeted inspections do not change the rating from the previous inspection. This is because they do not assess all areas of a key question.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. 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?

At our last inspection we rated this key question Requires Improvement.

We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question, we had specific concerns about.

Inspected but not rated

Barling Lodge

Detailed findings

Background to this inspection

The inspection

This was a targeted inspection to check whether the provider had met the requirements of the Warning Notice in relation to Regulation 12 [Safe care and treatment] of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Inspection team

The inspection team consisted of two inspectors.

Service and service type

Barling Lodge 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 had a manager registered with the Care Quality Commission; they were also the registered provider. This means that they are 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.

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 require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We reviewed information we had received about the service since the last inspection. We sought feedback from Essex Fire and Rescue Service. We took this into account when we inspected the service and made the judgements in this report.

During the inspection

We spoke with the registered provider, the provider's newly appointed assistant director and three members of staff. We reviewed records relating to the service's fire safety arrangements and inspected the premises.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We reviewed training summaries for staff employed at the service pertaining to fire safety.

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 in April 2021, this key question was rated as Requires Improvement. We have not changed the rating of this key question, as we have only looked at the part of the key question, we had specific concerns about.

The purpose of this inspection was to check if the provider had met the requirements of the warning notice, we previously served in relation to the service's fire arrangements. We found the provider was compliant with the requirements of the warning notice. We will assess all of the key question at the next comprehensive inspection of the service.

Assessing risk, safety monitoring and management

- Following our last inspection to the service in April 2021, the provider submitted and displayed an amended and updated escape route floor plan for the service.
- Personal Emergency Evacuation Plans [PEEPs] were stored within people's care plan folder and the service's 'emergency grab' folder. This is a bespoke plan for people who may have difficulties evacuating to a place of safety without support or assistance from others. Information was now accurate, but not all PEEPs reflected the actual action to be taken in the event of an evacuation of the service. This was discussed with the provider during feedback and they agreed action would be taken to ensure all PEEPs were consistently completed and included this information.
- The provider had a fire risk assessment in place. The purpose of this document is to identify potential fire hazards, people at risk and evaluate the service's fire safety measures. Following the inspection, the provider was signposted to further develop this document in line with current fire regulations. This referred to including the number of people residing at the service and those people who were ambulant or non-ambulant.
- The service's fire risk assessment referred to the service having a designated member of staff responsible for the service's fire safety. The staff member responsible for the service's fire safety had not received any additional support and training to understand the full requirements of their role as the service's fire officer. This was discussed with the provider during feedback and they agreed action would be taken to ensure they received the appropriate level of training.
- Staff training summaries provided to us following the inspection demonstrated not all staff employed at the service had up to date fire safety training. However, staff were able to explain the action to take on discovering a fire and the service's evacuation procedures.
- Following the inspection, the provider was signposted to resources to develop their approach relating to an 'emergency grab' folder or 'emergency grab' bag for the service. This should contain items and information that are essential to recovering or continuing the provider's business and vital information that will assist staff and the fire and rescue service.