

Country Retirement & Nursing Homes Ltd

Glebe Farm

Inspection report

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Ratings

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

Summary of findings

Overall summary

About the service

Glebe Farm is a care home providing personal and nursing care to nine people aged 18 and over who have a learning disability. Eight young men were living at the home at the time of our inspection.

Each person living at Glebe Farm had their own one-bedroom flat, with en-suite bathroom and living space. There were three buildings surrounding an enclosed courtyard. Each building had three flats and some shared spaces. The home also had a shared kitchen and dining room.

Although this is a new home (built in 2018), it is registered to support nine people, which is larger than recommended by current best practice guidance. The provider worked closely with the local authority during the planning stages and designed a home to meet the needs of people with complex needs.

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

We received positive feedback from relatives and staff, and an external care professional, about the service provided. One relative said, "[The staff are] very good. It's quite amazing how they have managed to deal with [my family member]. It's an amazing place. The management are very good. I would recommend it 100%."

The provider had effective systems in place which helped ensure that staff delivered a service that met people's needs and kept them safe. Systems were in place to help staff minimise risks to people. Staff understood the identified risks and followed the guidance in place to keep people safe. This was regularly reviewed and updated.

Senior staff reviewed accidents and incidents to ensure learning happened when things went wrong. They took additional actions to reduce risk as necessary.

Measures were in place to manage the risks of COVID-19 including policies and risk assessments. Staff told us they had access to sufficient personal protective equipment (PPE) and had received training on how to keep themselves, and others, safe from the risks of COVID-19. The provider had robust contingency plans in the event of an outbreak.

This was a targeted inspection that considered assessing risk, safety monitoring and management, and preventing and controlling infection. Based on our inspection of these areas the service was able to demonstrate how they were meeting the underpinning principles of Right support, right care, right culture. People were encouraged and supported to make decisions. People's care was person-centred and their privacy, dignity, and human rights were protected.

We expect health and social care providers to guarantee autistic people and people with a learning disability the choices, dignity, independence and good access to local communities that most people take for

granted. Right Support, right care, right culture is the statutory guidance which supports CQC to make assessments and judgements about services providing support to people with a learning disability and/or autistic people.

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 good (report published 26 June 2021).

Why we inspected

The inspection was prompted in part due to concerns received about the safety of people. A decision was made for us to inspect and examine those risks.

We found no evidence during this inspection that people were at risk of harm from this concern. Please see the safe section of this full report.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our reinspection 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 good. 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.

Details are in our safe findings below.

Inspected but not rated



Glebe Farm

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.

This was a targeted inspection to check on a specific concern we had about people's safety.

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

Glebe Farm 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. This means that they and the provider 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. Inspection activity started on 24 November 2021 and ended on 10 December 2021. We visited Glebe Farm on 24 November 2021.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. This included information about incidents that the provider must notify us about. We sought feedback from the local

authority and professionals who work with the service. We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all of this information to plan our inspection.

During the inspection

We spoke with two people's relatives on the telephone. We also spoke with nine staff, seven at the home and two on the telephone. Staff we spoke with included the registered manager, the clinical lead, the assistant manager, a senior support worker, three support workers, a chef, and a housekeeper.

We viewed a range of records. These included records relating to five people's care, accident and incident reports and analysis, and an infection control audit.

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. 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 a specific concern we had about people's safety. We will assess all of the key question at the next comprehensive inspection of the service.

Assessing risk, safety monitoring and management

- People were protected from risks associated with their care and support.
- Relatives told us they felt their family members were well supported by staff and were safe with them. One relative said they were, "very, very pleased" with the care their family member received at Glebe Farm. They said, "They do understand him and work very hard to work with him. He's very happy there."
- We received positive feedback from an external care professional who told us people's care needs were generally well managed by the service.
- Staff knew people well and understood how to keep them safe. They had completed assessments of potential risks to people, staff, and others. Risk assessments and care plans provided detailed guidance for staff to follow to minimise identified risks. Risk assessments included information about people's health conditions and for different behaviours which people exhibited. These were reviewed regularly and updated when things changed. This meant staff always had guidance on how to meet people's current needs. This included when leaving the home.
- The registered manager and management team supported staff and checked they were supporting people in a safe way. Staff said they felt well supported by the registered manager, senior staff, and each other. One staff member said, "I can get assistance very quickly. I know I've always got that support should I need it." Staff members told us they would be happy with a family member receiving the service.

Learning lessons when things go wrong

- Senior staff reviewed accidents and incidents to ensure learning when things went wrong and took additional actions to reduce risk as necessary.
- The registered manager analysed accidents and incidents for any themes or trends and implemented actions to reduce risk where necessary.

Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was meeting shielding and social distancing rules.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was accessing testing for people using the service and staff.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the

premises.

- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.
- We were assured the provider was facilitating visits for people living in the home in accordance with the current guidance.