R G Care Ltd

The Farmhouse

Inspection report

272 Wingletye Lane
Hornchurch
Essex
RM11 3BL

Tel: 01708620949

Date of inspection visit:
21 December 2023

Date of publication:
29 January 2024

Ratings

Overall rating for this service	Inspected but not rated

Is the service safe?	**Inspected but not rated**

Summary of findings

Overall summary

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

About the service
The Farmhouse is a residential care home providing personal care for up to maximum of 7 people. The service provides support to people with a learning disability and autistic people. At the time of our inspection there were 5 people using the service.

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

The provider had recruited new staff, which reduced the numbers of agency staff being used to provide people's care. During our inspection we saw that some people were left unsupervised in communal areas as staff were busy supporting people in their bedrooms, doing domestic work, or other areas within the home. These practices did not ensure people were cared for and supported safely.

People's medicines were not managed in a safe manner. Some staff did not know who needed 'as required' medicines as part of their care needs.

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 inadequate (published 14 December 2023).

Why we inspected

The inspection was prompted in part due to concerns received about an incident following which a person using the service sustained a serious injury. We had concerns about staffing level and medicine management. 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. The overall rating for the service has not changed following this targeted inspection and remains inadequate.

We use targeted inspections to follow up on Warning Notices or to check 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.

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

Follow up
We will meet with the provider following this report being published to discuss how they will make changes to ensure they improve their rating to at least good. We will work with the local authority to monitor progress. We will return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

Special Measures

The overall rating for this service is 'Inadequate' and the service remains in 'special measures'. This means we will keep the service under review and, if we do not propose to cancel the provider's registration, we will re-inspect within 6 months to check for significant improvements.

If the provider has not made enough improvement within this timeframe and there is still a rating of inadequate for any key question or overall rating, we will take action in line with our enforcement procedures. This will mean we will begin the process of preventing the provider from operating this service. This will usually lead to cancellation of their registration or to varying the conditions the registration.

For adult social care services, the maximum time for being in special measures will usually be no more than 12 months. If the service has demonstrated improvements when we inspect it and it is no longer rated as inadequate for any of the 5 key questions it will no longer be in special measures.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Inspected but not rated

At our last inspection we rated this key question inadequate.

We have not reviewed the rating as we have not looked at all of the key question at this inspection.

Care Quality Commission

The Farmhouse

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 Health and Social Care Act 2008.

This was a targeted inspection due to concerns following an incident following where a person using the service sustained a serious injury.

Inspection team
The inspection was carried out by a 1 inspector, 1 operations manager and 1 senior specialist advisor.

Service and service type
The Farmhouse is a 'care home'. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. The Farmhouse is a care home without nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Registered Manager
This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was not a registered manager in post. There was a manager who was applying for this role. We were supported by the deputy manager, who was a representative of the provider and was managing the service.

Notice of inspection
This inspection was unannounced.

What we did before the inspection
We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service.

During the inspection
We used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us. We spoke with 5 members of staff. After the site visit, we continued to liaise with the service. The manager sent us documentation we asked for and clarified any queries we had.

Inspected but not rated

Is the service safe?

Our findings

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

At our last inspection this key question was rated inadequate. We have not changed the rating as we have not looked at all of the safe key question at this inspection.

The purpose of this inspection was to check a specific concern we had about medicine management and staffing. We will assess the whole key question at the next comprehensive inspection of the service.

Staffing and recruitment

At our last inspection the provider had not ensured that sufficient numbers of suitable, experienced staff were deployed to meet people's assessed needs. There was not a systematic approach to determine the number of staff needed and to meet the needs of people using the service and keep them safe at all times. This placed people at risk of harm. This was a breach of regulation 18 (Staffing) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Not enough improvement had been made at this inspection and the provider was still in breach of regulation 18

● We used our short observational framework inspection [SOFI] tool, to assess staff engagement with people. Observations of staff did not provide assurance of their knowledge and skills supporting people with their communication needs. Staff had little interactions with people as they were busy completing other tasks and were unable to provide support or observe people.
● We saw a member of staff who was using their mobile phone for more than 30 minutes whilst sat next to a person. We saw staff offered to get this person a cup of tea in a bottle, this person refused. Staff asked this person again, this person vocalised negatively but staff got the tea anyway. This person then pushed staff hand and the bottle away and vocalised loudly. Staff did not interact with this person. Another person was walking up and down the kitchen and was interacting with inspectors, while staff was following them around and did not engage with them. These practices did not ensure people were cared for and supported in a kind and caring manner.
● Communal areas were not always supervised. During our inspection we observed whilst in use by people these areas were unsupervised. The staff on duty were busy supporting people in their bedrooms, doing domestic work, or were in other areas of the home. This placed people at risk of harm.
● The provider had recruited new staff, which reduced the numbers of agency staff being used to provide people's care. A staff member commented, "The residents here are now seeing regular staff on a day to day basis." Where agency staff were being used, these were regular staff who knew the home and residents.
● An on call rota was in place and staff were aware of how to access out of hours management support.

Using medicines safely

At our last inspection the provider had failed to robustly assess the risks relating to the health safety and welfare of people. This was a breach of regulation 12(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Not enough improvement had been made at this inspection and the provider was still in breach of regulation 12

● People were not always supported to receive their medicines in a safe way.
● Whilst 'As required' medicine (PRN) had protocols were in place to guide staff describing what the medicine was prescribed for and included details such as dose instructions, signs and symptoms, not all staff were aware of these.
● During our inspection we asked staff about PRN medicine. A member of staff said, 2 people require PRN medicine, another staff said 3, and another staff said 4. This meant the provider could not be assured that all staff had clear guidance on who required PRN medicines. The provider had failed to follow and implement their own medication policy in relation to PRN medicines.
● Although staff received training in medicine management and were deemed competent, they failed to identify the above concerns.
● However, controlled drugs were stored and administered safely. They were stored in a locked cabinet within a locked room and 2 staff members signed for the administration of these medicines in line with current guidance.
● Temperature checks were undertaken to ensure medicines were stored at a temperature that did not affect their efficacy.

We recommend the provider reviews their processes around medication to ensure they are in line with the providers medicines policy and National Institute for Health and Care Excellence (NICE) guidelines.