

Brook Farm Services (Soudley) Ltd

Brook Farm

Inspection report

Brook Farm
Tramway Road, Soudley
Cinderford
Gloucestershire
GL14 2UG

Tel: 01594823941

Date of inspection visit: 16 November 2018

Date of publication: 12 December 2018

Ratings

Overall rating for this service	Good •
Is the service safe?	Good
Is the service effective?	Good
Is the service caring?	Good
Is the service responsive?	Good
Is the service well-led?	Good

Summary of findings

Overall summary

What life is like for people using this service:

- □ People received a service which was primarily focused on promoting their mental health and well-being and to live independently in the community.
- People's needs had been assessed and their support requirements had been comprehensively identified and recorded to provide staff with the guidance they needed to support people.
- ☐ Feedback from people about the quality of care and support they received was positive.
- •□One person complimented the caring nature of staff and felt that they were treated with dignity and respect.
- People were supported to have maximum choice and control of their lives.
- •□Effective systems were in place to manage people's medicines or support and encourage people when self-medicating.
- •□Staff and the local multidisciplinary team and GP's worked together to enable people to progress in their well-being, daily living skills and confidence.
- There were sufficient numbers of staff available to ensure people's safety and well-being.
- •□New staff were suitably vetted before they supported people.
- Staff had a good understanding of people's needs and had been trained to carry out their role.
- Staff understood their responsibility to report concerns, accidents and poor practices.
- Systems were in place to identify shortfalls in the service and drive improvement.
- □ People views were valued and acted if any concerns had been identified.
- The registered manager understood their regulatory duties to ensure people received a safe and effective service.

The service met the characteristics of Good in all areas.

More information is in Detailed Findings below.

Rating at last inspection: This was the first inspection of this service since their registration in August 2017.

About the service: This service is a domiciliary care agency. It provides support and personal care to people living in their own houses and flats in the community. At the time of our inspection the service supported five people in the community but only supported one person with their personal care.

Why we inspected: This was the first inspection of this service in line with our inspection scheduling of newly registered services and known intelligence about the service.

Follow up: The rating of this inspection and the information and intelligence that we receive about the service will determine the timeframe of our next inspection.

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 findings below.	
Is the service effective?	Good •
The service was effective.	
Details are in our findings below.	
Is the service caring?	Good •
The service was caring.	
Details are in our findings below	
Is the service responsive?	Good •
The service was responsive.	
Details are in our findings below.	
Is the service well-led?	Good •
The service was well-led.	
Details are in our findings below.	



Brook Farm

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection checked whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Inspection team:

The inspection was carried out by one inspector.

Service and service type:

Brook Farm is a domiciliary care agency. It provides support and personal care to people living in their own houses and flats in the community. There was registered manager in post. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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 service is run.

Notice of inspection:

This inspection took place on 16 November 2018 and was announced. We gave the service 48 hours' notice of the inspection visit because it is small and the manager is often out of the office supporting staff or providing care. We needed to be sure that they would be in.

What we did:

Before the inspection we reviewed the Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. We also reviewed other information we held about the service as well as previous inspection reports and notifications we had received from the service. Notifications are information about important events that the service is legally required to submit to CQC.

During the inspection we visited the location's office and spent time talking with the registered manager and the nominated individual (The nominated individual is employed as a director, manager or secretary of the organisation with responsibility for supervising the management of the regulated activity). Whilst the service

provided support to several people, they only provided the regulated activity of personal care to one person as defined by CQC registration at the time of the inspection. We therefore inspected the systems and policies of the service to ensure that the service would be effective and equipped to support people with personal care as the service expanded.

We spoke with three staff members and looked at staff files relating to their training and personal development as well as the provider's recruitment procedures. We reviewed a range of records including accident and incident reports and other records relating to the monitoring and management of the service. After the inspection we spoke to one person by telephone and received feedback about the service they received.



Is the service safe?

Our findings

People were safe and protected from avoidable harm. People told us they felt safe being supported by staff from Brook Farm and had no concerns about their safety.

Systems and processes:

- Systems and processes in place ensured that people were protected from harm.
- All staff had a good understanding of their responsibility to keep people safe and protect them from abuse and discrimination and where and how to report any concerns. One staff member said, "I would definitely report any concerns to my manager. I wouldn't let it go until I knew the person was safe."
- The registered manager had received advanced training in safeguarding and had a good understanding of their requirement to report any safeguarding concerns to Care Quality Commission (CQC) and the local authority safeguarding team.
- □ People told us they felt comfortable amongst staff and could speak to them about their concerns. One person said, "The staff are nice to me. I feel OK around them."

Assessing risk, safety monitoring and management:

- □ People had been involved in the assessment of their needs, identifying their risks and developing their care plan.
- •□Risks relating to people's safety were assessed and monitored by staff.
- Staff were knowledgeable about people's support requirements and personal risks;
- Good communication between staff ensured staff were informed of people's current support requirements and any changes in their well-being.
- Systems were in place to ensure people's needs would be met during adverse weather conditions.

Staffing levels:

- People were supported by a consistent and established staff team.
- •□Staff and the managers ensured any staff absences had been covered.
- People were sent a list of the staff who were rostered to visit them They were informed of any changes in the staff rota by telephone.
- •□An on-call system was available for people and staff to contact if they needed any additional support and advice.
- Safe recruitment practices were used to ensure people were supported by suitable and vetted staff.
- □ People were given the opportunity to be part of the recruitment process of new staff such as suggesting interview questions.

Using medicines safely:

- •□At the time of our inspection, no one was receiving support with their medicines.
- People were supported to self-medicate. Staff told us they occasionally prompted, reminded or checked that people had taken their prescribed medicines and would report any concerns about people's management of their medicines to their manager.

- □ Effective systems and protocols to manage people's medicines were in place to support people with their medicines if it was required in the future. For example, we were told people's medicines care plan would ensure that there was a clear record of who would be responsible for ordering, obtaining and disposing of people's medicines.
- The registered manager told us they were continually reviewing and updating their medicines policy to reflect their practices and would be introducing a self-medication risk assessment. This would ensure staff have a clear understanding of people's risks associated with their medicines and the actions staff should take if any concerns were raised.

Preventing and controlling infection:

• Staff had access to personal protective equipment such as disposable gloves and aprons to reduce the risk of spreading infections when visiting people in their own homes.

Learning lessons when things go wrong:

- Any incidents or accidents were discussed with staff and used as an opportunity to reflect on the practices of staff and the services procedures. Adjustments were made to improve their systems and the service being delivered to people.
- Staff understood their responsibility to report any concerns, accidents and near misses.



Is the service effective?

Our findings

People's care, treatment and support achieved good outcomes, promoted a good quality of life and was based on best available evidence

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

- □ People were involved in the assessment of their care and support needs. Their views, choices and wishes were respected.
- Information from the person and supporting health care professionals as well as people's past medical histories helped to inform the care plan and associated risk assessments.
- The registered manager, nominated individual and representatives of the provider kept up to date in mental health and social care practices to ensure the support and assessment of people was delivered using national guidance and current practices.

Staff skills, knowledge and experience:

- People were confident that they were being supported by staff who were trained in their role.
- Staff told us they felt trained and supported to support people in the community. They told us they were in regular contact with each other and could request support or advice at any time.
- New staff were required to complete an induction programme which included reading the services polices; shadowing experienced staff and completing the Care Certificate. The Care Certificate is an agreed set of standards that sets out the knowledge, skills and behaviours expected of specific job roles in the health and social care sectors. New staff were also given the opportunity to shadow experienced staff, undertake training and understand the service's systems and processes.
- Staff were given regular opportunities to receive informal and formal supervision meetings and annual appraisal with their line manager.
- •□Records showed that the registered manager carried out regular spot checks and field assessments of staff to observe and assess their care practices.

Eating, drinking, balanced diet:

- •□No-one who was receiving the regulated activity of personal care was being supported with their eating, drinking or had any dietary needs which needed to be supported.
- The provider's policies ensured the nutritional needs, food and drink preferences would be discussed with people if they required support in the future, including using kitchen safely.
- Staff told us they encouraged people to opt for healthier food options and provided suggestions on nutritional meals and snacks.

Staff providing consistent, effective, timely care:

- The registered manager and staff worked collaboratively with health care professionals to ensure people's health care needs were monitored and met.
- Where required, the service had made appropriate referrals to other mental health and social care professionals for advice and support when people's needs and mental stability had changed.

- •□ Staff knew people well and told us they would seek advice and escalate any concerns about people's well-being to the registered manager.
- •□ Staff told us they would seek medical advice on behalf of people if they had no family to support them.

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

- People who were supported by Brook Farm were involved in choices about their care and had the mental capacity to make informed decisions about their lives and support requirements.
- •□Staff understood that people had the rights to make their own decisions about the care and future and their views and decisions should be respected.
- Policies and processes were in place to support people who may lack the mental capacity to be involved any decisions. The registered manager said they would seek additional advice and support from health care professionals if they were concerned about people's mental capacity to make decisions. Staff were aware of ensuring they were working within in the principles of the Mental Capacity Act 2005.



Is the service caring?

Our findings

The service involved and treated people with compassion, kindness, dignity and respect.

Ensuring people are well treated and supported:

- Staff were committed to meeting people's needs and developing their confidence and independence.
- People were supported by a dedicated staff team who knew people well. They knew people's individual strengths and areas where they needed more support.
- Staff took a positive balance in encouraging and supporting people to become independent in their activity of daily living skills as well recognising when people still required some additional support.
- People's diverse needs were supported without discrimination. Staff respected people's beliefs and decisions about their lives and provided opportunities for people to express their views and values.
- □ People told us they felt relaxed and comfortable around staff.
- •□One person said, "Yeah the staff are alright. They are friendly enough."

Supporting people to express their views and be involved in making decisions about their care:

- People told us they were fully involved in all the decisions about the care they received from Brook Farm.
- Staff supported and signed posted people to services which may provide additional assistance and support.
- □ People told us their views and any concerns were acted on promptly.
- Information in different accessible formats was available to help people understand the support available to them. For example, large print staff rotas were sent to one person with a visual impairment

Respecting and promoting people's privacy, dignity and independence:

- •□The service's website state: 'Our core values are to assure the dignity of all the people who use our services to support them to reach their full potential and attain their individual aspirations for a good quality of life.' Staff demonstrated these values when they spoke how they supported people. One staff member said, "We do our best to help people progress in their lives."
- Staff had a good understanding of promoting and respecting people's dignity and privacy.
- People's confidentiality was respected and records kept securely in the office.



Is the service responsive?

Our findings

People received personalised care that responded to their needs

Systems were in place to ensure people met new staff before they visited them and provided support and personalised care:

- •□Staff provided support which was responsive to people's individual needs and preferences. Their support requirements were clearly recorded in their care plans. They informed staff of their support needs and levels of independence and how they wished to be supported.
- The care and support provided was wholly tailored to people's needs and mental well-being.
- Staff promoted people's personal development and levels of independence. People told us staff encouraged them to independent in their daily activities and supported them at their own pace.
- •□Staff liaised and communicated with other health and social care services in a timely way to seek additional support and advice when people's needs and mental well-being had changed.
- Care plans identified people's individual communication needs and identified how these needs were met in line with the Accessible Information Standard (AIS). AIS sets out a specific, consistent approach to identify, record, flag, share and meet the information and communication support needs of people with a disability, impairment or sensory loss.
- Staff encouraged people to engage in activities which were important to them and try new opportunities.
- People's individual beliefs, views and diverse needs were supported without judgement by staff.

Improving care quality in response to complaints or concerns:

- ☐ There had been no formal complaints about the service.
- □ People told they would share any concerns with staff and was confident that staff would address and act on the issues.
- The provider had a complaints procedure which described the complaints process was made available to people.

End of life care and support:

- The service was not supporting people with end of life care at the time of the inspection.
- The nominated individual explained that the service would consult with the person about how they wish to be supported if the they needed end of life care. We were told that staff would also seek additional guidance from specialist staff if people wanted to be supported by Brook Farm staff during the final stages of their life.
- The provider's end of life policy provided staff with guidance on how to support people to ensure people received comfortable and dignified end of life care.



Is the service well-led?

Our findings

Leadership and management assured person-centred, high quality care and a fair and open culture.

Regular quality checks and feedback from people who used the service helped to monitor the quality of service being provided.

- The registered manager and nominated individual carried out regular monitoring checks of the service. Any shortfalls or areas of concern found were acted on but not consistently recorded to show that the actions required had been completed.
- The managers and staff team had a strong communication system to ensure the service met people's needs effectively by staff who had been trained and vetted to carry out their role. However further improvement was needed in the recording of the managers actions to evidence their effective management of the service. For example, evidence was needed to record their conversations and assessments of new staff to ensure they were of good character and more details was required in the management of people's risks.
- The registered manager and nominated individual had a 'hands on' approach to the quality checking of the service, however agreed to consider a system which would better record the outcome of their quality checks, management plans, accidents and incidents analysis and feedback from people to help demonstrate the actions which were taken and how the service acted to drive improvements.

We recommended that the service seek advice and guidance from a suitable source, in relation to the recording of management and governance of the service.

Plan to promote person-centred, high-quality care and good outcomes for people:

- The focus of the service was to provide people with support to enable them to live as independently as possible.
- •□An established staff and management team knew people well and had a good insight into people's needs.
- The service had good links with other health care professionals which ensured that people received good quality and consistent care, especially when their mental health needs changed.
- •□Staff evaluated the service that they had provided and acted on people's feedback. For example, the results of completed feedback forms from people who had used the service showed that people were happy that staff arrives on time, stayed for the correct amount of time and felt comfortable in the presence of staff.

Managers and staff are clear about their roles, and understand quality performance, risks and regulatory requirements:

- □ Spot checks and observations of staff practices were regularly carried out to demonstrate that staff met the required standards of care.
- We found that there was a strong bond within the staff and management team. Staff told us they felt supported by the managers and had a good working relationship which resulted in positive outcomes for people.
- The registered manager told us they felt supported in their role. They had regular daily contact with the

nominated individual who informed them of any changes in care practices especially those relating to mental health.

• The registered manager had a good understanding of their regulatory duties. They kept themselves updated and informed of any changes in legislation and current practices.

Engaging and involving people using the service, the public and staff; continuous learning and improving care:

- People's experiences and opinions were valued. We were told that any negative feedback was used as an opportunity to review their processes and systems and drive improvement.
- Staff told us communication across the service was effective to ensure they understood people's current needs. Regular staff meetings were held to share information, raise concerns and reflect on practices.

Working in partnership with others:

- Staff had good links with community health and social care services and professionals.
- Staff told us they frequently sign posted people to local services, groups and resources in their local community to assist with personal wellbeing and interests.