

Dalskats Limited Sunset Cottage

Inspection report

Rock Road, Chudleigh Newton Abbot Devon TQ13 0JJ

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Ratings

Overall rating for this service

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 •

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Good (

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Summary of findings

Overall summary

About the service

Sunset Cottage is a residential care home providing personal care for up to five people with learning disabilities or autistic spectrum disorders. At the time of this inspection there were five people living there. The property is a detached house in a residential area on the edge of Chudleigh. There are no outward signs that it is a care home.

Sunset Cottage is registered under the provider name of Dalskats Limited and operates under a brand name of "Home Orchard", along with three other local services. The four services share administrative facilities, records and management systems based at Palace Farm. The four services are all located within approximately 400 yards of each other. The services work closely together; staff work between the services by agreement and people living in each service mix socially and share some day activities.

The service has been developed and designed in line with the principles and values that underpin Registering the Right Support and other best practice guidance. This ensures that people who use the service can live as full a life as possible and achieve the best possible outcomes. The principles reflect the need for people with learning disabilities and/or autism to live meaningful lives that include control, choice, and independence. People using the service receive planned and co-ordinated person-centred support that is appropriate and inclusive for them.

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

Sunset Cottage offers people a wide range of opportunities to lead an active and fulfilling life. People used the facilities in the grounds of Palace Farm next door where they could pursue activities such as gardening, bee keeping, animal care, games, arts and crafts. Palace Farm is a smallholding which was set up for people with learning disabilities who live in the four homes run by the provider. One person had enjoyed looking after and riding two horses until they were recently retired, and they looked forward to new horses being introduced in the near future. People held voluntary jobs and attended social events, clubs and churches in the local community.

There was a stable, happy and well-trained staff group. People told us they liked all the staff and comments included, "I like the staff". People said staff were always kind. There were enough staff to support each person in their daily activities. Care was taken when recruiting staff to ensure new staff were entirely suitable for the job. People living in the home were involved in choosing new staff. Staff praised the providers and management team for the support they received. Comments included, "It's a lovely place to work".

The home was comfortable, clean, well maintained and safe. People were involved and consulted in the decoration and furnishings. Risk assessments had been carried out on the environment, equipment, and on people's health, wellbeing and daily activities. Staff knew how to support people to stay as safe and healthy as possible.

People were supported to eat a healthy diet. They grew many plants and vegetables in the gardens which were used in their meals. They also used eggs from their own chickens and honey from their own bees. People were supported to plan and prepare their own meals as far as they were able.

Each person had their own support plan setting out clearly how they wanted to be supported in all areas of their daily lives. Support plans were regularly reviewed and updated. Relatives were involved and consulted. The service was well-led. There were good systems in place to monitor and improve the service. People, staff and relatives praised the providers and management team for their caring ethos. Comments from relatives included, "I am very happy with my son's placement at Sunset Cottage, Palace Farm. He considers it his home after being there for many years and knows the staff and other residents well", "We believe this is a very well-run service" and "Sunset is well run and communication between staff and myself frequent". People were supported to have maximum choice and control of their lives and staff supported support them in the least restrictive way possible and in their best interests; the policies and systems in the service supported/ did not support this practice.

The service applied the principles and values of Registering the Right Support and other best practice guidance. These ensure that people who use the service can live as full a life as possible and achieve the best possible outcomes that include control, choice and independence. The outcomes for people using the service reflected the principles and values of Registering the Right Support by promoting choice and control, independence and inclusion. People's support focused on them having as many opportunities as possible for them to gain new skills and become more independent.

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 (published 12 July 2017)

Why we inspected

This was a planned inspection based on the previous rating.

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



Sunset Cottage

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.

Inspection team The inspection was carried out by one inspector

Service and service type

Sunset Cottage 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. The registered manager is also one of the providers. Registered managers and providers are legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection

We gave the service five days' notice of the inspection. This was because it is a small service and we needed to be sure that the provider or registered manager would available to support the inspection. We also wanted to be sure people would be at home so that we could meet them.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. 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 spent three days inspecting three of the four services run by the providers – Palace Farm, Summer Cottage and Sunset Cottage. We looked at the administrative and management processes that covered each of the four services run by the providers, including Lynwood (which was not inspected at this time). The staff team covered all four of the services and therefore some parts of this report are repeated in the reports for Palace Farm and Summer Cottage. However, the lives and experiences of the people living in each service were different and unique, and their views are reflected in each report.

We spoke with three people who lived there. We spoke with the providers, their consultant, two administration staff, two heads of care and seven members of staff.

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

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data, staff rotas and quality assurance records. We received e mails from three relatives and six members of staff. We also spoke with one relative on the telephone.

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.

Systems and processes to safeguard people from the risk of abuse

- The provider told us in their Provider Information Return, "The service is committed to protecting and safeguarding vulnerable people from harm, neglect and other forms of abuse; this takes precedence in all areas of the service and in the management of the service. All relevant policies and procedures are in place and updated according to current legislation, local authority guidelines and CQC". There were robust systems, policies and procedures were in place to protect people from the risk of abuse.
- People had received training on safeguarding topics which was facilitated by an outside advocacy group. Topics included keeping safe on-line, stranger danger, first aid and fire safety.
- All staff received training at the start of their employment and regular updates on safeguarding. Staff were confident they could recognise the signs of possible abuse and knew how to report any concerns. A member of staff told us, "I feel the residents are kept safe from harm or abuse".
- Safeguarding was discussed in staff meetings and in staff supervisions. Safeguarding was listed as the first item on staff supervision agendas to ensure it was treated with the utmost importance.
- There were systems in place to protect people from the risk of financial abuse. People had lockable storage in their rooms to enable them to look after cash and valuables safely. If staff supported people to look after their day-to-day spending, records were maintained of all transactions. These were checked regularly to ensure they were correct. Copies of monthly transactions were shared with people's next of kin or representative.

Assessing risk, safety monitoring and management

• People living at Sunset Cottage, their relatives and staff told us that people were safe. A person told us, "It's alright living here". A relative said, "We have never had a second thought that our daughter might not be safe".

• People were supported to do the things they wanted to do and live their lives as they wished. If they wanted to participate in activities that may present a risk, assessments had been carried out to ensure they could carry out the activity as safely as possible. A relative told us, "I feel he is safe and well cared for at the home. Although he is very vulnerable, staff are with him and ensures he is safe and supported where ever he goes".

• Risks to people's health had been assessed and staff had been given detailed information on how to recognise and act on known health risks.

• People lived in an environment that was safe. Risk assessments had been carried out on the environment, including the risk of fire. Improvements had been carried out to the fire safety equipment in recent months. Fire equipment was regularly checked and serviced. Checks were carried out by specialist companies on gas, electricity and water to ensure all equipment and services were safe.

Staffing and recruitment

• Staff were recruited and rota'd to work across the four care homes owned by the provider. There was a large staff team employed providing flexibility to meet day to day staffing needs. For example, if staff were off sick or on leave their shifts were covered by other members of the staff team who were willing to work additional hours.

• People, staff and relatives told us they were satisfied there were always enough staff on duty to meet people's needs safely. People told us they had support when they needed it. A member of staff said, "Unequivocally there is enough staff here. Staffing is extremely well organised". Another member of staff said, "There is always one to one care during the day. People never miss their planned activities".

• New staff were carefully recruited. In the last year only two new staff had been recruited. Care had been taken to take up references and carry out relevant checks before new staff were appointed. People who lived at Sunset Cottage participated in the recruitment process. They met applicants before they were appointed, and their views on the applicants were sought.

• There was a stable staff group and a low staff turnover. Staff spoke with pride and passion about their jobs. Comments included, "It's a nice place to work" and "I am proud to work here".

Using medicines safely

• Medicines were administered by staff who were trained and competent. A member of staff who had been recruited in the last year told us their induction was "Great, very, very supportive. For me the biggest one was medication as it is very important".

• One person told us staff helped him with his medicines. They made sure he received the right medicines at the right time.

• Information was available on each medicine prescribed to people, However, it was not held with their medicine records and instead was stored in their review files. Although staff knew where to find this information it was not readily available to staff while they were supporting people with their medicines. They planned to improve the level of information to provide more detailed information on risks, side effects, and instructions on medicines prescribed on an 'as required' basis

• Records of medicines administered were well maintained. There were no unexplained gaps.

• Medicines were stored in a locked filing cabinet in a room that was kept locked when not in use. The provider told us that new individual secure medicines cabinets have been ordered for people's bedrooms. They planned to offer people the choice of holding their own medicines in their room if they wish. This will enable staff to give more personalised support with medicines.

Preventing and controlling infection

• People lived in an environment that was clean and hygienic. People were supported by staff to keep their bedrooms and living areas clean. Daily and weekly checklists were completed by staff to show the areas that had been cleaned.

• Staff received training on infection control and understood the procedures they must follow to reduce the risk of infection. Equipment such as protective gloves and aprons were available for staff to use when needed.

• Policies and procedures were in place setting out the actions staff must follow to reduce the risk of infection.

• The kitchen and food preparation areas had been inspected by the local authority Environmental Health department and had been given a Good rating.

Learning lessons when things go wrong

• Where things went wrong staff were not afraid to speak up and admit errors or mistakes. There was a positive attitude towards learning lessons and taking actions to prevent incidents happening again.

• Staff also considered potential problems and how these could be avoided. For example, staff were expected to check company vehicles before each journey. Some staff said they did not feel confident to do this. A decision was reached for a competent member of staff to carry out weekly checks on each vehicle. Staff were expected to do a visual check before each journey, for example on tyres and fuel levels. Staff were satisfied with this outcome.

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 Good. At this inspection this key question has remained the same. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law • Before people moved to Sunset Cottage their needs were carefully assessed to make sure the service was right for them. Information was gathered from the person and from relatives and professionals who knew them well. A support plan was drawn up setting out the care and support the person needed. People were encouraged to visit the service to help them decide if they wanted to move in. A relative told us, "We took a long time to find {person} a suitable placement that would meet his needs, keep him safe and also allow {person} to live the life of an adult in his early 20's. Sunset met his needs on every level, the staff are fantastic and staff turnover is relatively low".

• Each person was consulted and involved in reviewing their support plan, as far as they wished or were able. Support plans provided detailed information about all areas of needs. A person told us they had just attended a review of their care that morning. They showed us their support plan and we heard about the areas that had been discussed in the review.

• The service applied the principles and values of Registering the Right Support and other best practice guidance. These ensure that people who used the service can live as full a life as possible and achieve the best possible outcomes, including maximising control, choice and independence in their lives. People lived in a small group in a comfortable and homely house in a residential area close to the town centre. There were no outward signs that the house was a care home.

Staff support: induction, training, skills and experience

• People were supported by a stable staff team who had the skills and knowledge to give them the right support and care. Staff undertook an induction to the service at the start of their employment. Staff who were new to care work completed the Care Certificate. This is a nationally recognised course in induction for care workers.

• Following induction staff were given further training and regular updates on topics the provider had identified as essential to people the needs of people living there. For example, staff completed medication administration and epilepsy training. Staff received e mails and reminders when essential training updates were due, and there were systems in place to ensure updates were completed promptly. A relative told us, "The staff are caring, friendly and receive good training".

• Staff told us they could request any additional training they felt might benefit them in their work. For example, a member of staff had requested sign language training, and this was provided. Staff were also encouraged and supported to gain qualifications relevant to their jobs.

• Staff were well supported. They received regular formal supervision and annual appraisals. Staff could ask for further supervision, advice or support at any time. A member of staff told us, "I feel supported should I have a problem be it at home or work and am always asked at the yearly performance review if I would like

any additional training". Another member of staff said, "Senior members of staff are always on the end of a phone or on site to give advice if needed".

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

• People were supported to eat a balanced and nutritious diet. Staff understood each person's likes and dislikes and their dietary needs. Information on each person's dietary needs were set out in their support plan.

• People told us how they planned and cooked their meals. They sat down together to choose the weekly menu. Picture menus were offered if people had difficulty reading text. One person told us they had cooked a curry with staff, and another person told us they always made their own breakfast. People were able to help grow their own fruit and vegetables, collect eggs and honey at Palace Farm next door.

• Staff told us they felt people were offered a very good standard of meals. Some staff were exceptionally good cooks (for example, one member of staff was a qualified chef). Staff worked alongside people to make a wide range of foods and we heard examples of Christmas cakes and cookies. A member of staff told us, "The residents love it!"

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

• Staff worked very closely with health and social care professionals to make sure people received the right treatment and support. A relative told us, "Not only are {person's} physical and social needs met they also keep a close eye on his health needs".

• Staff knew people well, and they were observant and recognised when people showed signs of illness. They sought medical treatment promptly when needed. Staff described how they recognised the triggers and warning signs when a person was about to have an epileptic seizure. A person told us the staff understood his illness and regularly checked to make sure he was alright throughout the day. They regularly visited an epilepsy specialist.

• People told us they were supported to attend medical appointments, treatment and check-ups. They had regular appointments with services such as the dentist, optician, chiropodist and doctors. Each person received an annual health check.

• Staff were able to describe how they supported people to clean their teeth. Records were kept of each dental visit and any advice given by the dentist. Support plans did not contain guidance on oral health, but the provider and staff told us oral health plans would be drawn up in the near future.

• Where people had shown distress or agitation the staff had liaised closely with relevant health and social care professionals, and with relatives and people close to them, to agree positive strategies to support the person.

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

• Each person had their own bedroom and en-suite bathroom. People had been able to decorate and furnish their bedrooms to suit their own tastes and preferences. Bedrooms reflected each person's interests.

• People living in Sunset Cottage were able to move without assistance and did not require equipment to help them move around safely.

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, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

• The service had applied for, and received, authorisations where people needed to be deprived of their liberty.

• Staff had received training on the MCA and DoLS and understood how to support people to make decisions. Staff knew people well and understood if people had capacity to make their own decisions. Independent advocates were available to support people to make choices.

Is the service caring?

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

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 supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; respecting equality and diversity

- People told us the staff were always caring. A person told us, "I like the staff", and another person said, "The staff always kind". A relative told us, "Staff are very welcoming and understanding of his and our needs as a family.
- We saw staff working alongside people in a caring and friendly manner. People were smiling and happy.
- People showed friendship towards the other people they lived with, A person told us, "Everyone living here gets on well together".
- We heard examples of how people were supported by staff to achieve new skills, and lead fulfilling and happy lives. Staff spoke passionately about their jobs and described how they wanted to make sure people received the best possible care and support.
- Staff knew each person well, the things people liked and disliked. Where people were reluctant to go out of the house, staff offered gentle encouragement and support. On the day of our inspection one person had been working in the gardens. Staff were delighted with the progress the person had made, and their achievements.
- There was a stable staff group, many of whom had worked in the service for many years. They spoke with fondness and admiration for the providers and described how the providers wanted the very best care and support for people who lived there. A member of staff told us the "{The providers'} ethos is good. Independence, dignity and respect. {The providers} are always looking to improve. They want the best for everyone."
- Staff told us they felt valued by the providers.

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

- People were supported in many ways to speak out and have their say about the service, and about the care and support they received. They had regular meetings. A person told us they had regular meetings and talked about topics such as keeping safe and first aid. People were invited to complete an annual survey which was provided in a format suited to each person
- People told us they were involved in reviewing their care and support. Their views were always listened to and respected.

Respecting and promoting people's privacy, dignity and independence

• Staff were determined to support people to gain greater independence. They described how they worked alongside people in daily activities such as cooking, cleaning, and laundry to support people to do as much for themselves as possible. They explained how some tasks took much longer because they had supported

people to do things for themselves, but said the providers supported them by ensuring they had enough time to give people the individual support they needed.

• During our inspection we saw and heard how staff respected people's privacy and dignity for example, staff explained how they supported a woman living in the home to retain their privacy and dignity when the other people in the home were male.

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

• Each person had their own support plan that set out clearly how they wanted to be supported with all aspects of their daily lives. The support plans were detailed, easy to read, regularly reviewed and updated.

• Staff knew each person well and took appropriate actions when people displayed agitation or upset. For example, staff sought advice from professionals who specialised in autism to help them understand the things that caused a person to become distressed. They realised that the person did not like loud noises. They moved the washing machines and tumble driers because they found these may be causing the person upset. They also realised the person did not like the television to be turned up loud. They put a television and an armchair in the person's room. They found these actions were effective and had resulted in the person becoming much calmer and happier.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

• People were given information in a format suited to their individual communication needs. Documents such as menus, staff rotas and support plans were drawn up using pictures, photographs and large print to help people understand.

- Support plans explained each person's individual communication needs.
- Staff had received training on communication methods such as Makaton and Total Communication boards.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

• People living at Sunset Cottage were encouraged and supported to participate in a wide range of interests. There were offered many opportunities for to lead active and fulfilling lives. A member of staff told us, "If a resident has an interest it is actively encouraged. The whole business is about the people who live here. It's not about making money."

• In the grounds of Palace Farm there were gardens, stables, barns, greenhouses and sheds, each offering people the opportunity to participate in outdoor pursuits such as gardening, horse riding, animal care and tractor restoration.

• One person talked about the horses that had lived at Palace Farm until their recent retirement. The person loved horses and was looking forward to new horses being obtained by the providers. The providers assured

us they were actively looking for suitable horses to replace the two that had been retired.

- Gardening staff supported people to grow a wide range of plants and vegetables. People were able to grow and harvest fruits such as raspberries, strawberries, rhubarb. They also grew summer and winter vegetables. People also helped look after chickens and their eggs were used in their meals.
- One person talked with pride about their job working with children in a local nursery. Staff had recognised their love of children and helped them to find voluntary work at the nursery. They described how they had sat and comforted one young child on their first day until they calmed down, and how much this had been appreciated by the other staff there.
- In the grounds of Palace Farm was a barn which had been converted to provide a shared activity space called 'Hive and Jive'. People living in Palace Farm, Summer Cottage, Sunset Cottage and Lynwood were able to use this facility for a range of activities such as parties, music and cinema.
- A relative told us, "{Person} is allowed as much freedom as his learning difficulties allow, he is kept busy during the day but also allowed 'me' time, as he loves music and watching Netflix and YouTube in his room. Outings at weekends and evening activities are varied and {person} loves mixing with the other residents and staff at social gatherings".
- Another relative told us about the wide range of activities their loved-one enjoyed. They told us, "He keeps busy. He likes to be on the go. He likes gardening anything manual". The person volunteered with the donkey sanctuary, went cycling and walking and attended the Special Olympics club.
- People were also valued members of the local community. People loved visiting local shops and cafes, some people were members of local churches, and people loved talking with neighbours and locals. A person told us how much they liked one of the neighbours who was always kind and supportive. They told us the neighbour "spoils me".

Improving care quality in response to complaints or concerns

• People told us they knew how to make a complaint. Some people told us they would speak with the providers, others said they would tell a member of staff or a relative. They all said they were confident their complaints would be listened to and acted upon. A member of staff told us, "Any problems or complaints that arise are always dealt with ensuring all parties are listened to and appropriate action taken if necessary".

End of life care and support

- At the time of this inspection there were no people close to the end of their lives. However, staff knew the arrangements in place for each person in the event of serious illness or death. Detailed end of life plans were in place for people with complex illnesses.
- Advocates had spoken with people in the past to talk about end of life plans.
- People were offered support and guidance to help them cope with loss and bereavement. For example, when a person who used the service died, other people who used the service were offered counselling. Staff talked to people about the process of death and helped them to plant sunflowers in the person's memory. They held a remembrance ceremony at Palace Farm. Staff helped people to write messages about their feelings for the person and these were tied to helium balloons which were released. This helped people cope with their loss.
- People were also supported to cope with the loss of beloved animals. For example, when a much-loved horse died on the farm people were supported to say goodbye to the horse and supported in their grief.
- People were also supported by staff to attend funerals of family and friends

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 Good. At this inspection this key question has remained the same. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- A relative told us, "Sunset is well run and communication between staff and myself is frequent". A member of staff told us, "I work across all of the units and would like to say the company is a pleasure to work for, accommodating with life / work balance. Holiday leave is fairly given and very rarely declined
- Sunset Cottage, Summer Cottage, and Lynwood are run by the provider under the name Dalskats Limited. Another service, Palace Farm, is registered under a partnership but is operated by the same providers. People living the four care homes can use the facilities in the grounds of Palace Farm, such as the gardens and animal care.
- The providers are involved in daily life in the service. One of the providers is also the registered manager. They also employed a management consultant who worked three days a week in a management role across the four services. Their role was mainly looking after the financial side of the business. Two 'Heads of Care' were also employed to manage the support staff across the four care homes.
- The management of the four care homes was carried out from an office in the grounds of Palace Farm. The staff team worked across the four homes, and management systems such as recruitment, training, supervision and staff meetings were provided from the central office.
- Staff told us they were very happy in their jobs. They praised the providers and managers for their ethos and caring. A member of staff said, "Our Heads of Care are very supportive. And {management consultant} is very supportive. The providers ask staff opinions. It's nice because they involve you."
- Relatives praised the providers and staff team highly. They told us the providers were open, welcoming, and kept them involved and consulted about all aspects of the service. A relative said, "We believe this is a very well-run service".
- People and staff were valued and respected as an individual regardless of their backgrounds, beliefs, illnesses or disabilities. A member of staff told us. "Each member of staff has their own diversity, skills and interests. For example, new gardeners have just employed. We are always looking to employ staff with interests and skills to match people's interests".

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

• The provider and management team understood and acted on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong. They notified the Commission of all incidents and accidents. They also ensured information was given to the local commissioners and safeguarding teams when there was an incident or serious injury that affected people's

safety or well-being.

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

• Staff understood their roles clearly. There were regular staff meetings, both for the whole staff team, and house meetings which focussed on the support and care needs of people living in each home. Staff told us they felt these meetings were particularly useful as it helped staff look at good practice, individual needs, and ways of improving the support to each person. Staff told us they felt they could speak out with ideas or concerns and said these were always listened to and acted upon where possible. Staff were well supported and received regular supervision.

• The provider had systems in place to make sure staff were well trained and supported.

• Policies and procedures were in place on all aspects of the service. Monitoring checks were carried out to ensure all aspects of the service were safe and running smoothly.

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

• People, staff and relatives were involved and consulted in a range of ways. Regular surveys were carried out to seek people's views, and those of the staff team and relatives. People and relatives were involved in reviews of people's care. Staff kept in regular contact with families and friends and kept them informed about their loved-one's health and welfare, the things they have been doing and their achievements.

• The provider told us in their Provider Information Return, "The Home recognises that the people who use the service are young adults and may prefer to give feedback in a variety of ways. We have incorporated an electronic version of our annual survey which people can complete on their own electronic devises if they wish".

• The provider also told us, "We are developing our policy on sexuality and relationships following training received by two members of staff on this issue provided by ARC (Association for Real Change)".

• There were strong links with the local community. Some people were involved in local churches and organisations. People enjoyed talking to neighbours and people in the town when they went out for walks or to the shops.

Continuous learning and improving care

• There was an ethos of learning and improving care. Members of the management team had completed training and obtained qualifications in the management of care services. All members of staff were encouraged to gain relevant qualifications.

Working in partnership with others

• The service worked closely with other professionals such as doctors, health and social care professionals. They sought advice when necessary and worked closely with other professionals to ensure people received the highest possible standards of care.