

# David Martin and Annette Martin Palace Farm

### **Inspection report**

Rock Road Chudleigh Newton Abbot Devon TQ13 0JJ Date of inspection visit: 09 January 2020

Good

Date of publication: 02 March 2020

Tel: 01626859735 Website: www.homeorchard.co.uk

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 •

### Summary of findings

### Overall summary

#### About the service

Palace Farm is a residential care home providing personal care for up to three people with learning disabilities or autistic spectrum disorders. At the time of this inspection there were three people living there. The property is a period farmhouse situated on the edge of Chudleigh. The house is set in large gardens and fields, with various buildings offering a range of work and leisure opportunities. Palace Farm is also the providers' family home.

Palace Farm was previously registered as "Home Orchard", which remains as a brand name, but changed it's registration with the Care Quality Commission in 2016 and is now operated under a registered partnership. The home is in close proximity to three other homes which share some administrative facilities and the brand name but are registered under the provider name Dalskats Limited.

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

Palace Farm offers people a wide range of opportunities to lead an active and fulfilling life. There are large grounds surrounding the home where people were able to pursue activities such as gardening, bee keeping, animal care, tractor renovations, games, arts and crafts. People also enjoyed activities in the local community such as clubs and churches. A member of staff told us, "If a resident has an interest it is actively encouraged". People told us they enjoyed living at Palace Farm.

There was a stable, happy and well-trained staff group. People told us they liked all the staff. They said staff were always kind. There were enough staff to support people 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. A relative praised the detailed records completed by staff, saying, "Their recording is second to none. (When an incident occurs, the records show) 'How did we get to that incident?' Their review packages - ABC charts - it's all written down. Everyone knows what to do if he has an episode".

The service was well-led. People, staff and relatives praised the providers and management team for their caring ethos. A member of staff told us, "{The provider's} ethos is good. Independence, dignity and respect. {The providers} are always looking to improve. They want the best for everyone." There were systems in place to ensure the service was well run. The providers sought the views of people living there, staff and relatives through questionnaires, meetings, supervisions and reviews. A relative told us, "...in our book they get massive ticks for all that they do and definitely are a top of the heap – 'Five Star Outfit' and richly deserve the utmost respect and recognition for the peerless work that they're doing - They're 'Simply the Best'."

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 23 June 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.	



# Palace 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.

Inspection team The inspection was carried out by one inspector

#### Service and service type

Palace 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. 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 four 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 be in the office 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 spoke with two people who lived there. (The third person who lived there was away on holiday). 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 two 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 now remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- Robust systems, policies and procedures were in place to protect people from the risk of abuse.
- 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 Palace Farm, their relatives and staff told us that people were safe. A person who lives there told us they felt safe and added, \*I would go to {the providers} if anything was worrying me". A relative told us, "The Farm offers a warm, caring and safe atmosphere with the opportunity to do things that we could not provide at home".
- 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. For example, a person who kept bees had clothing and equipment to enable them to look after the bees as safely as possible. A detailed risk assessment was in place which explained how staff should support the person to remain safe when carrying out this activity. Risk assessments were completed on activities such as accessing the community and cooking.
- 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. For example, detailed information and instructions were in place for those people with epilepsy. These had been drawn up through liaison with the person's epilepsy specialist nurse. Staff had received training on epilepsy and knew how to recognise the warning signs of epilepsy and the actions they must take.
- 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 in each of 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 sufficient staff on duty at all times 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 Palace Farm participated in the recruitment process. They met applicants before they were appointed, and their views on the applicants were sought. A relative told us, "They are ever so fussy about who they take on. They have very strict rules about who they take on".

• 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 said they felt staff gave them the right support with their medicines. They always received their 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 they areas that had been cleaned. A person told us "Staff help me look after my bedroom and keep it clean. They help me do my laundry".

• 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 now <improved to/deteriorated to <add rating> or /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 Palace Farm 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. The person was given opportunities to visit the service to help them decide if they wanted to move in.
- 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.
- 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 family setting.

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 member of staff told us, "Regarding training, any training that I have asked for i.e. Makaton has been arranged any other training required is emailed in advance and put on our rota, online training is our responsibility, but we do get reminders if any are due to be renewed".
- 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.

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 was set out in their support

plan.

• People planned their weekly menus. A person told us, "We can choose the menus. Staff ask what we want each day". They described how they all sat down together to choose the weekly menu. A picture menu was offered to people who had difficulty reading text. People went with staff to shop for ingredients and everyone helped with cooking.

• A person also described how they used lots of home-grown ingredients such as fruit and vegetables, and eggs from their own hens. They went on to say, "We know what has gone into it (their meals) which is really good."

• 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.

• Staff knew people well, and they were observant and recognised when people showed signs of illness. They sought medical treatment promptly when needed.

• People 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.

• A relative described how the service had worked with lots of professionals and as a result the person had become much happier and calmer. They told us, "They have done wonders!" They told us they service had not been afraid to question professional advice, or to seek another opinion if they did not feel the advice was correct.

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 were supported with their interests and were able to use the surrounding grounds and buildings to carry on their interests. For example, one person whose hobby was bee-keeping had a large shed where they were able to store items involved in bee-keeping, and where they could prepare the honey. Another person had their own shepherd's hut they could go to if they wanted some time on their own, or where they could listen to music.

• In the grounds of the service there were gardens, greenhouses, animal housing, large barns and various buildings where people were able to pursue a wide range of interests and activities.

• People living in Palace Farm 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, relatives and staff told us everyone was exceptionally well treated at Palace Farm. We heard how people were always at the heart of everything that happened in the home. Staff were determined to make sure people received the best possible care and support. A person said, "Staff are always kind. They help support me to do the things I like doing".
- A relative told us, "{The providers} and all their superb staff are warm, caring and take the most wonderful care of all of their extended family". They went on to say, "everything has run beautifully smoothly and we are absolutely delighted with everything and everyone at 'Palace Farm. It's a wonderful place run by the most fantastic bunch of people". Another relative said, "The Farm offers a warm, caring and safe atmosphere with the opportunity to do things that we could not provide at home".
- Staff spoke with passion and pride in their jobs. They knew each person well, knew the things they liked and disliked, and wanted to make sure people were always happy.
- 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. Some staff explained how the providers had supported them through difficult times in their lives, for example through illness or personal circumstances. A member of staff told us about one of their hobbies. They recognised that a person living in the home shared a similar interest and might like to go with them to a club they belonged to. They were happy to take the person in their own time, but the provider insisted the member of staff must be paid for their time. They said, "That's {registered manager} being absolutely brilliant".

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. A person told us, "We have meetings to discuss things. We are asked our opinion on things. Asked about decorations, involved in planning events. We are introduced to new staff to see if we like them".
- People 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 recognised and shared people's pride in their achievements. 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 staff respecting people's privacy and dignity at all times. For example, people were asked if they were willing to let us look in their rooms. Staff did not enter people's rooms without people's agreement.

### 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. A relative praised the detailed records completed by staff, saying, "Their recording is second to none. (When an incident occurs, the records show) 'How did we get to that incident?' Their review packages - ABC charts - it's all written down. Everyone knows what to do if he has an episode".

• A relative told us that staff had the skills and knowledge to understand when people were experiencing anxiety, and the reasons why this happened. They described how their loved one had changed over time, through support from the service, to overcome many difficulties. The providers and staff had developed strategies to help the person to change their behaviour. These were clearly recorded. They told us, "They have things in place that will carry on with him for the rest of his life". They went on to say, "They know him so well. They can tell instantly if he is having a bad day. They see the warning signs. You can tell at a glance if something is wrong! I honestly can't praise them enough".

#### 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 Palace Farm were encouraged and supported to participate in a wide range of interests. The property offered many opportunities for people 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 some of the things they enjoyed such as bee keeping, gardening and attending a local church. They had their own area of the garden where they grew lots of wild flowers for the bees. They told us, "We need them because they pollinate all sorts of plants." They showed us the clothing and equipment they used in their bee-keeping.

• Another person showed us a vintage tractor they were helping to restore. They planned to take the tractor to the local agricultural shows in the summer. They also showed us their shepherds' hut where they had an old wind-up gramophone player and a large range of old records. They told us they were very happy living at Palace Farm.

• Gardening staff supported people to grow a wide range of plants and vegetables. People told us about the fruit they liked to grow and harvest such as raspberries, strawberries, rhubarb. Last summer they had grown ten different varieties of tomatoes grown and we heard there was a lovely smell of tomatoes in the growing tunnel. People also helped look after chickens and their eggs were used in their meals.

• 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.

• Each person living at Palace Farm, and each member of staff was 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".

• 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. One person proudly spoke about their membership of a local church and we saw photographs of their recent baptism.

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.

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

• Palace Farm was previously registered as "Home Orchard", which remains as a brand name, but changed its registration with the Care Quality Commission in 2016 and is now operated under a registered partnership. Three other care homes, Summer Cottage, Sunset Cottage and Lynwood, are also run by the provider under the name Dalskats Limited. People living in the other care homes shared the facilities in the grounds of Palace Farm, such as the gardens and animal care.

- The providers live at Palace Farm and 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, "I'm bound to say that in 'Home Orchard/Palace Farm' you've essentially got the 'Reference Standard' for anyone who is either already running or wants to establish something along these lines, as the care, expertise and way they go about everything is superbly well considered and implemented".

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.