

# William Blake House Northants Farm Cottage

## Inspection report

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Date of inspection visit:  
30 October 2017

Date of publication:  
19 February 2018

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## Ratings

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

# Summary of findings

## Overall summary

Farm Cottage is a small residential care home owned and managed by William Blake House. The model of care is based on the Rudolf Steiner principles of providing a spiritually oriented community, supporting people with learning disabilities to continually develop, regardless of disability.

Farm Cottage provided care for five people with very complex learning disabilities, at the time of the inspection four people were living at the service.

At the last inspection, we rated the service 'Good'. At this inspection, the registered manager and the chief executive officer / provider, demonstrated they had continued to develop the service and the overall rating of the service is 'Outstanding'.

There was a registered manager. 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.

The service demonstrated an excellent commitment to providing outstanding care that put people at the heart of the service. The registered manager and the provider led by example and inspired the staff to deliver person centred care that consistently achieved outstanding outcomes for all people using the service.

The staff were highly motivated and inspired to offer care that was kind and compassionate. They continuously went the 'extra mile' to ensure that people lived as fulfilled and enriched lives as possible. People's individuality was upheld, which enabled people to grow in confidence and develop as much independence as possible. The staff were proud of the support they provided and the positive outcomes people had achieved. Information was provided to people in an accessible format to enable them to make informed choices and decisions about their care and support.

People and their relatives were very involved in decisions regarding their care and support needs. The care plans were very personalised to reflect people's individual requirements. Staff had an excellent understanding of people's values and beliefs on how they wanted to receive their care and support to be delivered. The support people received was flexible and responsive to people's individuality needs and preferences. This gave people an exceptional sense of wellbeing and excellent quality of life. The individual and social activities provided at the service consistently met people's needs and preferences.

The service played a key role in the local community and was actively involved in building further links. People were encouraged and supported to regularly engage with events outside of the service. People using the service and families were actively encouraged to give their views and raise any concerns or complaints. People's feedback was valued and responses to matters raised were dealt with in an open, transparent and honest way.

Staff continuously demonstrated they upheld and promoted the values and ethos of the service, through providing person centred care that respected the unique qualities of each person using the service. The provider ensured the service kept up to date with the current best practices through membership of relevant organisations and working with various professionals and agencies. The registered manager continuously looked at ways to improve the service and enhance people's lives. The feedback from the people, relatives and professionals was consistently positive.

Staff knew their responsibilities as defined by the Mental Capacity Act 2005 (MCA 2005). The registered manager was aware of how to make referrals to the local authority under the Deprivation of Liberty Safeguards (DoLS). In order to keep people safe the least restrictive practice was always used to ensure people's human rights were fully promoted.

People continuously received support by the numbers of staff according to their individual assessed needs. People's health was closely monitored by staff and they worked closely with other healthcare professionals involved in their care. People received their prescribed medicines safely; the medicines management system was clear and consistently followed by staff. Healthy eating using some home grown organic produce was integral to promoting people's good health and overall well-being.

## 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 remains Good.

### Is the service effective?

Good ●

The service remains Good.

### Is the service caring?

Good ●

The service remains Good.

### Is the service responsive?

Outstanding ☆

The service was exceptionally responsive.

People and their relatives were very involved in decisions regarding their care and support needs. The care plans were very personalised to reflect people's individual requirements.

Staff had an excellent understanding of people's values and beliefs on how they wanted to receive their care and support to be delivered.

The support people received was flexible and responsive to people's individual needs and preferences. This gave people a sense of wellbeing and exceptional quality of life.

The individual and social activities provided at the service consistently met people's needs and preferences.

The service played a key role in the local community and was actively involved in building further links. People were encouraged and supported to regularly engage with events outside of the service.

People using the service and families were actively encouraged to give their views and raise any concerns or complaints. People's feedback was valued and responses to matters raised were dealt with in an open, transparent and honest way.

### Is the service well-led?

Outstanding ☆

The service was exceptionally well-led.

The registered manager and the provider were passionate about the care of people using the service.

The registered manager and the provider put people at the heart of everything and were proactive in seeking people's views and experience of their care and support. They continually look at ways to improve the service and enhance people's experience.

There was a culture of openness and transparency; the registered manager and provider led by example and inspired the staff to provide the best possible person centred care and experience for people and their families.

There was a constant drive to deliver high standards of care. Effective quality assurance systems were in place. Any areas identified for further development were quickly addressed.

# Farm Cottage

## 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.

This comprehensive or inspection took place on 30 October 2017 it was announced and carried out by one inspector. The provider was given 48 hours' notice of the inspection. This was because the location is a small care home for people with learning disabilities, who are often out during the day; we needed to be sure that someone would be in.

Before our inspection, we reviewed the Provider Information Return (PIR). The PIR is a form that asks the provider to give some key information about what the service does well and improvements they plan to make. We checked the information we held about the service including statutory notifications. A notification is information about important events, which the provider is required to send us by law. We also reviewed information received from commissioners and other professionals involved in monitoring the care of people using the service.

During this inspection we spoke with one person using the service, three relatives, four care staff, the registered manager, the general manager, and two independent consultants. We also observed interactions between people who used the service and staff.

We looked at records in relation to the care of people using the service. We also looked at records relating to the management and quality monitoring of the service.

# Is the service safe?

## Our findings

People using the service had very complex learning disabilities. Our observations found that people were relaxed and at ease with the staff. The staff worked at people's own pace, giving people time to express their feelings. Relatives were extremely praising of the high standard of care and support their loved ones received. One relative said, "I have complete peace of mind that [Name of person] is 100% safe living here." Another relative said, "I have every confidence in the staff, they know [Name of person] so well, they are dedicated to their work and very professional in every way."

Staff told us they had received safeguarding training and that their knowledge of the safeguarding procedures was refreshed through completing annual update training. The staff training records also confirmed this took place. Safeguarding information was available in standard and pictorial formats informing people, staff and relatives how to 'speak out' if they had any concerns about theirs or others safety or welfare. One member of staff said, "I would not hesitate to report any form of abuse, I would go straight to the manager, people must protected at all times."

The staff were fully aware of the individual risks specific to each person. Such as risks associated with outings in the community, outdoor pursuits, falls and responding to behaviour that challenged the service. The staff demonstrated they continuously followed the instructions within the individualised risk assessments to continually keep people safe.

Emergency contact information was available in the event of any breakdown with the heating, water, electrical and fire systems. Emergency contingency plans were in place in case of evacuation and each person had an individualised Personal Emergency Evacuation Plan (PEEP) in place to assist in the event of the service having to be evacuated. Regular fire system checks and fire drills were carried out and these were also overseen by the registered manager as part of their quality assurance systems. Systems were in place to record and monitor accidents and incidents to identify any trends in incidents and appropriate action was taken to minimise the risks.

The recruitment process ensured that appropriate vetting checks were carried out to ensure that only suitable staff were employed to work with people using the service. The staffing levels consistently met people's individual support needs. Relatives told us their loved ones received care from a team of regular staff that knew them very well.

People could be assured that they received their prescribed medicines safely and as prescribed. The medicines management system was clear and consistently followed by staff. Records confirmed that medicines were administered correctly and regular medicines audits were carried out to check that stock levels and administration records were correctly maintained at all times.

## Is the service effective?

### Our findings

People receive effective care from a skilled and knowledgeable staff team. The staff were experienced and knowledgeable of people's individual needs and many of the staff held long service. The staff spoke highly of the training that incorporated a mix face to face workshops and distance learning / e-learning modules. One member of staff said, "The training we get is very good, it's very specific to meet the needs of the residents." Another member of staff said, "I think the induction training is very good, we also have regular update training that builds on your knowledge of caring for people with learning disabilities."

A comprehensive induction training programme was used that covered topics such as promoting people's rights, choice, dignity and independence. Records of staff training evidenced that specific training had been provided on meeting the needs of people using the service. For example, all staff had received training on advanced communication, low level intervention and equality and diversity.

Staff were effectively supported and supervised. The staff told us that supervision meetings provided them with the forum to discuss in confidence their work performance and identify areas for further support and training. Records showed that supervision meetings were planned in advance so that staff could prepare for the meetings and had time to think about things they wanted to discuss in relation to their performance and development needs. There was a system of staff appraisal meetings in place, this ensured that each member of staff had their performance, learning and development needs continually evaluated.

People who lack mental capacity to consent to arrangements for necessary care or treatment can only be deprived of their liberty when this is in their best interests and legally authorised under the MCA. The procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS). Records showed that the registered manager had followed the legal process when applying for DoLS authorisations and staff followed the least restrictive practices in order to keep people safe. All relatives said they felt the staff respected people's choices and that their rights were fully protected. Records showed that capacity assessments had been carried out for people and 'best interests' decisions were made on their behalf following the MCA code of practice.

Relatives told us they felt fully involved in all decisions regarding their family members care and support needs. One relative said, "I trust the staff implicitly, they keep in regular contact with me, they always run things by me, before making any decisions regarding [Name of person's] care. We observed staff during the inspection supporting people to make choices; they used various methods to communicate, using Makaton, picture cards, reading body language and sounds and respecting people's wishes.

There was a strong emphasis on the importance of leading a healthy lifestyle and eating a varied, balanced diet. One relative said, "[Name of person] needs a soya, gluten and dairy free diet. The food and the meals here are just fantastic, [Name of person] had calves liver for breakfast, she loved them." Mealtimes at the service were very much seen as a social event where people using the service and staff took their meals together. People using the service helped to grow their own seasonal vegetables and a strong emphasis was on eating some organic foods and assisting people to cook their own meals.

People were supported by staff to choose each day what they wanted for their meals. One person used an electronic touch screen picture book library to communicate with staff and other people used traditional picture cards. The staff were extremely knowledgeable of the dietary needs of each person using the service. They tactfully monitored people's food and drink intake and worked in collaboration with the speech and language and dietetic services.

One person followed a 'ketogenic' diet, which was used to control their epilepsy, the person received regular monitoring and support from a specialist in this area. The advice and support of a nutritional specialist had led to having in place specific meal plans designed to fit with the individual needs of each person. A visiting consultant had commented that they had seen remarkable, positive changes to people's energy levels and alertness, saying if they had not witnessed it themselves they would not have believed it.

## Is the service caring?

### Our findings

Without exception all relatives were extremely pleased with the care their loved ones received at Farm Cottage. One relative said, "The loving, care and compassion the staff provide is second to none, I truly believe [Name of relative] is extremely happy here, they are unable to verbalise their feelings but they can certainly let you know if they are unhappy. They are so relaxed, smiling and at ease living here, it's evident they are very happy. The staff are so special, they are all just marvellous." Another relative said, "This home is the best, [Name of relative] loves living here, the staff put their heart and soul into everything they do, they genuinely care for the residents and their families, we come as a package."

There was a homely relaxed atmosphere and the staff responded to people with great warmth and affection. They spoke about people using the service with great fondness, and insight. For example, one member of staff said, [Name of person] loves cycling, but very hyper sensitive to noise, we need to be very mindful of traffic noise and how it can affect them." Another member of staff said, [Name of person] communicated with their eyes, without saying a word you can tell how they are feeling. Another member of staff said, "I have never worked anywhere like this, the whole team are so motivated to making sure that everybody leads full and enriched lives."

An independent consultant commented that when they visited the service the care they witnessed was 'always at the highest standard', they said "I get a warm fuzzy feeling that people were genuinely carer for because of the amazing people they are, and appreciated by the amazing carers."

Positive caring relationships were developed with people using the service and their families. The interactions we observed between people using the service and staff were very relaxed. People were encouraged to make decisions and be as involved in their care as much as possible. One person said, "I love it here." All the relatives spoken with consistently praised the exceptional caring approach of the staff and how they cared for their family members with, kindness, compassion and empathy. One relative said, "The care that [Name of person] receives here is just fantastic, I can't speak highly enough of the staff, they do a marvellous job, [Name of person] has settled in so well, it's because he feels secure and happy." Another relative said, "I cannot fault the care that [Name of person] receives, they feel at home, they are so relaxed and happy, it's evident they are cared for extremely well. The staff are a great support for me and my family; they always have time to listen and are very empathetic."

Careful consideration was given to matching staff with people using the service. Each person had a named keyworker and a core group of staff to provide their support and caring relationships had been developed. Relatives and visitors told us they were welcomed at any time at the home. One relative said, The staff are extremely friendly and welcoming, they always have a listening ear and always giving of their time, they are very supportive, as a family we really appreciate that." Another relative said, "The staff are just brilliant, they wholeheartedly follow the Steiner philosophy of care, it is the way that we live as a family and is important to us." Information on advocacy services was available and the registered manager had a good understanding of when people may need additional independent support from an advocate.

People were supported to cope with loss and bereavements. A relative spoke of the way the staff had helped their loved one attend the funeral of a person that had passed away. They said, "The way the staff supported [Name of person] at such a sad time was absolutely wonderful. I didn't think that [Name of person] would have been able to cope with attending the funeral service, but they did extremely well. On the day, it was like everybody understood, the atmosphere during the service was so calm and relaxed, [Name of person] sat throughout the whole of the service. This was all down to the excellent support from the staff." The staff told us that on a weekly basis they and people using the service visited the person's grave to lay flowers and have time to reflect on the life of their friend.

## Is the service responsive?

### Our findings

Each person had a personal profile and pen picture which gave a summary of how they communicated, their likes and dislikes and important things personal to them that others needed to be aware of. The staff followed the care plans and had an excellent knowledge of each person using the service and worked very closely with families. Relatives told us the staff kept in regular contact with them and they were involved in all decisions about their loved ones care. One relative said, "I am fully involved in all decisions about [Name of persons] care, the communication with the staff is brilliant, we have a very close working relationship." Staff supported people to use social networks such as 'Skype' and 'face time' to keep in touch with their friends and families.

During the inspection we observed staff support and assist people using various methods of communication, responding to tone of voice, sounds and gestures. The service made sure people had access to the information they needed in a way they could understand it. Easy read pictorial stickers were used to assist people to communicate with staff and make informed choices. One person had a passion for games and electronic gadgets and they had successfully learned how to use a touch screen picture bank, the staff said this had really made a difference to the person in improving their communication.

Staff used innovative ways of supporting people and involving families in their care. For example, some people went to stay with families for weekends. In order to make the change of environment as smooth as possible for people, the staff and families had worked together to replicate the layout of bedroom in the family home with the bedroom at Farm Cottage.

The emphasis on activities was about awakening the senses, through exploration fun and enjoyment. All people using the service were supported to do activities outside of the home on a daily basis. A 'Green Space' was used by people using the service to grow their own organic vegetables, flowers and anything of their own choice and people also enjoyed tending and caring for some small animals. One relative said, "The activities they [staff] do here are absolutely marvellous, [Name of relative] really enjoys them, she goes out every day, I can't believe how well she looks." The activity person told us they organised activities according to people's individual preference, people went horse riding, trampolining, walking, rock climbing, sailing and swimming.

Relatives and staff told us that people regularly met up with friends and family, they went to clubs, on day trips and on holidays with staff and families. One member of staff told us they had supported a person on a short break to Alton Towers and Water World, they spoke of how rewarding it was to see the person having such a good time. Another member of staff said "I love working here; I find everyday rewarding, as long as the people are happy, I am happy." Another member of staff said, We all work together, staff and volunteers all as one, all with the same aim to make people's lives better."

Appreciation of the seasons took place through 'Home Making' sessions using arts and crafts. The sessions were facilitated by an external consultant and people were supported by staff to be involved in making the living spaces homely. The registered manager told us the Rudolf Steiner philosophy of care followed by the

service celebrated nature and the changing of the seasons. The concept was to enable people to connect with nature, spiritual feelings and emotions. People had recently celebrated a harvest festival, held at the local village hall. They were supported to decorate the hall with their home grown organic fresh fruit and vegetables and in making some impressive scarecrows that they wanted to bring back into the house. The festival included a story telling session on the cycle of the year from sowing to harvest. The staff told us after listening to the story they and people using the service sat together to enjoy a meal of homemade soup and cakes.

Alternative therapies were provided for all people to help relax and stimulate the senses, these included art therapy, rhythmical massage, hydrotherapy and eurythmy, (which used breathing techniques and rhythmic movements to help relieve tension and stress). One member of staff said, "People really benefit from having these types of therapies, you can really see the positive difference they make, especially in improving peoples concentration levels." For example, over several months of receiving eurythmy session's one person had learned to clap their hands, which was something they had never been able to do. During the summer the person along with several people using the service had attended the first ever 'Relaxed Prom' held at the Royal Albert Hall. The concert was aimed specifically at children and adults with autism, sensory and communication impairments and learning disabilities as well as individuals who are deaf, hard of hearing, blind and partially sighted. The concert had a relaxed attitude to noise and movement, and encouraged participation throughout. It started with the presenter, getting the audience to clap their hands, and wave in time to the music whilst singing 'Hello'.

The registered manager said, "Clapping your hands may come natural to you or I, but for some people it's not so easy. As a direct result of receiving eurythmy therapy [Name of person] was able to fully participate with the rest of the audience, clapping in time to the music and applauding the musicians and performers." This meant the service used innovative and creative ways to enable people to live as full a life as possible.

The service had excellent support from Milton Keynes City Orchestra who supported them in providing people with access to musical instruments to learn about their different sounds and vibrations. People using the service regularly attended concerts performed by Milton Keynes City Orchestra. People that found it too overwhelming to attend concerts were provided with one to one music sessions, if they wished to participate. For example, one person that loved using electronic gadgets preferred to listen to their favourite music streamed on their iPod.

People had full access to village life and regularly attended local community events. People had regular contact with local businesses, regularly visiting the local grocery shop and butchers. A local supermarket had chosen the service William Blake House as their charity of the year and the donations received went towards the furnishing of a sensory room. People using the service took on the role of recycling champions in the village, collecting items and taking them to the recycling centre. The chief executive officer regularly attended village meetings to promote the work of the service, and as a result of one meeting a community defibrillator machine had been placed on an outside wall for villagers to access in an emergency.

Information on how to raise any concerns or complaints was available in easy read formats. One relative said, "The care [Name of person] receives is absolutely marvellous, second to none, the staff and management are very responsive. I am extremely pleased and eternally thankful [Name of person] lives here, I have no complaints at all." This sentiment was echoed by all the relatives spoken with. They told us they had close working relationships with the registered manager and the staff team and would speak with the registered manager or any member of staff if they ever had any cause for concern. Records showed no complaints had been received; although systems were in place to respond to complaints should they arise.

## Is the service well-led?

### Our findings

A registered manager was 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.

As required by law the provider had the rating following the last inspection on display within the service and on the provider website.

Farm Cottage was highly regarded by the relatives of people using the service. Relatives said they had great confidence in the care provided for their loved ones. They told us they had specifically chosen the home as a place for their loved ones as the philosophy of care was in keeping with their values and beliefs. All of the relatives spoken with said their loved ones had attended Rudolf Steiner specialist schools and that moving to live at Farm Cottage as young adults was a natural progression for their loved ones.

The Rudolf Steiner model of care values the benefits of living within a caring community, promoting continual development regardless of disability. This approach was without exception understood by the registered manager and the whole of the staff team. The registered manager was keen and enthusiastic and led by example, promoting the spirit of the service. The staff told us they felt valued and very inspired to help people to achieve their full potential. They took great pride in celebrating achievements people had made. Each person was supported to do the things they enjoyed, to go on social and leisure outings, visit friend and family, go on day trips and holidays and involved in local community events.

The provider ensured that service development was based around the feedback they received from people using the service, families, staff and stakeholders. The feedback we received about the service was consistently positive indicating people and their relatives were extremely pleased with the care and support received at the service. An external consult commented, "I am always welcomed when I visit Farm Cottage, the staff team understand the importance of my role and my need to remain independent. The management embrace my ideas and suggestions and contact me to check changes in legislation. I believe this is a high quality organisation that always puts the needs and wishes of residents first. I am always impressed by the staff team who work so hard for the betterment of the lives of the residents."

A Social Worker that regularly visited people at the service said they would highly recommend the service. They said the home was one of the best they had visited. They said the registered manager had excellent leadership skills, which had developed a staff team that were highly skilled and trained in their roles. They said "You can 'feel' their commitment & dedication to the people they work with. Everything they do has the resident's best interests as an individual at the core."

Regular staff meetings took place and staff spoke positively about the support they received. As a result of feedback from staff the registered manager and the provider were in the process of improving the care plan format. The feedback received from stakeholders about the care provided for people using the service was

very positive. A psychologist that had worked with people using the service for a number of years said they wanted to express their heartfelt appreciation for the excellent work carried out at Farm Cottage. They commended the organisation, for the calibre of the staff, the consistency of the application of therapies and activities in a person centred way and the overall quality and suitability of the management.

There was an open and transparent culture. People, staff and families were kept informed about how the service was developing and the provider ensured that any learning from feedback they received was shared across the organisation. For example, a 'Frequently Asked Questions' Information document had been developed to help relatives of people moving into the service to adjust in the transition. The provider had also responded to a relatives request for additional activities for their loved ones and had been heavily involved in reviewing the activity schedule.

The registered manager informed the Care Quality Commission of notifiable events as required by law. They also informed with the safeguarding authority investigating incidents and kept families fully informed.

The registered manager continuously looked at ways to improve the service. They held regular quizzes with staff based on the fundamental care standards and the key lines of enquiries (KLOE's) that staff needed to be aware of in their day to day work. In discussions with the staff they demonstrated they were very knowledgeable of these standards.

The chief executive officer / provider were an 'Association for Real Change Champion'. They regularly visited the service and were passionate about the ethos of care provided for people. They kept in regular contact with families to update them on progress and developments within the service.

Established quality assurance systems in place and a programme of audits were undertaken by the registered manager and the provider. In addition an external consultant carried out 'Quality Effectiveness Reviews' to monitor the service to continually drive improvements. Areas identified for further improvement had timescales put in place for action and records showed the necessary action had been taken well within the timescales. The feedback we received from external consultants was very positive. One consultant said the management embraced their ideas and suggestions and regularly contacted them to check changes in legislation. They said the provider worked to extremely high standards always putting the needs and wishes of people using the service first.

The service worked in partnership with other organisations to make sure they were following current best practice and providing a high quality service. Strong links had been forged with the Community Team for People with Learning Disabilities (CTPLD), epilepsy specialist nurses and a specialist learning disability consultant within the NHS. This ensured that people received timely support from specialists in meeting their on-going needs.