

# Satash Community Care Project Limited

## Orchid

### Inspection report

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Essex  
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### Ratings

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

# Summary of findings

## Overall summary

Orchid is registered to provide accommodation with personal care for up to four people who have a learning disability. There were four people living at the service on the day of our inspection.

At the last inspection, the service was rated Good. At this inspection we found the service remained Good.

The service was safe. The registered provider had thorough recruitment procedures which ensured that only suitable staff were employed. There were enough staff to help keep people safe, meet their needs and protect them from harm and abuse. Risks to people's health and wellbeing were appropriately assessed, managed and reviewed. People received their medicines as prescribed.

The service was effective. People were supported by staff that had the skills and experience needed to provide effective care. The registered manager understood their responsibilities in relation to the Mental Capacity Act 2005 and the Deprivation of Liberty Safeguards. People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible. People were supported to eat and drink enough, maintain a balanced diet and to access health and social care services when required.

The service was caring. Staff knew people exceptionally well and were kind and sensitive to their needs. Staff were observed providing excellent personalised care and support and it was evident they clearly understood people's individual needs. Staff ensured people's privacy and dignity was respected and maintained at all times.

The service was responsive. Care plans were person centred and were regularly reviewed. People were encouraged and actively supported by staff to pursue their interests and hobbies. The service had a clear process in place for dealing with complaints.

The service was well-led. Staff, relatives and healthcare professionals were complimentary about management who were committed to providing an excellent person centred service, enabling and empowering people to have a good quality of life. There were systems in place to regularly assess and monitor the quality of the service provided and people living and working in the service had the opportunity to say how they felt about the home and the service it provided.

Further information is in the detailed findings below.

## 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 has improved to Good.

### Is the service caring?

Good ●

The service remains Good.

### Is the service responsive?

Good ●

The service remains Good.

### Is the service well-led?

Good ●

The service remains Good.

# Orchid

## **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 was a comprehensive inspection which means we looked at all of the fundamental standards of care. The inspection took place on the 4 and 11 April 2017 and was unannounced. The inspection was undertaken by one inspector.

Prior to the inspection we reviewed all the information we held about the service including statutory notifications we had received about the service. Notifications are changes, events or incidents that the provider is legally obliged to send us.

Most people living at the service had very complex needs and were not verbally able, or choose not to, communicate with us so we used observation as our main tool to gain insight of their experiences. We spoke with one person living at the service, two relatives, three members of staff, deputy manager and the registered provider. The registered manager was unavailable when we visited the service and we spoke with them by telephone on the 11 April 2017. We also received feedback on the service from one health and social care professional.

We looked at a range of documents and written records including two people's care plans, risk assessments and daily records of care and support. We also looked at the registered provider's arrangements for supporting staff, managing complaints and monitoring and assessing the quality of the services provided at the home.

# Is the service safe?

## Our findings

At this inspection we found the same level of protection from abuse and harm and risks to people's safety as at the previous inspection and the rating continues to be Good.

People's relatives told us they felt their family members were safe living at the service. One relative told us, "[Name] has really settled in now and I feel they are safe." We spoke with one person living at the service and asked whether they felt safe living at the service, they responded by smiling and said 'yes'.

People were protected against the risks of potential abuse. Staff had received safeguarding training and demonstrated a very good understanding of the different types of abuse and the actions they would take to report any suspected abuse. All the staff we spoke with were confident if they had any concerns, these would be fully investigated by management and escalated to authorities appropriately, thereby ensuring people were protected. One member of staff told us, "If I had any concerns I would bring them to the immediate attention of the deputy manager or senior in charge. If my concerns were not addressed I would not hesitate to whistleblow but I don't feel I would ever need to do so."

Staff had the information they needed to support people safely. Risks to people's safety were assessed and, where appropriate, plans were in place to mitigate any identified risks. These assessments included potential risks to people both within their own home and in the community and included information on how staff should manage these risks and support people in the safest way. For example a risk assessment had been developed for one person to independently access the local community. This showed that the service was not risk adverse and actively supported people to maintain their independence as much as they were able to. There were arrangements in place to keep people safe in the event of an emergency and staff understood these and knew how to access relevant information if needed. A health and social care professional told us, "Staff have always been able to work closely with me providing any relevant information to ensure that the [person] is safe whilst in the home and in the community."

Thorough recruitment procedures were in place to ensure staff were of good character and suitable for their role. The registered provider ensured, and records confirmed, that there were appropriate staffing levels to meet people's care and support needs safely. The registered provider told us that should additional staff be required to cover any unplanned absence such as staff sickness, the service was able to source additional staffing from the registered provider's other local services. Staff told us that they felt there were always enough members of staff on each shift. A relative told us, "There's always enough staff, ample." During our inspection we observed staff supporting people in a timely way and sufficient staffing levels to meet people's individual needs.

There were safe administration systems in place to ensure people received their prescribed medicines. Medicines were supplied by a local pharmacy on a monthly basis. Medicines were stored safely in a locked cabinet and were administered by staff who had received appropriate training.

# Is the service effective?

## Our findings

At our last inspection the service was not consistently effective. Staff had not completed training in the Mental Capacity Act 2005 (MCA) and Deprivation of Liberty Safeguards (DoLS) and we found that the service was not always working within the principles of the MCA and DoLS. At this inspection we found improvements had been made.

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 DoLS. The 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.

We checked whether staff were working within the principles of the MCA and whether any conditions on authorisations to deprive a person of their liberty were being met. Staff had received MCA and DoLS training and understood the importance of consent and explained to us how they gained people's consent to their care and helped people to make choices on a day to day basis. Records showed that people's mental capacity had been assessed and any decisions were made in their best interests in the least restrictive way in line with legislation. Where people had been deprived of their liberty appropriate applications had been made to the 'Supervisory Body' for a DoLS authorisation.

Staff completed appropriate training and support to meet the needs of people. One member of staff told us, "Without a doubt I've had all the training I need, we are always training." We asked a relative whether they felt staff were well trained and competent to meet their relative's care and support needs. They told us, "I think the staff are well trained they go on a lot of training courses and I'm confident they are able to support [name]." New staff completed an induction when they commenced employment. The induction included a period of shadowing experienced staff and getting to know people living at the service. One member of staff told us, "I was not rushed, I could have requested a longer induction if needed." Staff told us they felt they had all the training they needed to support the individual needs of people living at the service. They also informed us that they could seek advice and guidance from management at any time if required. Records showed that staff had received regular supervision and annual appraisal. This meant staff had a structured opportunity to discuss their practice and on-going development needs.

Staff monitored people's food and drink intake to ensure all residents receive enough nutrients in the day. People were able to choose what food they wanted and pictorial cards were available to aid this process and inform menu planning. We saw that people's care plans recorded people's food dislikes and likes and that the service ensured food was available which met people's specific cultural dietary needs.

People were supported to access healthcare services as required such as GPs, hospital appointments and dentists. The outcome of health appointments were recorded within people's care plans so that staff knew

what action to take. Care records demonstrated the service worked effectively with health and social care services to help ensure people's care needs were met.

## Is the service caring?

### Our findings

At this inspection we found people were as happy living at the service as they had been during our previous inspection. The rating continues to be Good.

Staff provided a caring and supportive environment for people who lived at the service. People appeared happy, content and relaxed in the presence of staff. Relatives were extremely complimentary and praised the caring attitude of staff. One relative told us, "The staff have really got to know [person] and their quirky ways and they have got to know them. It's nice for me to see how they are with staff and how they respond." Our observations during the inspection showed that staff clearly knew people very well and had developed positive relationships with people living at the service.

Care plans were person centred and contained detailed information about people's life history which helped staff to gain an understanding of individual's likes, dislikes and preferences in regard to all areas of their care and support including cultural and religious beliefs. All the staff we spoke with were able to demonstrate a good knowledge of how people wished to be supported and were respectful of people's cultural and spiritual needs.

Staff treated people with dignity and respect. We heard staff talking with people in a kind and caring way, respecting each of them as individuals. People's independence was promoted and encouraged by staff to enable them to do as much as they could for themselves where they were able to. For example to partake in household chores, meal preparation and to independently access the local community. One member of staff said, "We don't want to take people's independence away, we try and teach them more skills it's like a family here, I don't see this as work." Staff informed us that people's well-being and dignity was very important to them and ensuring that people were well-presented was an important part of their supporting role.

Staff recognised the importance of social contact and the importance for people to maintain friendships and contact with families. For example we saw that one person was supported to stay in contact with their family who lived abroad by using modern technology. When we spoke with the person their expression clearly indicated how important this was to them and that it made them happy. There were no restrictions on visiting the service and relatives confirmed to us that they were able to visit at any time.

The service had information available about local advocacy services. An advocate supports a person to have an independent voice and enables them to express their views when they are unable to do so for themselves.



## Is the service responsive?

### Our findings

At this inspection we found staff were as responsive to people's needs and concerns as they were during the previous inspection. The rating continues to be Good.

People received personalised care. Care plans were very person centred, identifying people's needs, choices and preferences and how these should be met. The care plans we looked at clearly described what staff needed to do to ensure personalised care was provided. There was also guidance in place for staff to follow should people become anxious or upset.

The registered provider told us how they met with health and social care professionals and people's families to plan and discuss people's transfer to the service. People were also encouraged to spend time at the service before moving in to see if it was suitable for them. Staff completed comprehensive assessments of people's needs before they were admitted to the service and this information was used to develop people's care plans. Care plans were reviewed every three months or sooner if people's needs changed. A social care professional told us, "I have no concerns at this stage with the way the members of staff work with [person]. They ensure that all their medical, social, emotional and day to day needs are adequately met."

The service was flexible and responsive to people's individual needs and preferences. We saw examples where people had been successfully transitioned from the provider's other services, for example from the young people's service. This meant staff had an excellent understanding of individuals and managed their transition between services exceptionally well. Furthermore this ensured people had continuity as they were familiar with all the staff who worked across the provider's services. We noted that the service was in the process of supporting a person to move on to a more independent setting. The registered provider had been granted planning permission to build a ground floor extension at one of the provider's neighbouring services. We saw that a transition folder had been set up for the person to successfully support their transition to more independent living.

People who used the service were actively encouraged and supported to engage in events both within and outside the service that interested them; this was also confirmed by relatives we spoke with. For example one person enjoyed horse riding and we saw photographs of the person enjoying this activity. People were also supported to go on holidays, including holidays abroad. A relative told us, "The stimulation is good. [Person] has been on a few weekend breaks and they [staff] are planning a trip abroad this year, they have never been on an aeroplane before." They went on to say how staff always sent photographs of their relative enjoying days out, they said, "[Name] is always smiling and happy [in the photos] and likes to be out and about."

The service had a policy in place for dealing with complaints and this was clearly displayed at the service and was accessible in different formats. The service had received one formal complaint which had been dealt with professionally in line with the procedures. Relatives we spoke with told us that they felt confident they would be listened to if needed to make a complaint or had any concerns.

## 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. Relatives and staff reported to us that the service was well managed. The rating continues to be Good.

There was a positive person centred culture within the service between the people that lived there, staff, deputy manager and registered provider. During the inspection the registered manager was not in attendance but all the staff we spoke with spoke highly of her and were able to demonstrate how they met people's needs and how they were able to run the service in her absence.

People's relatives and staff told us that they felt the service was well managed. Staff told us that staff morale was high. They were extremely positive about the support they received and spoke highly of the management team who they said were always accessible and approachable. One member of staff said, "I do feel I've had all the training I need and there's not a day I don't feel like coming in, management are really supportive." Another said, "I love it here everyone works well as a team, I would not want to work anywhere else". Managers from across the registered provider's services met regularly to discuss a range of topics. This had the additional advantage that all managers within the registered provider's services had up to date information on the service and the needs of people living there; this was confirmed by a visiting manager from a neighbouring service on the day of our inspection. The openness and culture of the service meant that people continually received improving support.

The registered provider had clear vision and values that were person centred and focussed on enabling and empowering people to achieve their full potential and lead a lifestyle of their choice. These values were embraced by staff and underpinned working practices. Throughout our inspection staff demonstrated that they were committed to ensuring people had the best quality of life. The registered provider told us they recognised and celebrated staff achievements at annual celebratory events where people from across the registered provider's services and their friends and families were present. They went on to inform us that they were in the process of implementing a new award recognition scheme for staff from the end of April 2017.

Staff meetings were held and topics such as updates on people living at the service, training, activities and the day to day running of the service were discussed. Staff told us that they were able to openly discuss any concerns and suggestions for improvements to the service. The deputy manager told us that following their request a budget had been allocated for a sensory 'garden cabin'. At the time of our inspection we saw that the cabin had been erected. The deputy manager went on to describe how people living at the service would enjoy this sensory experience once the project was completed. This showed us that staff had the opportunity to be involved in how the service was run.

There were systems in place to monitor the quality and safety of the service. The registered manager was

committed to delivering a high standard of care to people and carried out regular checks and audits such as health and safety, medication and the fire system to ensure people's health and welfare. Questionnaires were also undertaken to seek feedback on the service from people and their relatives. An external consultant visited the service regularly to undertake quality assurance checks. This demonstrated that the registered provider had a quality assurance programme in place. The last quality monitoring report undertaken by the local authority in January 2017 showed that a score of 78% had been achieved which evidenced that people received a good service.