

# Condover College Limited

# The Orchard

## Inspection report

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Date of inspection visit:  
19 September 2019

Date of publication:  
22 October 2019

## 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

### About the service

The Orchard is registered to provide accommodation with personal care, to a maximum of six people who have a learning disability, physical disability, sensory impairment or autistic spectrum disorder. Six people lived at The Orchard. Five people were on holiday when we inspected. We met with them at their holiday destination. The Orchard is a large adapted bungalow with single en-suite bedrooms and shared communal areas. There is outdoor space for people to enjoy and car parking available.

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.

The Secretary of State has asked the Care Quality Commission (CQC) to conduct a thematic review and to make recommendations about the use of restrictive interventions in settings that provide care for people with or who might have mental health problems, learning disabilities and/or autism. Thematic reviews look in-depth at specific issues concerning quality of care across the health and social care sectors. They expand our understanding of both good and poor practice and of the potential drivers of improvement.

As part of thematic review, we carried out a survey with the provider and manager at this inspection. This considered whether the service used any restrictive intervention practices (restraint, seclusion and segregation) when supporting people. The service used positive behaviour support principles to support people in the least restrictive way. No restrictive intervention practices were used.

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

People were safe and protected from abuse because staff assessed and managed risk. There were enough staff to meet people's care and support needs. Staff were recruited safely. People received their medicines as they needed. The home was clean and maintained and staff practised good infection control.

People had complex care needs and limited verbal communication and relied on other ways of communicating their needs and preferences. Staff had assessed people's specific communication needs and were familiar with the ways people communicated. People were able to get involved in a variety of activities with staff support. Staff observed people's reactions which indicated whether they enjoyed particular activities. Staff encouraged families to tell them about any concerns or complaints. People could remain at The Orchard when heading towards the end of life, with familiar people to support them.

People were helped to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice. Staff assessed

people's capacity to make decisions and supported them with decision making. People saw healthcare professionals promptly to assist their health and wellbeing. Staff supported people to receive sufficient nutrition and were familiar with people's dietary needs. The design of the home met people's needs. Staff had been appropriately trained and supported and had the skills, knowledge and experience to provide good care.

The service applied the principles and values of Registering the Right Support and other best practice guidance. 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.

Staff provided care that met people's different needs and preferences. People and their relatives were involved in planning their care and encouraged to make decisions. People indicated they were happy with their care. Relatives said their family member was treated with respect and consideration.

People indicated staff involved them in decisions and asked them for their views. Relatives told us staff listened to and acted on these. The registered manager worked in partnership with other services and organisations to make sure they followed good practice and people in their care were safe. The management team monitored and audited the service to check on the quality and make sure staff were providing good care. They understood and acted on legal obligations, including conditions of CQC registration and those of other organisations.

For more details, please see the full report which is on the Care Quality Commission (CQC) website at [www.cqc.org.uk](http://www.cqc.org.uk)

Rating at last inspection:

At the last inspection with the previous provider the service was rated good (published 17 March 2017).

Why we inspected

This was a planned inspection based on the rating at the last inspection.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

## 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.

# The Orchard

## 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.

#### The inspection team

This inspection was carried out by an inspector.

#### Service and service type

The Orchard is a 'care home'. People in care homes receive accommodation and nursing or personal care as 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. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

#### Notice of inspection:

The inspection was announced. This was because the service is small and people are often out and we wanted to be sure there would be people available to speak with us.

#### What we did before inspection

We completed our planning tool and reviewed information we had received about the service since registering with CQC. This included notifications we had received from the provider, about incidents that affected the health, safety and welfare of people supported by the service. We looked at previous inspection reports. We also sought feedback from partner agencies and health and social care professionals. 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 five people who lived at The Orchard and five relatives. We spoke with seven members of staff including the registered manager, head of care and care staff. Five people were on holiday in Lancashire with staff support, when we inspected. We met up with them in Blackpool before later visiting the home in Wem, Shrewsbury. We also spoke with the registered manager when they returned from the holiday.

To gather information, we looked at a variety of records. This included medicines records and one person's care records. We looked at information in relation to staff training and supervision. We also looked at other information related to the management of the service including audits, surveys and meeting minutes. We did this to ensure the management team had oversight of the service and they could respond to any concerns highlighted or lead in ongoing improvements. We walked around the building to check the home was clean, hygienic and a safe place for people to live. The home was being redecorated while people were on holiday.

# Is the service safe?

## Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At the last inspection this key question was rated as good. At this inspection this key question has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of abuse and avoidable harm. Relatives said they felt their family member was safe because of excellent staff attitudes and attention, good building security and skilled personal care. A relative told us, "We have had some traumatic times over the years [in other services] but since [family member] moved here we have been overwhelmed with the care staff give. We trust them absolutely."
- Staff attended training in safeguarding adults. They were able to describe the action they would take if they felt someone was being harmed or abused. There was information displayed around the building with contact details of the local safeguarding authority.

Assessing risk, safety monitoring and management

- The management team completed risk assessments to make sure they kept people safe. Staff supported people to be as independent as possible, while reducing unnecessary risks.
- Staff had arrangements in place to support people in emergency or unexpected situations.

Staffing and recruitment

- Staff recruitment was robust. The management team completed recruitment checks to reduce the risk of employing unsuitable people before staff were able to start working for the service.
- There were sufficient, suitably skilled and experienced staff to meet people's needs.
- A relative told us there were enough staff and they supported people with dedication and enthusiasm.

Using medicines safely

- Staff managed medicines safely, as prescribed and in line with good practice guidance. The registered manager checked staff were giving medicines safely through audits and staff competency checks. There were few errors but if they did occur, staff dealt with them promptly.
- Staff told us they received training in managing medicines. This helped them give medicines correctly and to learn about the uses for and effects of various medicines. A relative told us staff monitored their family member exceptionally well during a medicine's changeover.

Learning lessons when things go wrong

- Staff learnt from situations that did not go as well as planned. They reported and documented accidents, incidents and near misses. The registered manager reviewed these for lessons to be learnt, so the risks of similar incidents were reduced.
- The registered manager was aware of their responsibility to report any issues to the relevant external

agencies and did so promptly.

#### Preventing and controlling infection

- Staff and people they supported, were protected from potential infection because staff were trained and followed safe infection control practices. Staff told us they had access to disposable gloves and aprons when they supported people with personal care. This reduced the risk of cross infection.



# Is the service effective?

## Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

At the last inspection this key question was rated as good. At this inspection this key question has remained good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

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

- Staff supported people with sufficient nutrition and the assistance they needed. The organisation had its own speech and language therapists (SALT). They supported staff to provide the right care for people and staff were proactive in raising any concerns. This helped people to receive effective and timely nutritional care and support.
- Several people received nutrition by a percutaneous endoscopic gastrostomy (PEG) artificial feeding tube. These are used when people are unable to swallow or eat enough and need long term artificial feeding. Other people had a soft / blended diet which staff made sure was nutritious and balanced. Staff had been trained and had the skills to support people safely.

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

- People's needs were met by the design of, and aids and adaptations available in the home. Equipment was personalised and appropriate. Bedrooms were personalised to people's individual taste.
- The decorators were redecorating the house when we inspected. People had been involved in choosing the new décor. However, the decorating was being done when people were away, to reduce any health and safety risks. There were pleasant, secure garden areas, for people to enjoy in safety.
- The service had Wi-Fi (wireless connectivity) fitted so people with computers, smartphones, or other devices to connect to the internet or communicate with family and friends.

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

- The staff team worked closely and effectively with health and social care professionals. They helped people to receive health care promptly to improve their health and wellbeing. A relative said, "A staff member always comes with me on [family member's] health appointments. We work very well together to make sure they get the right health care."
- Relatives told us staff listened, followed advice and provided important information quickly. This assisted other professionals in providing correct treatment. Staff responded quickly to emergency situations so prompt care was provided.
- Staff helped people to live healthy lives, by making sure they had good healthcare, encouraging exercise and activity and providing appropriate nutrition.

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

- The registered manager carried out thorough assessments that focused on the person, so they received the care and support they needed.

- Staff reviewed care plans with people to make sure information was up-to-date and changes made promptly. Although people were unable to communicate using speech, staff used a variety of ways to involve people in planning their care and support. They listened to what each person 'told' them and acted on the way they liked their care provided. Relatives and care records confirmed this.
- Staff applied learning effectively in line with best practice. This assisted them to provide care that met people's needs.

Staff support: induction, training, skills and experience

- Staff were given training to help develop their skills and knowledge. Relatives told us they felt staff were skilled, competent and committed to giving good care.
- Staff said their induction and training was thorough and informative and helped them support people well. They had regular supervision and appraisal as well as frequent informal discussions. They told us these were encouraging and helpful.

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 registered manager had made applications for DoLS where people did not have capacity and restrictions were placed upon them for their safety. Staff met any conditions where DoLS had been authorised.
- People had been asked for their consent to decisions where they were able to give this. Where people were unable to make a particular decision, relevant people were involved in best interests decisions.

# 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 good. 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

- Staff were respectful of people's rights and differences.
- Staff were trained to make sure they understood equality and diversity. They were familiar with people's individual and diverse needs which helped them provide the right support.
- We spent time observing staff interacting with people. Staff routinely involved people, chatting with individuals and pointing out things going on around them. They fully included each person. We saw the huge smile on one person's face when a staff member took them on the dance floor, twirling them gently in their wheelchair. They were clearly delighted.
- People were noticeably comfortable with staff and smiled in response to conversations. We asked two people if the staff were good and kind. One person smiled when we asked. Another person laughed and reached for a member of staff indicating they were happy with them.

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

- People were involved in planning their care and with making day to day decisions as much as possible. Staff used different ways of encouraging people to show their likes and dislikes. Staff observed people's reactions to different situations where people were unable to voluntarily communicate. Staff also sought guidance from people's friends and relatives.
- Staff involved relatives in discussions about their family member's care and activities, and in making important decisions. The registered manager felt this was essential where people had limited communication and complex needs. They recorded people's responses in their care records so relevant people could share this information.
- People and their relatives had information about advocacy services, so an independent person was able to act on their behalf, if needed.
- Family and friends were encouraged and welcomed to visit. Visits could take place in private if people wished.

Respecting and promoting people's privacy, dignity and independence

- Staff were respectful of people's privacy, dignity and independence. A relative told us "The staff always knock on [family member's] door before going in. There is a wonderful atmosphere in the home. It is a fabulous place."
- Staff were sensitive to people's privacy and dignity when people needed assistance. We saw they quietly blocked the view of others, when one person needed privacy in a public area.
- People's care records were kept securely, and their confidentiality respected.

# 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 good. 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; 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 had informative, person-centred care plans which informed staff how the person was be cared for. A relative told us how well staff knew what their family member enjoyed and what they didn't, through careful observation and meticulous record keeping.
- People were able to join in a range of social and leisure activities including sensory stories, light sessions, cooking, music, swimming, shopping, concerts and shows, gardening days out and holidays. These assisted in meeting people's social, spiritual and emotional needs and helped reduce social isolation. A relative told us their family member had changed so much since moving to The Orchard. They added their personality was shining through due to the staff's commitment and enthusiasm.

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.

- Staff were aware of the AIS. They made sure people with a disability or sensory loss were given information in a way they could understand.
- The staff team recorded each person's communication needs, including speech, hearing, sight or understanding in people's care plans. These were informative and thorough.

Improving care quality in response to complaints or concerns

- The provider had a complaints policy and procedure and complaints information was available for people and their representatives. There were also easy read versions available. No one had made a complaint. Relatives said they had never needed to and had no complaints about the care provided to their loved ones.
- Relatives were confident any concerns would be dealt with quickly and any changes needed would be made. They said they would discuss with the registered manager if they had issues.

End of life care and support

- Staff understood the importance of supporting people and their families and provided thoughtful and sensitive end of life care. They told us they had recently supported a person at the end of their life. They had supported the family, other people in the home and their colleagues during this difficult time and after the person had passed on. A while later the family and all at The Orchard had a celebration of the person's life in remembrance and as part of the grieving process.

- Staff had explored people's preferences and choices in relation to end of life care where people were willing. They had recorded this in care plans.

# 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 requires improvement. At this inspection this key question has improved to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- At the last inspection the home was going through a change of manager. There had been some confusion over management responsibilities during this period. Also, some care records had needed attention. On this inspection management of the home was good. The registered manager had an efficient system of monitoring, carried out frequent checks on the quality of the service and records were informative and up to date.
- The registered manager, provider and management team, worked effectively together. There was a clear staffing structure and lines of responsibility and accountability.
- The registered manager followed current and relevant legislation along with best practice guidelines. They understood legal obligations, including conditions of CQC registration and those of other organisations.

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

- The registered manager involved people and their representatives in their care and any changes in the service. Relatives told us the registered manager was passionate about providing the right care and support. A relative said they were totally professional and extremely caring, had an open door and listened to any suggestions.
- The management team were proactive in communicating with people. They sought their views in a variety of ways including informal discussions, sensory stories, resident meetings and surveys. Relatives told us staff sought their opinions and fully involved them.
- Relatives knew and spoke highly of the registered manager and said the home was well managed. They told us they took note of any suggestions and welcomed feedback about the way the service was run. They said any issues were sorted out straight away.
- Staff told us they had regular meetings as well as informal opportunities to share ideas and comments about care. Staff felt the registered manager was extremely supportive and was constantly improving the home for people. A staff member said, "[Registered manager] is amazing. She is absolutely passionate about giving the residents the best. She is also really helpful to staff as well as the people we support."

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; 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 registered manager and staff team were open and transparent and were clear people they supported

were their priority. Relatives told us they felt the service was open and inclusive and the registered manager was developing the home all the time. Staff said the registered manager routinely worked closely with them and encouraged and motivated them to give the best possible care.

- The registered manager and provider met their responsibilities to apologise to people and/or their relatives when mistakes were made and act on their duty of candour. They told us there had been no recent events that had required such a response.

#### Continuous learning and improving care

- The registered manager and provider had systems to check people were getting good care and people were being supported as they should be. They frequently completed audits, sought people's views, and reviewed care and records. They evaluated any accidents and incidents to see if lessons could be learnt and to reduce risks of similar events.
- The registered manager referenced current legislation, standards and evidence-based guidance. Where improvements could be made these were discussed and acted on.

#### Working in partnership with others

- The registered manager maintained good working relationships with partner agencies. This included working with commissioners and health and social care professionals. They were involved in the local community to make sure people were part of the community and raise awareness of the service.