

Community Homes of Intensive Care and Education Limited

Orchard End Ltd - Highnam

Inspection report

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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

We inspected Orchard End Limited – Highnam on the 13 December 2016. Orchard End Limited provides support to three people living at a nearby shared house called Sunnybank. There were three people living at the service; however only one of these people requires support with their personal care needs. This was an announced inspection, as the service is small and we needed to ensure the registered manager was available. This was the first time we had inspected this service.

There was a registered manager in post on the days of our inspection. They were in the process of handing the management of the service to a new manager, who had history of working with the service. The registered manager is also one of the providers of the service. 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.

People were kept safe. Support workers ensured people were protected from the risks associated with their care. People were supported with their independence and to take positive risks.

People enjoyed spending time with support workers and were supported to live full and active lives. They were supported by a kind, caring and compassionate support team. Support workers clearly knew people's needs, wishes and preferences.

People told us they felt safe with support workers and safe in the home. Staff had a good understanding of safeguarding and the service took appropriate action to deal with any concerns or allegations of abuse.

People's needs were assessed. Where any risks were identified, management plans were in place. They were supported in a way that recognised their rights to take risks. The care and support people received was personalised to their needs.

People views on the service sought. The registered manager and provider ensured the views of people and healthcare professionals views mattered. Quality assurance systems were in place to enable the service to identify areas for improvement and ensure people received a good quality service.

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. People received their medicines as prescribed. Staff recorded the support they had given people around their prescribed medicines.

People felt safe. Support workers understood their responsibility regarding safeguarding and knew how to raise concerns.

The risks of people's care were identified and managed by support workers.

Is the service effective?

Good ●

The service was effective. People's needs were met by support workers who had access to training they needed to meet people's needs. Support workers had access to effective supervision and professional development.

People were supported with their nutritional and healthcare needs. Where people were at risk of malnutrition, support workers took appropriate action.

Where appropriate, people were supported to make decisions. Support workers and the registered manager ensured people's legal rights were protected.

Is the service caring?

Good ●

The service was caring. People and their relatives spoke positively about the care they received from support workers. Support workers knew the people they cared for and what was important to them.

Support workers treated people with dignity and kindness. People were supported to make choices.

Support workers respected people and ensured that their dignity was respected during personal care.

Is the service responsive?

Good ●

The service was responsive. People's care and support plans

were personalised and included information about what was important to them as individuals. People were supported with activities and were supported to access the local community.

Support workers responded when people's needs changed to ensure they received the care they needed, this included making referrals to other healthcare professionals.

Is the service well-led?

The service was well led. The registered manager and provider had systems to monitor and evaluate the quality of the service.

People spoke positively about the registered manager and felt they were approachable.

Good 

Orchard End Ltd - Highnam

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 was planned to check whether the provider was 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 inspection took place on the 13 December 2016 and it was announced. We informed the registered manager we were planning to inspect the service, as the service is small and the registered manager may be unavailable. The inspection team consisted of one inspector.

At the time of the inspection there was one person being supported by the service. We reviewed the information we held about the service. This included notifications about important events which the service is required to send us by law.

We also looked at the Provider Information Return for Orchard End Limited - Highnam. This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make.

We spoke with one person who was receiving support from the service. We spoke with one support worker, the new manager and the registered manager. We reviewed one person's care file and records relating to the general management of the service.

Is the service safe?

Our findings

People were safe amongst support workers employed by Orchard End Limited. One person responded positively when asked if they felt safe with support workers.

People could be assured they would be protected from the risk of abuse. Support workers had knowledge of types of abuse, signs of possible abuse which included neglect, and understood their responsibility to report any concerns promptly. They told us they would document concerns and report them to their line manager, the registered manager, or the provider. One support worker said, "I would follow the providers safeguarding policy. I would go straight to the manager or on call". They also added that, if they were unhappy with the registered manager's or provider's response they would speak to local authority safeguarding or the CQC. They said, "There is a whistle blowing policy, so I know I can contact local authority safeguarding". The support worker told us they had received safeguarding training. The registered manager and manager knew about their responsibility to raise and respond to any safeguarding concerns in accordance with local authority safeguarding procedures.

Systems were in place to ensure people received their medicines as prescribed. Support workers kept a clear record of the support they provided people regarding their prescribed medicines and also ensured there was a clear record of the stock of people's prescribed medicines. We checked people's medicine administration records which clearly documented the support provided to people. Where people were prescribed 'as required' medicines, such as pain relief, there were clear protocols in place which detailed how and when these medicines could be administered.

People had assessments where support workers had identified individual risks in relation to their health and wellbeing. These included moving and handling, agitation, nutrition & hydration and activities. Risk assessments gave staff clear guidance which enabled staff to help people to stay safe such as risks assessments around people's mobility in the community and during the night including the equipment they required.

People were supported to take positive risks and develop their independency and enjoy activities such as bowling. Risk assessment provided clear guidance on how to support and assistance people to enjoy their favourite activities.

There were enough staff available on a day to day basis to meet people's needs. One support worker told us, "We've got a beautiful team." The registered manager had identified the number of staff needed to ensure people were kept safe. Staff rota's showed on the days of the inspection and other days there were safe numbers of staff had been deployed to meet people's needs within their home and support them to access the community.

Records relating to the recruitment of new support workers showed relevant checks had been completed before they worked unsupervised at the service. These included employment references and disclosure and barring checks (criminal record checks) to ensure staff were of good character.

Is the service effective?

Our findings

People's needs were met by support workers who had access to the training they needed. One support worker and the new manager spoke positively about the training they received. Comments included: "I think I have everything I need to meet people's needs" and "They're very good at providing us with the training and development we need." Training records held by the registered manager identified that support workers had received the training they required to meet people's individual needs.

Support workers told us they had been supported by their line managers or the registered manager to develop professionally. Support workers told us they were able to access additional health and social care qualifications. One support worker told us, "(The Provider) has been really good, they offered for me to do a management course. They try and promote within the company, the opportunities are there, We all get the support and development we want and need."

Support workers had access to supervisions (one to one meeting) with their line manager. Support workers told us supervisions were carried out regularly and enabled them to discuss any training or developments needs they had or discuss any concerns they held regarding the service. One support worker told us, "Supervisions and appraisals are used to discuss training and how things are going. They're useful."

Support workers had undertaken training on the Mental Capacity Act (MCA) 2005. 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. One support worker told us, "We always give choice. For example we know their preferences and choices. I give matching choices for clothes. They enjoy having that choice."

People's rights to make a decision were protected, as staff acted within the legal framework of MCA. For example, there were clear mental capacity assessments relating to people who needed assistance with the management of their finances. Records gave staff guidance that people could make unwise choices however they should be supported by support workers to make informed choices.

People were supported with their nutritional needs. All staff including the registered manager and new manager were aware of people who were at risk of choking and ensured they were supported with an appropriate diet. The service had sought the advice of speech and language therapists and the guidance they provided was clearly referenced and documented in people's risk assessments and support plans.

People were supported to choose the food and drink they wanted. People's support plan provided clear information in relation to the support they required with their meals. There was a clear list of food types which should be avoided to reduce people's risks. One support worker discussed how they involved people in planning their meals. They told us, "I involve her in preparing meals and cooking. They help peel vegetables. I always thank them for helping."

People had access to health and social care professionals. Records confirmed people had access to a GP, dentist and an optician and could attend appointments when required. People's care records showed relevant health and social care professionals were involved with people's care. For example, records of appointments with healthcare professionals were clearly documented on people's records.

Is the service caring?

Our findings

People had positive views on the caring nature of the service. One person responded positively when asked if they enjoyed living at Sunnybank and spending time with support workers. They told us, "I'm happy." We observed this person spend time with both managers and another member of the provider's staff. They enjoyed talking to them about outings they had attended and clearly benefitted from a positive relationship. They asked the one manager when they were working in Sunnybank again.

People enjoyed positive relationships with support workers, the deputy manager and the registered manager. They enjoyed talking to them about outings they had attended and clearly benefitted from a positive relationship. The person talked positively about going out for coffee and cake with a support worker in the afternoon of our inspection.

Support workers encouraged people to spend their days as they wished, promoted people's choices and respected their wishes. For example, one support worker told us how they supported one person to enjoy their days. They told us the places the person liked to go what they liked to watch on television and who their friends were. They said, "They like churches. We ask them what they like to do and encourage them." They've travelled and worked and had a normal life so we respect that."

People were cared for by support workers who were attentive to their individual needs and wishes. Support workers clearly knew what was important to people and how people communicated their wishes. For example, one support worker told us about one person and how they supported them to ensure they were comfortable and stop them from becoming agitated. They told us, "Too many people in one room can heighten their anxiety. We used distractions or diversions when they become anxious. We try and avoid it, so we're aware of ensuring the house is quiet, or take her out if there is something going on."

People were treated with dignity and respect. We observed support workers assisting people throughout the day. Support workers told us how they ensured people's dignity was respected. Comments included: "I always make sure care and support is provided how they like it. Give them choice and control. I would never take that control away from them."

Is the service responsive?

Our findings

People's care plans included information relating to their social and health care needs. They were written with clear instructions for support workers about how people's care and support should be delivered. They also included information on people's life before they started to use the service, life histories as well as important information regarding their loved ones and friends. People's care and support plans and risk assessments were reviewed monthly and where changes were identified, the plans were updated to reflect the person's needs. For example, changes regarding people's healthcare needs and appointments were clearly recorded, and the outcome of appointments were noted.

People were supported to spend time as they wished. The registered manager and manager explained that support workers were allocated to ensure people had access to stimulation within Sunnybank and to access the community. We talked to one person who told us that they enjoyed being at home and spending time with support workers. The person's support plan clearly showed the activities they liked to do and items which were important to them. Support workers were mindful of personal items which were important to them and gave them comfort.

People were supported to live a full and meaningful life such as going out in to the community on a daily basis. People were supported to local garden centres, into towns, bowling and meeting friends. On the day of our inspection, one person was being supported to go for coffee and cake with a friend. The person was looking forward to this activity. The person talked happily about the outings they went on, including a recent trip to Tewkesbury Abbey.

People were supported to maintain and develop their personal relationships and friendships. Support workers supported people to meet with their family and friends and prior to our inspection had assisted one person with buying Christmas presents. The person told us about their friends and how they enjoyed meeting them.

People received personalised support. The registered manager told us how they had supported people to attend personal healthcare appointments. Support workers told people about their appointments and discussed the reasons for the appointments with them and provided them with reassurance and clear information which helped to reduce people's anxieties regarding these appointments.

The registered manager kept a log of compliments, concerns and complaints. The registered manager treated all concerns as complaints and ensured action was taken to address concerns. No complaints had been made regarding the regulated activities for the service.

Is the service well-led?

Our findings

The registered manager promoted a culture of person centred care. Staff were committed to the service and were positive about the management support and providing people with personalised care. One support worker told us, "The managers are very good at ensuring we prompt people's choice and at making people the centre of their care."

The registered manager sought people's views. People were involved in tenancy meetings at Sunnybank where they were able to discuss their views on the service they received. A person living at the service was also a representative of a 'service user committee' which met throughout the year. This enabled people's views to be listened to and ideas to be shared between different services owned by the provider.

The provider arranged for service user led 'expert audits' of the service. This entailed a person from another of the provider's services coming to speak with people who lived at Sunnybank and seek their views. The most recent visit was carried out in April 2016 and the expert auditor was positive about the service and felt the service was nice, clean and tidy.

The registered manager and manager had a range of systems to monitor the quality of the service they provided people. Every month the manager completed a report for the board of the provider. This report focused on people's complaints, health and safety audits, safeguarding concerns and compliments. A recent monthly report documented a complaint the service received, how this complaint was resolved and any actions which could be taken to improve the quality of the service.

Where the service had an external audit or inspection any actions were recorded on the service's quality control log. This log enabled the management to oversee any concerns or recommendations made to the service through health and safety audits, environmental health and other inspections. The log also documented the quality assurance systems used throughout the year to ensure the quality of service people received. For example, it documented staff meetings and what issues were discussed in these meetings.

The managers and provider also had clear systems of the monitoring they needed to complete on a monthly basis. For example, where people's care and support needed to be reviewed, or when meetings needed to be held for staff and people using the service. When these actions had been completed it was clearly recorded and any issues were addressed. The managers and provider also used this monitoring tool to identify any shortfalls within their service. These systems covered areas around fire safety, people's care and support documentation and people's supervisions and appraisals.

The provider had a business development plan for the service. This business development plan detailed improvements they planned to make to the service. This included improving the environment people lived in and ensuring that people were empowered to have an active input on their home.