

Accomplish Group Support Limited

Manor Farm

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

The service was a large home, bigger than most domestic style properties. It was registered for the support of up to 10 people. 10 people were using the service. This is larger than current best practice guidance. However, the size of the service having a negative impact on people was mitigated by the building design fitting into the residential area and the other large domestic homes of a similar size. There were deliberately no identifying signs, intercom, cameras, or anything else outside to indicate it was a care home. Staff were also discouraged from wearing anything that suggested they were care staff when coming and going with people.

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

Relatives were complimentary and full of praise about staff at the service and the support they gave both them and their family members. One relative told us, "I want to say how amazing the staff are and that they always look at what is best for [name]." People were happy receiving a service from Manor Farm.

Each person had fully detailed personalised support plan, which guided staff on the individual support the person wanted. People took part in a wide range of new activities or were encouraged to do things they had previously enjoyed. Staff worked hard to offer people these opportunities. A relative told us, "Any new ideas that I have for things [name] might like to do are tried where possible." People led full and meaningful lives with encouragement from staff. Staff supported people in an individual, person-centred way and helped them to maintain or develop relationships that were important to them.

Staff were very knowledgeable about how to keep people safe from avoidable harm and abuse; they gave people their medicines safely and followed good infection prevention and control procedures. Staff had undertaken training and received support from senior staff to ensure they could do their job well.

People enjoyed food that they had chosen. People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

People had very good relationships with the staff and received kind and compassionate care and support. Staff knew people well and respected people's privacy and dignity. People were involved in all decisions about their care and staff supported them to be as independent as they wanted to be.

Relatives were confident their views would be listened to and complaints would be addressed.

The outcomes for people using the service reflected the principles and values of Registering the Right Support. Thus, ensuring that people who use the service can live as full a life as possible by promoting choice and control, independence and inclusion. People's support focused on them having as many opportunities as possible for them to gain new skills and become more independent.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection

The last rating for this service was good (published 26 August 2017).

Why we inspected

This was a planned inspection based on the previous rating.

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.

Manor Farm

Detailed findings

Background to this inspection

The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Care Act 2014.

Inspection team

This inspection was undertaken by one inspector.

Service and service type

Manor Farm is a 'care home'. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

The service had a manager registered with the Care Quality Commission. 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

This inspection was unannounced.

What we did before the inspection

We reviewed the information we had received about the service since the last inspection. The provider completed a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report. We used all of this information to plan our inspection.

During the inspection

We saw how the staff interacted with people who lived at Manor farm. We spoke with three people who lived there. We spoke with the registered manager, a senior, and three members of the care staff.

We reviewed a range of records. This included three people's care records and medication records. A variety of records relating to the management of the service, including audits and meeting minutes were reviewed.

After the inspection

We spoke with four relatives by telephone and received feedback from four relatives via email and three professionals who have contact with the service. We have used some of the feedback within this report.

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 the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- Systems were in place to protect people from abuse and avoidable harm. Staff had undertaken training and demonstrated they were confident about what they had to report and to whom. All relevant incidents had been reported correctly and investigated when required.
- People's relatives were sure that their family members were safe. One relative told us, "There is always staff around to keep people safe."
- Information was available for people and for staff on keeping people safe and this included contact numbers for reporting any concerns.

Assessing risk, safety monitoring and management

- Staff carried out in-depth risk assessments of every activity that people were involved in, both in the service and out in the community. Risk assessments were detailed and included actions for staff to take to minimise the risks as much as possible.
- Staff undertook regular checks of all equipment and systems in the service such as the fire system, to make sure people, staff and visitors would be safe.

Staffing and recruitment

- Staff and relatives told us there were enough staff to enable people to do what they wanted to do and to keep people safe.
- The recruitment process included pre-employment checks such as references from previous employers, a criminal record check and thorough interview process. This ensured that only staff suitable to work at the service were employed.

Using medicines safely

- Medicines continued to be managed safely so that people received their medicines as the prescriber intended.
- Staff kept accurate records of all medicines ordered, administered and disposed of. Medicines storage was appropriate.
- Protocols were in place for medicines prescribed to be administered 'when required' to ensure staff had clear guidance on when to administer them.
- Staff undertook medicines training and had their competency checked on an annual basis. Regular audits were conducted, and action taken when appropriate.

Preventing and controlling infection

- Systems continued to be in place to make sure that staff practices controlled and prevented infection as far as possible. Staff had undertaken training and were aware of their responsibility to keep people safe from the spread of infection. They used gloves and aprons appropriately.
- The service was clean and smelt fresh throughout.

Learning lessons when things go wrong

- Staff recorded any incidents or accidents. The management team analysed these and discussed any learning with all staff at relevant meetings.
- Staff involved in any errors with medicines were fully re-trained and their competence re-assessed to prevent further errors.

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 the same. This meant people's outcomes were consistently good, and people's feedback confirmed this.

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

- People's needs were thoroughly assessed before the registered manager offered them a place at the service.
- The management team ensured staff delivered up to date care in line with good practice. They also ensured the service provided equipment to enhance people's care and promote independence.

Staff support: induction, training, skills and experience

- An induction process was in place, which included new staff undertaking the Care Certificate (a set of standards that sets out the knowledge, skills and behaviours expected of staff in the care sector). Staff told us their induction was good. They had spent time looking at support plans and shadowing more experienced staff to get to know people. There was training arranged both on line and face to face.
- Staff felt they were offered the training to undertake their roles. A relative said, "I feel the staff are well trained and support the guys really well. They all know what they are doing." One member of staff said, "This is the best place I've worked. I love it here. We are always encouraged and supported to learn and be the best we can be, in supporting the residents."

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

- Staff supported people to eat and drink healthily. Staff tried to guide people to choose healthier options to promote their well-being. One social care professional told us, "Staff are mindful of [name]'s nutrition and support them with making healthy choices."
- Staff supported people to plan meals for the week ahead. People are encouraged to help with preparation and serving of the meals.

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

- Staff worked closely with a number of other services so that people received effective, seamless care and support such as community nurses and a behaviour psychologist.
- Referrals to other agencies such as dietician were made in a timely manner to ensure people received, they support they needed.

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

- People's rooms were personalised to their own tastes.
- The communal areas had recently been decorated. The registered manager had arranged for this to take place overnight to ensure the least disruption for the people living in the service.

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.

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.>

- Where people had been assessed to lack the mental capacity to make decisions applications had been made to the persons local authority supervisory body.
- Staff knew how the MCA and DoLS applied to their work.
- Staff talked to each person about the care and support they wanted and gained consent where possible before they carried out any tasks. People choices in all aspects of their lives were offered at all times.

Is the service caring?

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; respecting equality and diversity

- The atmosphere in the service was friendly and welcoming. Staff were kind and caring. One relative told us, "Everyone is very welcoming whenever we visit."
- People showed by their facial expressions and body language they were happy to be living at the service. One person's relative said, "They talk to [name] as an equal." Another relative stated, "Staff are amazing and very respectful of all the residents."
- Staff communicated with each person in the way that person preferred. We could see that people had good relationships with the staff. They were comfortable with the staff and enjoyed their company.
- Staff treated people equally and without discrimination. The PIR stated: 'All of the staff within the service are annually refreshed on equality and diversity training.'

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

- People and their relatives were fully involved in making decisions about their care and support. Relatives told us the staff involved them fully in all decisions about their family member's care.
- Staff knew people well and knew their likes, dislikes and how they wanted to be supported.
- Some people were supported by an advocate who visits them regularly. An advocate is independent and supports the person to express their views.
- The PIR stated: 'When accessing health care appointments, we provide communication passports and hospital passports which identify the communication and understanding needs of the person.' This enables people to be provided with information they can understand.

Respecting and promoting people's privacy, dignity and independence

- Staff fully respected and promoted people's privacy and dignity. Personal care was offered discreetly and carried out in private. Staff ensured curtains and doors were closed to respect the person's privacy.
- Staff encouraged and supported people to do as much as they could for themselves. People helped staff with household chores. One person's relative told us, "[Staff] try and encourage [name] to do as much as possible. They have certainly become more independent since they have lived at Manor Farm."

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people's needs were met through good organisation and delivery.

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 led full and meaningful lives as the registered manager and staff encouraged and supported people to take part in a very wide range of activities and interests. An external professional said, "My service user has transitioned well and better than expected, is achieving so much more, and has been given far more opportunity to learn and develop."
- Staff had supportive relationships with people's relatives and had a lot of contact with them. One relative told us, "We visit every three weeks, once we have been there for three hours [name] wants us to leave. They are so happy at the service."
- Arrangements for social activities, and where appropriate, education and work, were innovative and met people's individual needs. A relative went on to say "[Name] is so happy and the staff are always looking for new ideas and looking at what is best for [name]." Another relative told us, "[Name] has become more independent and it might not seem a big step for us but for them it is a huge step. We couldn't be more grateful to all the staff."

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- People's individual future goals were clearly documented, and plans were in place to work towards these goals. The staff team promoted people to live life to the full. This gave people a sense of achievement. An external professional said, "The service is very person centred, the support plan and risk assessments are in depth and reflective of the individuals care support needs, they are reviewed regularly."
- The registered manager told us how the staff team had worked tirelessly to respond to people's individual needs. For example, the staff supported a person to go on a holiday, but the family were reluctant and didn't think it was a good idea. The family told us, "We couldn't have been more impressed by the staff for their perseverance. [Name] had a wonderful time. ... We were also given the opportunity to share a day with them. We all had a lovely day. I am so glad it went ahead."

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 communicated with each person in the way that person understood best. One person communicated using their own version of sign language. Staff made sure they had learnt this personalised and individual way of communicating with the person and could communicate well with this person.

- One person relied heavily on a picture board to communicate with staff. This included what the person was doing during the day. This reduced the person's anxiety and they were able to check on what was happening next.
- Documents that people needed to look at were made available in easy-read format if the person wanted that. The PIR stated: 'We have easy read information regarding information regarding safeguarding, deprivation of liberty safeguards, mental capacity act and regarding how to raise complaints. All information is tailored to the individuals who use the service, for example we have support people who require Information using pictorial aids and social stories which are created to help aid their communication.'

Improving care quality in response to complaints or concerns

- Complaints information was available in a format people could understand.
- Relatives all told us they would be very happy to speak with any of the staff including the registered manager if anything was not right. However, they also said they had not had to complain. One relative said, "Nothing is a problem for the staff they are very happy to try different things. The staff know all the residents really well."

End of life care and support

- No-one was receiving end of life care when we inspected the service. Staff had worked with people and their relatives to develop a plan which included their wishes on what they would like to happen at the end of their life.
- Staff told us they would work with local healthcare services such as the GP, district nurses and local hospice to support a person who was reaching the end of their life.

Is the service well-led?

Our findings

Well-Led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; 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 was visible and available to speak with staff when they needed additional support or advice. People and staff freely walked in and out of the office in the service. It was clear this was a regular occurrence and they felt comfortable being in the office.
- There was a relaxed and happy atmosphere in the service. Staff told us they felt valued and enjoyed working at Manor Farm. There was a real commitment to providing care that was highly personalised to the needs of each individual.
- The registered manager understood the Duty of Candour of being open, honest and transparent with people and others in relation to care and support.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

- There was good leadership within the service
- The registered manager understood their role and responsibilities to notify CQC about events and incidents such as abuse, serious injuries and deaths. The rating of the service was clearly displayed within the service and provider's web page.
- Regular audits were completed, and these were supported and overseen by the regional team. They were constantly looking for ways to improve the quality of the service provided. The PIR stated, 'I plan to work alongside the manager of another service to introduce a social inclusion project, to try and improve the social network for the people we support and help them with building new relationships. I plan to introduce parents/carers forums to gather more feedback on ideas to continually improve the service.'
- The registered manager analysed incidents and accidents. Staff told us that these were also discussed at staff meetings to discuss any learning. This meant that measures to prevent recurrence had been put in place.

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

- The registered manager encouraged people, their relatives and the public to express their views about the running of the service and the quality of the service being provided. All families we either spoke with or sent us feedback felt very involved in the lives of their relative and ideas for improving the service.

- Staff told us that they had staff meetings and felt their views were listened to.
- The registered manager had developed links with the local groups. People were involved in the local community.

Working in partnership with others

- The registered manager and staff worked effectively with other health and social care professionals to meet people's specific needs. Care plans showed evidence of professionals working together.