

Cygnet (OE) Limited

The Orchards

Inspection report

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22 May 2019
23 May 2019

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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

About the service

The Orchards provides accommodation, care and support for up to five people with a learning disability. There were four people living at the service on the day of inspection.

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 was appropriate and inclusive for them.

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

People, their relatives and professionals were complimentary about The Orchards. One relative said, "They [staff] are outstanding, they really look after [person]." A professional commented, "The staff seem a nice bunch there and people seem to have a good rapport with the staff."

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.

People were cared for by staff who knew how to keep them safe and protect them from avoidable harm. Staff were recruited safely and there were enough staff to meet people's individual needs. People's medicines were managed safely. Incidents and accidents were investigated, and actions were taken to prevent recurrence. The environment was clean and comfortable.

People's needs were assessed, and support was planned to ensure that it promoted positive outcomes for people. Staff received relevant training, support and supervision to enable them to carry out their roles and responsibilities. People were involved in the planning and preparation of meals. Staff worked well with external professionals to promote people's health and wellbeing.

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 were cared for by staff who knew them well and were kind and compassionate. Positive relationships had been formed between staff and people using the service.

People were supported by competent staff who supported them according to their needs and preferences. People were very involved in how the service was run and encouraged to be as independent as possible.

They had the choice to participate in activities which promoted a good quality of life. People's views were listened to and action was taken to improve the service as a result.

There was no registered manager in post, however, the team leader had good oversight of the service and was visible and approachable. There were systems in place to monitor the quality of the service. The team leader and staff engaged well with other services and had developed positive relationships.

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 24 November 2016).

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

The Orchards

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

The inspection was carried out by one inspector.

Service and service type

The Orchards 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 did not have a manager registered with the Care Quality Commission. The operations director had applied to become the registered manager of The Orchards. A team leader was in post to oversee the day to day management of the service.

Notice of inspection

We telephoned the service on the first day of inspection to check people would be at home before we visited on the 14 May 2019. We made telephone calls to gather feedback about the service on 22 May 2019 and visited the service again on the 23 May 2019.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. This included details about incidents the provider must notify us about. 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 this information to plan our inspection.

During the inspection

We spoke with three people who used the service and observed the support provided to those living there. We spoke with one relative about their experience of the care provided. We spoke with three members of care staff, the team leader and the operations director.

We reviewed a range of records. This included four people's care records and medication records. We looked at two staff files in relation to recruitment and staff supervision. We looked at policies and procedures, records relating to training and systems for monitoring quality. We looked at meeting minutes and complaints and compliments.

After the inspection

We spoke with two professionals who regularly visit the service and received feedback from the local authority quality improvement team.

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

- Staff were trained in safeguarding procedures and knew how to recognise and protect people from the risk of abuse.
- There was information displayed about how to act upon or escalate concerns about potential abuse and staff were aware of the whistleblowing policy.
- The team leader understood their responsibilities to safeguard people. They had acted on any concerns to make sure people were protected from harm by making referrals to the local authority.

Assessing risk, safety monitoring and management

- Risks associated with people's care and the environment were assessed and managed. Staff had clear guidance on how to maintain people's safety.
- Where people could become anxious or distressed, staff knew how to respond to reduce the distress or the risk of injury to the person and others.
- Equipment such as the fire alarm system was checked to ensure it was fit for purpose.
- Evacuation plans were in place to guide staff on how to support people in case of an emergency and fire drills were regularly held.

Staffing and recruitment

- Staffing levels were flexible and there were enough staff to keep people safe. One staff member said, "We are lucky as we are usually fully staffed. If we were not, staff would stay on to cover."
- Where people required consistent support from an allocated member of staff to ensure their safety, one to one staffing was provided.
- Staff had time to spend with people to ensure their wellbeing and enable them to participate in activities they enjoyed.
- Recruitment systems continued to be effective and ensured suitable people of good character were employed to work at the service.

Using medicines safely

- There were systems for ordering, administering and monitoring medicines. Stock counts of medicines were completed to check people received these as prescribed, however the balance of medicines in stock was not always recorded on the most recent medication record making it difficult for this check to be completed. The team manager agreed the system could be improved.
- Despite this, people had received their medicines as prescribed. Medicines were kept securely, and

records were mostly completed correctly.

- Staff received training in medicines administration and had their competency checked to ensure their practice was safe.
- The team leader was aware of 'Stopping Over Medication of People' (STOMP) best practice guidance. This guidance aims to stop people with a learning disability, autism or both being over medicated.
- The local pharmacy completed a yearly audit of medicines and processes to ensure medicines were given using best practice guidance.
- Guidance for staff to follow for 'as required' medicines such as paracetamol was in place. However, these required updating to ensure the amount to be given and the frequency of administration was recorded. The team leader assured us the guidance for 'as required' medicines would be updated.

Preventing and controlling infection

- The environment was clean and fresh.
- Infection control training had been received by staff and personal protective equipment to prevent the spread of infection was available for staff to use.

Learning lessons when things go wrong

- Records were kept of incidents and accidents that occurred. These were reviewed and overseen by the team leader who monitored these for any themes or trends and acted to minimise any re-occurrence. For example, contacting specialist services for additional support.

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

- Prior to a person moving into the service, an assessment of their individual needs was completed to ensure that the service was suitable for them.
- Support plans contained information about people's individual needs and included their preferences in relation to culture, religion, and diet.

Staff support: induction, training, skills and experience

- People were supported by skilled and knowledgeable staff who knew how to provide effective, person centred support to maximise people's wellbeing.
- New staff received an induction to the service and shadowed more experienced staff members to gain knowledge of how best to support each person. One staff member said, "I had an induction. I learned a bit about the service and the organisation and who they care for."
- The staff were well supported and received training to equip them to meet the needs of people living at The Orchards. One staff member said, "I have regular supervision and we discuss what I have achieved, how I feel I am doing and what I would like to achieve in the future, if I have any concerns."

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

- People could choose what they wished to eat and were supported to maintain a healthy and balanced diet.
- People were supported and encouraged to shop locally and assist with the preparation of meals to develop their independence.
- Staff were aware of people's needs in relation to risks associated with eating and drinking and followed guidance from healthcare professionals.

Staff working with other agencies to provide consistent, effective, timely care

- When additional input was required to promote people's wellbeing, referrals were made to appropriate professionals and recommendations were acted on.
- One person had been supported to move to another service and the staff team had worked closely with the new provider to ensure the transition was positive.
- The staff team worked alongside other specialist services. One professional commented, "We have a very good working relationship. The staff are proactive, maintain contain and inform us of any incidents."

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

- People's bedrooms were personalised and reflected their personal interests and preferences.
- The environment was accessible, comfortable and decorated with photos that showed people participating in activities.
- There was clear signage for people which included pictorial signs to aid understanding.

Supporting people to live healthier lives, access healthcare services and support

- People had access to healthcare as required and annual health checks where needed.
- Care records documented when people had attended medical appointments. One person was supported to see the GP on the day of inspection.

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.

- People were actively encouraged to make day to day decisions where they were able to. Staff checked that people gave consent before they provided any support. There was a strong emphasis on involving people as much as possible.
- Staff were trained in the MCA and had a good understanding of the principles of the MCA. One staff member said, "I know that capacity is assumed until it is tested and there are certain things that you need to check like if they can recall information. If the person can't decide, it is made in their best interests."
- The team leader understood their responsibility to make an application for a DoLS where required. No-one had conditions attached to their DoLS authorisations.

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

- People and the relative we spoke with were positive about the staff team at The Orchards. One person said, "Very nice staff, I like it here." One relative said, "Staff have a real caring attitude and [person] is at the forefront and is clearly number one. They are beyond kind and caring."
- Staff were also positive and felt people were well treated and supported. Comments included, "The amount of the care is great. Most staff here go above and beyond their duties. It's a lovely service to be in."
- Staff had developed meaningful relationships with those living at The Orchards and had a good awareness of people's individual needs and preferences.
- Support and reassurance was provided by the staff as required and people were treated with kindness and compassion.
- Staff had received training in equality and diversity and respected people's individual differences.
- People's diverse needs were respected, and support plans identified people's religious, cultural and spiritual needs.

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

- People were actively encouraged to express themselves as they wished.
- Regular meetings were held where people were asked for their views. Subjects discussed at meetings included day trips and menus and these views had been listened to and acted upon.
- A suggestion box was also available and used to share ideas. As a result, newspapers were delivered daily and local fresh produce was purchased as suggested.
- People had access to an advocacy service. An independent advocate visited the service regularly. This ensured that people's views were listened to and that they were central to the service provision.

Respecting and promoting people's privacy, dignity and independence

- Staff treated people with privacy, dignity and respect and provided support in an individualised way.
- People could be independent and develop life skills. People took responsibility to do their own laundry and had been involved in planting up hanging baskets for the garden. One person had wanted to cook more and was now learning how to cook simple meals independently.

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.

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

- Staff knew about people's lives and the things that were important to them. They were knowledgeable about the person's likes, dislikes and preferences and how to meet their individual needs.
- Support plans provided guidance to staff on the best way to support people to ensure the most positive outcomes. People's care was regularly reviewed to ensure that it continued to meet their needs.
- People had keyworkers. A keyworker is a named staff member who is responsible for keeping people's plans up to date and ensuring their needs and preferences are met.

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.

- Support plans provided guidance to staff on how to support people's individual communication needs.
- Staff communicated with people in a way that best suited them. One person used an app on their mobile phone to communicate their views, however the battery had run out, so we were unable to talk to the person. The team leader had recognised this was an issue and was sourcing an additional device as a solution.
- Information was available in easy read formats to aid people's understanding. This included the previous inspection report; medicines people were taking and subjects such as understanding depression.

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 been supported to identify life goals. Their achievements were recognised, and photographs were on display. One person had touched an elephant and another person was working at a go karting club.
- People accessed the community regularly, went on short breaks and were supported to take part in things that interested them. One person told us they had been to the zoo and another person spent a night in a 'Beatles' themed room.
- People were supported to maintain relationships that were important to them. One relative said, "The staff support [person] to visit me 5-6 times a year."

Improving care quality in response to complaints or concerns

- The team leader made people aware of their right to complain through speaking with them regularly and checking they were happy with their care.
- The complaints procedure was displayed in an easy read format to ensure people were aware of the process.
- The service had received one complaint from an external source which had been dealt with according to their procedure and resolved to the person's satisfaction.

End of life care and support

- Although no-one was receiving end of life care, people's end of life wishes had been discussed with them individually. End of life plans were very detailed and clearly expressed people's preferences.

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.

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

- The service did not have a manager registered with the Care Quality Commission, however an application by a senior manager had been made. A team leader was in post who had a good oversight of what was happening in the service and demonstrated a good knowledge of regulatory requirements.
- Internal audits had been completed by the organisation's quality team and included the monitoring of records and discussion with people using the service. Audits had also been completed by external organisations in areas such as infection control. Where issues were identified, these had been addressed.
- The team leader worked some shifts in the office and provided direct support to people working alongside the staff team to ensure they knew people well and could observe staff practice.
- The team leader notified CQC appropriately if incidents or events took place at the service.
- People could access the latest CQC inspection report and the rating was displayed in the service. The display of the rating is a legal requirement, to inform people who use the service and those seeking information about the service of our judgements.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- People, relatives and staff spoke positively about the service. One staff member said, "It's good, it's a lovely place. I wouldn't be in care if it wasn't like The Orchards." One compliment said, "Relative seemed bright and happy and probably the best we have seen them for years. It was good to see them smile so much."
- The team leader and the staff team were passionate about the care that people received. One staff member said "We all work together both staff and service users. Everyone is happy which builds team morale and you can see how happy everyone is."

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 team leader understood duty of candour and there was easy read information available to aid people's understanding of what they should expect if things went wrong.
- The team leader had an open and positive approach to feedback and used this to develop the service. One professional commented, "Management are definitely responsive and listen. I would be happy for a family member to live there."

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

- People were central to the service they received, and their views were listened to and acted upon. One person had asked to visit more museums so had visited the East Anglian railway museum.
- Staff meetings were held and issues such as people's holidays and medicines were discussed.
- Questionnaires were sent out to people, staff and their relatives to gather feedback on the service. The results of these were analysed and action taken as required.
- The team leader and the staff team knew people well which enabled positive relationships and good outcomes for people using the service.

Continuous learning and improving care

- Where issues were identified, action was taken to ensure the service continuously developed and improved.

Working in partnership with others

- The team leader and staff team shared information and worked with other professionals such as SALT (Speech and Language Therapy) and the community learning disability team to ensure positive outcomes for people.