

Mrs R Linley

Hillside Farm Care Home

Inspection report

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Tel: 01509852900

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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?

Outstanding ☆

Is the service responsive?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

What life is like for people using this service:

At our last inspection on 12 and 13 May 2016 we rated the service good overall. At this inspection we found that evidence continued to support a rating of overall Good but the rating for the key question Caring had improved to Outstanding.

Feedback from people who used the service, health and social care professionals and staff was consistently and unanimously positive. People told us they enjoyed living at the service because it was a friendly home. The registered person and staff consistently displayed outstanding empathy and compassionate care.

Relatives were unstinting in their praise of the service. They unanimously said that the home was exceptionally caring and they felt very fortunate their family members lived there.

All feedback we saw emphasised the excellent caring nature of the staff and the family like environment that existed at the service.

The service's success was built on family values of kindness and care. The registered person's enthusiasm, energy and compassion created a service that was indistinguishable from a family home. The registered person was driven by their passion for caring for people.

The registered person and staff had an excellent understanding of people's needs. Staff supported people to continue to follow life-long interests. The people were from rural and farming communities and this was reflected in how the home and people's rooms were decorated and furnished.

People were supported 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 understood their responsibilities to keep people safe from harm without restricting their choices about how they spent their time. They treated people with dignity and respect and involved them in decisions about their care.

Staff explained to people what their medicines were for and how they should be taken. People knew when they should have their medicines.

A robust recruitment and selection process was in place. There were enough staff to meet people's needs. The registered person exercised great care in who they employed at the service. They employed only staff who demonstrated that caring and compassionate behaviour was possible without over-stepping professional boundaries.

We saw that people were comfortable in the presence of staff and the registered person.

Staff supported people with their nutritional needs. Staff arranged for people to be visited by GPs, nurses and other professionals when they were unwell.

Staff understand the importance of supporting people to live life to the full whilst they were fit and able to do so. People participated in activities that stimulated them and kept them physically active.

People contributed to plans about how they wanted to be cared for towards the end of their lives and their funeral arrangements.

Staff spoke consistently about the service being an exceptional place to work and one that was well led. The registered person worked in partnership with other organisations. The service had an excellent reputation locally and was sought after.

The registered person carried out regular checks to ensure people were safe and receiving the care and support they needed.

The home was well maintained, decorated and furnished to exceptionally high standards and kept clean.

People and relatives knew how to raise concerns or make complaints in the event they had any.

More information can be found in the detailed findings below

Rating at last inspection: Good (report published 4 July 2016)

About the service: Hillside Farm Care Home is registered to accommodate 10 older people. At the time of our inspection there were seven people living in the home.

Why we inspected: This was a planned inspection based on the rating at the last inspection.

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?

Outstanding ☆

The service was exceptionally caring.

The service has improved to Outstanding.

The registered person and staff had created a service where people felt they were living in an extended family home.

Staff were caring and compassionate but they also understood about professional boundaries.

Staff involved people in decisions about their care and support; treated them with dignity and respected their privacy.

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.

Hillside Farm Care Home

Detailed findings

Background to this inspection

The inspection: We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection checked whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Inspection team: The inspection was carried out by two inspectors.

Service and service type: Hillside Farm Care Home is a 'care home' providing accommodation and nursing or personal care for up to 10 people. They are registered as an individual so a registered manager is not required.

Notice of inspection: The inspection was unannounced.

What we did: Before the inspection visit, the provider completed a Provider Information Return (PIR). We used information the provider sent us in the PIR. This is information we require providers to send us at least once annually to give some key information about the service, what the service does well and improvements they plan to make. We also reviewed information that we held about the service such as notifications, which are events which happened in the service that the provider is required to tell us about.

During the inspection visit we spoke with seven people who used the service, the registered person and two staff members. We spoke with a relative who was visiting and two relatives telephoned to speak with us.

We looked at the care records of two people who used the service to see whether they reflected the care that was required and reviewed one staff recruitment file. We also reviewed records relating to the management and quality assurance of the service.

Is the service safe?

Our findings

Safe – this means people were protected from abuse and avoidable harm.

Good: ☐ People were safe and protected from avoidable harm. Legal requirements were met.

Staffing levels.

- The registered person followed safe staff recruitment procedures that ensured only staff who understood the values of the service and 'fitted in' were employed.
- There were enough staff to meet people's needs. A relative, who was a senior health care professional, told us, "The ratio of staff to residents is higher there than anywhere I know."
- Staff told us they had enough time to support people with their care and to spend recreational time with them, supporting them with their activities.

Preventing and controlling infection.

- Staff were trained in infection control and had the appropriate personal protective equipment to prevent the spread of infection. A relative told us, "It is immaculately clean." A health professional who was visiting the service told us, "It's a lovely home, it's always really clean and tidy."

Safeguarding systems and processes.

- People told us they felt safe living at Hillside Farm Care Home. A relative told us, "It is safe. It gives me peace of mind. My [family member] had falls at home, but none here. The staff are exceptionally patient."
- Staff understood their responsibility to keep people safe and knew what the provider's safeguarding procedures were for reporting concerns. They told us they were confident that if they raised concerns, they would be taken seriously. They knew how to contact the local authority safeguarding team and CQC if they had concerns and wanted to contact them directly.

Assessing risk, safety monitoring and management.

- People were provided with a safe place to live. Regular safety checks had been carried out on the environment and on the equipment used. Emergency plans were in place to ensure people were supported appropriately in the event of a fire or untoward event.
- The registered person and staff team met regularly to review people's care and wellbeing. They developed risk assessments to minimise the risk of harm to people. The premises were very well maintained and free of hazards that could cause a person to fall. A relative told us, "The rooms are set out nicely."

Using medicines safely.

- Medicines were safely managed. Medicines were safely stored and effective procedures ensured that there were always enough medicines available. Staff explained to people what their medicines were for and how

they should be taken. People took their medicines as prescribed.

Learning lessons when things go wrong.

- The staff team knew how to report incidents that happened at the service. There were procedures for learning from incidents, errors or omissions. No serious incidents had occurred in the last 12 months.

Is the service effective?

Our findings

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

Good: 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 individual and diverse needs had been assessed prior to them moving into the service to ensure their needs could be met by the staff team.
- People using the service were supported to make choices about their care and support on a daily basis.
- The registered person kept up to date with research and developments in adult social care, in particular about using activities that kept people physically active. When we arrived six people were participating in a group physical exercise class. The registered person told us this maintained people's muscle mass, strength and cardio-vascular condition. They made the exercise fun for people who judging from their laughter and enthusiasm, enjoyed it. The registered person later showed a person who remained in their room, exercises they could do whilst seated.

Effectiveness of care, treatment and support.

- Relatives, some of who were health and social care professionals, expressed their confidence in the staff. They told us the care and support staff provided made a difference to people's lives. A relative said, "The staff are always on the ball."
- Staff arranged for health professionals to visit people at the service or took people to healthcare appointments. Staff were attentive to changes in people's health.
- Staff were familiar with people's care plans. They told us they often referred to them.

Staff skills, knowledge and experience.

- Staff had training that supported them to carry out their role of ensuring people's needs were met. A staff member told us, "I've worked in other care homes before. It's much better here. The residents were introduced to me. I read their care plans, learnt about their characteristics, what they like and don't like. I feel confident supporting the people here because of the training and support I've had."
- The registered person assured themselves that staff put their training into practice by observing how they supported people and checking records they made, for example, daily notes.
- Staff had regular supervision meetings that supported their continuous development. The meetings were used to review their performance and training needs. When staff showed an interest in learning something new, or something more about a subject such as post-stroke care, the registered person arranged training.

Eating, drinking, providing a balanced diet

- There was a strong emphasis on people eating well. People were involved in decisions about food shopping and planning and cooking the meals they wanted. A relative told us, "The food is excellent. I've never seen him eat so much. It's a very good choice of food." People continued to enjoy meals they had grown up with when they lived at home. Some of these foods were not commonly available in shops, so staff sourced foods from specialist outlets. This showed an appreciation of people's diversity.

Ensuring consent to care and treatment is 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 with appropriate legal authority. 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. We found that they were.

- Staff understood the principles of the MCA. We saw staff obtained people's consent before they provided care.

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

- The premises and environment met the needs of people. People's rooms were spacious and furnished and decorated to their taste. Different communal areas offered people a choice of places where they could spend 'quiet' time. The home was decorated and furnished to a style people were accustomed to and provided a homely environment.

Is the service caring?

Our findings

Caring – this means that the service involved people and treated them with compassion, kindness, dignity and respect

Outstanding: People were truly respected and valued as individuals; and empowered as partners in their care in an exceptional service.

Ensuring people are well treated and supported.

- People told us what they liked most about the service was that staff were kind and caring. Relatives unanimously said that staff were exceptionally caring. A relative told us, "The staff are exceptionally patient, kind and caring." Another relative said, "I've witnessed how caring staff are. Everyone has been really good here. The staff are always friendly and they show obvious affection."
- The registered person and staff had a strong person-centred culture. Staff did not assume that people's priorities about what was important to them, remained the same. For example, staff knew what people traditionally had for breakfast, but always asked them what they wanted. The registered person regularly asked people what they wanted to experience. People said they wanted to lead as healthy and active lives as possible and to keep in touch with family and relatives.
- Staff knew what was important and mattered to people, such as their faith needs and their cultural history. The registered person promoted a strong person-centred culture and ensured that staff consistently treated people with kindness and compassion.
- Staff made people meals they had when they lived at home or in the countries where they were raised. This improved people's life experience and reflected their personal histories and cultural backgrounds. Staff respected people's upbringing, life-styles and social and sporting interests which maintained the quality of life they experienced when they lived with their families.
- Staff arranged for people to have their newspapers of choice delivered to them. Staff served people hot drinks in traditional tea sets which people appreciated. We saw staff reading with people and looking through books about their lives. One person told us their religious faith was very important to them. Staff had arranged for a priest to visit the person so they could follow their faith.
- Staff were particularly sensitive when people needed compassionate support. This happened when a person who used the service died. Relatives of deceased people gave unanimous praise. One relative told us, "My [family member] was at Hillside for the last 12 months of her life. The care was incredible. The service was like a family, so compassionate, understanding and wonderful. It was the only positive at a very difficult time. [The registered person] and the staff gave fantastic care. I've never seen such good care in the whole of my career as a GP. It was a blessing [person] was at Hillside. It's an outstanding service."
- People who had died were remembered by people and staff. A 'memory lane' area celebrated people's

lives.

- Staff were skilled at anticipating and resolving conflicts, for example, when a person sat in a chair that another person believed was exclusively theirs.
- A relative of a person who came to the service for a planned short stay wrote, 'Thank you and your excellent staff for looking after them so well during my recent convalescence. They were made very welcome and felt comfortable with you all. They are telling everyone how much he felt at home with you all.'
- Relative's feedback showed that the care their family members experienced surpassed anything they had experienced elsewhere and exceeded their expectations. This was because the registered person and staff consistently displayed outstanding empathy and compassion that supported people to lead close-knit family lives.
- Staff had arranged for a person to celebrate their birthday with their family at the service. A relative wrote to thank the registered person. They wrote, 'Thank you all for helping us to celebrate [person's] birthday in the best way circumstances would allow at this difficult time.'
- These examples showed that staff took a genuine and caring interest in people. A relative told us, "The staff are exceptionally patient, kind and caring. It's the attitude of staff that makes it exceptional." The registered person supported staff to provide compassionate care without crossing professional boundaries by being over familiar with people and intruding in their private lives. They had a policy to support this.
- The registered person made, with people's consent, short films called 'A Day in the Life of [Person]' that they sent to relatives. People enjoyed watching the films. The films were an innovative way of reassuring relatives that their family members were well cared for.

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

- The registered person and staff had reviewed every person's care plan with their involvement. People were supported to express their views at reviews of their care plans and at meetings when all people were together.
- Meetings were social events rather than formal 'resident's meetings' which was reflective of the family nature of the home. We saw a meeting in progress where people discussed what they would like to happen at Christmas. The outcome was that people would have a festive season they wanted.

Respecting and promoting people's privacy, dignity and independence.

- Staff respected people's privacy and dignity. This was at the heart of the service's aim to provide a homely and family like environment. They did not interrupt people when they were spending time in quiet areas or in their rooms. Staff were attentive but discreet. When people required support, staff talked to them so that others did not overhear them or know why a person was being supported to another room.
- We saw staff always knocked before entering people's rooms. Staff respected that Hillside Farm was people's home. They told people who would be visiting so that people did not feel anxious if a person they did not know was in the home, for example a builder who came to carry out some work. The registered person introduced the inspection team to people so that they understood why we were there. People and staff made us feel we were guests in their home.
- The registered person supported and respected staff. They supported staff with finding accommodation and other personal needs.

- The ethos of the service was that it was a family home. Our experience on the day of our inspection was that the service more than lived up to this.

Is the service responsive?

Our findings

Responsive – this means that services met people's needs.

Good: People's needs were met through good organisation and delivery.

Personalised care.

- People told us it was important to them that they led as healthy and active a life as possible. Staff supported people to do this by replicating, as far as possible, people's experience of how they lived at home.
- Staff supported people to experience a warm, lively and family like environment and a lifestyle that maintained their mental and physical well-being.
- Staff supported people to follow their hobbies and interests. We saw people reading, colouring adult picture books and knitting. Staff expressed interest in what people were doing. When people relaxed, staff played a game of dominoes with them.
- Oil paintings a person who had lived at the home had painted were framed and displayed. This showed how the service celebrated and respected people's achievements.
- Staff had stimulating conversations with people. People asked us to join in because they wanted to tell us about their lives. They told us about activities they participated in such as singing and dancing.
- Staff told us they had as much time as they needed to engage with people, support them with activities and discover new ones. A staff member told us, "It's good because it's small, it feels like it's their home. Two who play dominoes and one that colours couldn't do that before. They achieved this because we have enough time to spend with people, we tried a few games to see if it would help people focus, dominoes and colouring and jigsaws worked."
- We saw lots of photographs of social events people had enjoyed at the home and venues in the community. People had access to horses and pets that lived in the grounds of the home. Staff supported people to visit garden centres and places of rural interest. This was important to people because they were from farming communities.
- We saw an afternoon keep-fit activity that lasted 15 minutes. This was led by the registered person whose energy and enthusiasm was shared by the four people who chose to participate and two staff. The activity was inclusive and we could see and hear that people enjoyed it. This was the second activity of this type on the day of our inspection. This showed how the registered person and staff led by example to encourage people to participate in physical exercise that maintained their mental and physical well-being.
- People's care plans were detailed but easy to use. Health professionals referred to the plans when they

visited. Staff told us they regularly referred to the plans. We saw that all staff had signed to say they had read and understood the plans. The plans detailed how people wanted to be supported morning, afternoon, evening and night. We saw from staff member's daily records that people received the care they wanted and people confirmed this when we spoke with them.

- People's care plans documented their likes, dislikes, preferences and personal history. All staff we spoke with had a good knowledge of what people liked. They had used that information to develop some of the activities people participated in.

- People received information in accessible formats and the registered person knew about and was meeting the Accessible Information Standard (AIS). The standard applies to people with a disability, impairment or sensory loss. The registered person had made one-page summaries of people's care plans in a format they could read easily. Every person had a laminated easy-to-read poster in their room which explained about the care they had a right to expect.

Improving care quality in response to complaints or concerns.

- The complaints procedure and questionnaire surveys people completed were in an easy to read format. No complaints had been received. However, the registered person had a procedure for investigating and resolving complaints and identifying and making improvements. People were given information about independent advocates that could assist them with making a complaint.

End of life care and support.

- We saw lots of positive feedback from relatives about how pleased they were with the care and support their deceased family members received.

- Staff supported people and relatives to cope with bereavement of loved ones. People had end of life care plans which included people's thoughts, feelings and wishes to ensure their passing was comfortable, pain free and as peaceful as possible and their funeral arrangements respected.

Is the service well-led?

Our findings

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

Good: The service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Leadership and management.

- The service was run by the registered person and there was no requirement for a registered manager.
- The staff team were motivated and there was a very low turnover of staff. The average length of service of staff was five years. Staff we spoke with told us they came to the service because it had a very good reputation. They told us the service was well-led.

Promotion of person-centred, high-quality care and good outcomes for people.

- The registered person had a clear vision for the service that was shared by the staff. This was to provide compassionate care in a homely environment. We saw the registered person pursued that vision with energy and enthusiasm.
- The registered person motivated staff and people to have healthy and fulfilling lives. They took great care when recruiting staff. Staff were made to feel part of the family of people at Hillside Farm Care Home.

Engaging and involving people using the service, the public and staff.

- The registered person involved people, relatives and staff in developing the service. They acted on their feedback.
- New activities were added because of people's, relative's and staff feedback.
- The registered person supported people to feel they mattered and that their opinions were valued.
- The registered person made themselves available to people and encouraged them to talk about their experience of the service. They valued people's feedback as an important indicator about the quality of the service. Relatives told us the registered person was always available to speak with them.

Managers and staff are clear about their roles, and understand quality performance, risks and regulatory requirements.

- The registered person ensured that CQC were notified of incidents at the service.
- There were effective systems in place to monitor the quality of the service. Audits were undertaken, which ensured people were safe and well cared for.

There is continuous learning and improving care.

- The registered person understood their legal responsibility for notifying the Care Quality Commission of deaths, incidents and injuries that occurred or affected people who used the service. This was important because it meant we were kept informed and we could check whether the appropriate action had been taken in response to these events. They were also aware of their responsibility to have on display the rating from their latest inspection. We saw the rating was clearly on display on the provider's website and within the service.

Working in partnership with others.

- The registered person worked with the local authority that paid for the care of people using the service. They welcomed challenge and strove to improve.
- In July 2018 a local authority awarded the service a Gold Dementia Quality Mark for the quality of care and compassion staff provided to meet people's emotional, psychological and physical needs.