

Avocet Trust

# Green Lane Farm

## Inspection report

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26 October 2023  
27 October 2023  
29 October 2023  
20 November 2023

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18 December 2023

## Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service effective?

Good ●

Is the service well-led?

Good ●

# Summary of findings

## Overall summary

### About the service

Green Land Farm is registered to provide accommodation and personal care for up to 5 people with a learning disability and or autistic people. At the time of the inspection there was 1 person living permanently at the home and 2 people accessing the respite service.

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

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessment and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

### Right Support:

Staff supported people to take part in activities and pursue their interests in their local area. Staff supported people to make decisions following best practice in decision-making. The service worked with people to plan for when they experienced periods of distress so that their freedoms were restricted only if there was no alternative. Staff supported people with their medicines in a way that promoted their independence and achieved the best possible health outcome.

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. The service worked with people to plan for when they experienced periods of distress, so their freedoms were restricted only if there was no alternative.

### Right Care:

Staff promoted equality and diversity in their support for people. They understood people's cultural needs and provided culturally appropriate care. People received kind and compassionate care. Staff protected and respected people's privacy and dignity. They understood and responded to their individual needs. Staff understood how to protect people from poor care and abuse. The service worked well with other agencies to do so. Staff had training on how to recognise and report abuse and they knew how to apply it. The service had enough appropriately skilled staff to meet people's needs and keep them safe. People could communicate with staff and understand information given to them because staff supported them consistently and understood their individual communication needs.

### Right Culture:

Staff knew and understood people well and were responsive, supporting their aspirations to live a quality life of their choosing. Staff placed people's wishes, needs and rights at the heart of everything they did. The service enabled people and those important to them to work with staff to develop the service. Staff valued and acted upon people's views. Staff evaluated the quality of support provided to people, involving

the person, their families and other professionals as appropriate.

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

#### Rating at last inspection

The last rating for this service was good (Published 21 November 2017).

#### Why we inspected

This inspection was prompted by a review of the information we held about this service.

This report only covers our findings in relation to the key questions safe, effective and well-led. For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Green Lane Farm on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

#### Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

# The five questions we ask about services and what we found

We always ask the following five questions of services.

<p><b>Is the service safe?</b></p> <p>The service was safe.</p> <p>Details are in our safe findings below.</p>	<p><b>Good</b> ●</p>
<p><b>Is the service effective?</b></p> <p>The service was effective.</p> <p>Details are in our effective findings below.</p>	<p><b>Good</b> ●</p>
<p><b>Is the service well-led?</b></p> <p>The service was well-led.</p> <p>Details are in our well-led findings below.</p>	<p><b>Good</b> ●</p>

# Green Lane 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 Health and Social Care Act 2008.

#### Inspection team

The inspection was completed by 1 inspector.

#### Service and service type

Green Lane Farm is registered to provide accommodation and personal care for up to five people with a learning disability or autistic people.

Green Land Farm is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. Green Lane Farm is a care home without nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

#### Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. This means they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

At the time of our inspection there was a registered manager in post.

#### Notice of inspection

We gave the service 24 hours' notice of the inspection. This was because the service is small, and people are often out, and we wanted to be sure there would be people at home to speak with us.

Inspection activity started on 26 October 2023 and ended on 20 November 2023. We visited the location's

service on 26, 27 and 29 October 2023 and we visited the head office on 20 November 2023 to review recruitment records.

#### What we did before inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

We met with 3 people using the service. We were not able to speak with some people using the service because we were unable to communicate verbally with them in a meaningful way or they chose not to speak with us. We spoke with 5 members of staff which included, the registered manager and 4 care staff. We received email feedback from 5 relatives of people who use the service, about their experience of the care provided and 3 staff.

We reviewed a range of records. This included 3 people's care records and medication records. A variety of records relating to the management of the service, including policies and procedures were reviewed.

# Is the service safe?

## Our findings

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

At our last inspection we rated this key question as good. The rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

### Assessing risk, safety monitoring and management

- Where risks were in place, these were minimised by person-centred risk assessments, with details for staff that supported them to know how to minimise risks. This included people accessing the community and activities of their interest.
- People were supported in a multi-agency approach to reduce risks. One relative said, "They [staff] take an active role in both attending multi agency meetings and implementing any strategies/actions agreed at these meetings to keep people safe."
- Risks associated with health were identified and minimised. We signposted the registered manager to best practice in relation to one health condition who assured us this would be implemented into the service.
- Regular checks were made on the premises and equipment to ensure people's safety. This included checks by external contractors on gas, electrical and fire safety.

### Staffing and recruitment

- Safe recruitment processes were used in line with the provider's recruitment policy to ensure staff employed were suitable to work with vulnerable people.
- The service had enough staff. If required the registered manager and other staff were flexible to cover shifts to ensure people's needs were met. A relative said, "My [relative] was cared for on a one-to-one basis and there was always someone looking out for them. They were involved in lots of activities which they were able to choose, including swimming, trips to the seafront and the cinema."

### Using medicines safely

- People medicines were managed in a safe manner. We signposted the registered manager to one area of best practice in relation to covert medicines, and this was actioned during the inspection.
- The service ensured people's behaviour was not controlled by excessive and inappropriate use of medicines. Staff understood and implemented the principles of STOMP (stopping over-medication of people with a learning disability, autism or both) and ensured people's medicines were reviewed by prescribers in line with these principles.

### Systems and processes to safeguard people from the risk of abuse

- The provider had safeguarding systems in place. Staff had a clear understanding of safeguarding people. Care and support was planned and delivered in a way that ensured people were safe, without restricting their freedom.
- Relatives told us the service was safe. We saw people and staff laughing and joking together, playing games, and singing songs. A relative told us, "I had total faith in the conduct of the team looking after my

relative during their stay."

#### Preventing and controlling infection

- Effective systems were in place to mitigate the risk of people and staff catching or spreading infections. The service had good arrangements to keep the premises clean and hygienic. A relative said, "The property is pristine throughout."
- The service prevented visitors from catching and spreading infections.

#### Visiting in care homes

- The provider had systems in place to support people to have visits from family and friends.

#### Learning lessons when things go wrong

- Effective systems were in place to manage incidents affecting people's safety. Staff recognised incidents and reported them appropriately, and area managers investigated incidents and shared lessons learned.
- A record of accidents and incidents was maintained and reviewed regularly by the registered manager. We discussed how the registered manager could record reflections on incidents and any lessons learnt in a more comprehensive way.



# 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 our last inspection we rated this key question good. The rating for this key question has remained good. 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 appropriately assessed. Staff completed a detailed assessment of care needs before people moved into the home. This meant that the registered manager could be sure the needs of the individual would be met at the home, before offering them a place.
- Relatives confirmed that they had been involved in this initial assessment. One relative said, "We had a good discussion prior to [name of person]'s stay to fully understand their needs and limitations taking into account their social skills, their ability to understand and how they liked to interact with others."
- Support plans reflected people's needs, and aspirations and plans were written to help people achieve these.
- People were effectively supported to communicate their needs. Staff were highly skilled in communicating with people. Some people used pictures, cards and/or Makaton. People had communication support plans which described exactly how people communicated.

Adapting service, design, decoration to meet people's needs; Staff support: induction, training, skills and experience

- The environment was designed to meet people's individual needs. This included keeping the environment minimalistic in the bedrooms. The registered manager told us this was intentional, as they needed to ensure they could meet all people's needs who accessed the respite service. The registered manager assured us that people brought their own belongings and items to ensure the room became homely when they stayed.
- People's individual needs had been considered in relation to decoration and ensuring people's safety.
- Staff were trained to work effectively with people. Staff told us how they were supported by management to access training and progress within their role.
- Some staff had become 'champions' in particular areas. Champions provided additional support, advice and guidance to other care staff.

Supporting people to live healthier lives, access healthcare services and support; Staff working with other agencies to provide consistent, effective, timely care; Supporting people to eat and drink enough to maintain a balanced diet

- People were supported to access a range of external health care professionals to improve their health and well-being. Each person had a hospital passport which included information about their past medical history and the level of support they required.
- Records included information about each person's health needs and guidance for staff to show how these were met and affected their daily lives.
- People's dietary intake and health were monitored where required.

- We observed people being involved in food preparation and making healthy food choices.

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 MCA 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, whether appropriate legal authorisations were in place when needed to deprive a person of their liberty, and whether any conditions relating to those authorisations were being met.

- The service was working within the principles of the MCA. Records showed us where assessments demonstrated a person was unable to make a specific decision a best interest decision had been made with the involvement of the person, family and appropriate health or care professionals. Examples included administering medicine and personal care.
- Where people were subject to a DoLS authorisation, these had been applied for appropriately and a record was maintained to show when DoLS needed reviewing.

# 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 our last inspection we rated this key question good. The rating for this key question has remained good. 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; Continuous learning and improving care

- People were at the heart of the service. The registered manager led by example, putting people first and focusing on good outcomes for people. We observed the registered manager to have a great relationship with people within the service and they knew them extremely well. A relative told us, "The service is lucky enough to have the most wonderful manager who knows the clients and staff and their needs so the service runs efficiently."
- It was clear staff shared this vision and were proud to work for the service. Comments included, "I love working with the people that stay here", "It is a very worthwhile job."
- There were systems in place to monitor the service and drive forward improvements.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; 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 had the skills, knowledge and experience to perform their role and a clear understanding of people's needs.
- The registered manager had effective oversight of the service.
- Strong working relationships had been developed amongst the manager and the staff team.
- Staff gave honest information and suitable support and applied the duty of candour where appropriate.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- The service engaged with staff, people using the service and family members in order to provide person-centred care and promote positive outcomes.
- Relatives all spoke highly of the staff and registered manager and said that communication was good. One relative said, "The service is very well led, with clear communication and respect for individuals. Staff and management at Green Lane Farm are always approachable and more than happy to help with anything [Name of person] may need or want."