

Broadoak Group of Care Homes

Orchard House

Inspection report

Weston Drive
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Warwickshire
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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

Orchard House is a residential care home providing personal and nursing care to 26 people aged 65 and over at the time of the inspection. The service can support up to 30 people.

Orchard House accommodate people in one adapted building. The service was provided on a level access building.

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

The care people received was safe. There were enough staff on duty to meet people's needs. People's medicines were stored and administered safely. Staff took steps to protect people from the risks of infection. They also took action to minimise the reoccurrence of incidents and accidents.

Staff had the skills they required to fulfil the responsibilities of their role. They supported people to monitor and manage their health and promptly referred them to health care services when required. They supported people according to relevant laws and guidance.

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.

Staff were caring and compassionate. They treated people with respect and dignity. The systems within the service promoted people's independence and rights. People's information was stored and managed confidentially.

The care and support people received was tailored to their individual needs. They had regular opportunities to engage in meaning activities. They were supported to maintain links with their friends, family and the local community.

The registered manager provided effective leadership. The provider ensured staff had the resources and support to provide good care. People and staff were involved in developing the service. There were systems in place to monitor the standard of care people received.

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 02 October 2017).

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?

The service was safe.

Details are in our safe findings below.

Good ●

Is the service effective?

The service was effective.

Details are in our effective findings below.

Good ●

Is the service caring?

The service was caring.

Details are in our caring findings below.

Good ●

Is the service responsive?

The service was responsive.

Details are in our responsive findings below.

Good ●

Is the service well-led?

The service was well-led.

Details are in our well-Led findings below.

Good ●

Orchard House

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

Orchard House 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 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. The provider was not asked to complete 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 spoke with four relatives, one GP and one district nurse about their experience of the care provided. We

spoke with four members of staff including the provider, registered manager, care staff. We spent time observing the care people received in communal areas to help us understand the experience of people who could not talk with us.

We reviewed a range of records. This included three people's care records and two medication records. We looked at two staff files in relation to recruitment and staff supervision. 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 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

- People were safe when they received care and support at Orchard House.
- The service had systems in place to protect people from avoidable harm and abuse. Staff knew how to apply policies and procedures to report any concerns they may have about people's welfare.
- The registered manager reported and worked with relevant authorities to safeguard people.

Assessing risk, safety monitoring and management

- The service identified risks associated with people's care. They put in place appropriate risk assessments to ensure people received care and support in a safe manner.
- Staff followed the guidance in risk assessments and supported people in a manner that kept them safe without restricting their rights and freedom.
- The environment was safe. Equipment people used was regularly checked and maintained.

Staffing and recruitment

- There were enough staff on duty to safely meet people's needs. The registered manager deployed staff in a manner which ensured suitably skilled staff were readily available to meet people's needs.
- The provider followed safe recruitment practices. They completed relevant checks before staff commenced employment. This assured them staff were suitable to work with people who use services.

Using medicines safely

- Medicines were safely managed. Staff followed good practice in the storage and administration of people's medicines.
- Medicines were administered by suitably trained staff. The registered manager regularly checked staff competency to ensure they provided safe care when supporting people with their medicines.
- The service had protocols in place to guide staff. This ensured staff provided effective support for people to take their medicines as prescribed by their doctor.

Preventing and controlling infection

- The home was clean and free from odours.
- The service had protocols in place to protect people from the risk of infections.
- Staff followed good hygiene practices. They wore protective equipment such as aprons and gloves when they supported people with relevant tasks.

Learning lessons when things go wrong

- The registered manager investigated incidents and accidents that occurred at the service, they reported to relevant authorities where required.
- The registered manager had regular discussions with their staff on how they could learn and improve the service following incidents.

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

- Staff assessed people's needs before they came to live at Orchard House. This was to ensure their needs could be met at the home.
- Assessments considered how people's needs would be met with respect to their religion, gender or culture. This was to ensure all people who used the service would receive a good standard of care without discrimination.

Staff support: induction, training, skills and experience

- People were supported by skilled and experienced staff.
- Staff had access to training courses required for their role. They had regular refresher courses to update their knowledge. They told us their training equipped them for the responsibilities of their role.

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

- People had access to a variety of meals, drinks and snacks of their choice.
- Staff followed the recommendations of health professionals to support people to meet their nutritional needs. For example, they provided modified diets for people who required this.
- Staff were readily available to provide physical support and encouragement during meal times.

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

- The registered manager and care staff worked collaboratively with health and social care professionals to meet people's needs.
- Health care professionals gave us positive feedback about a joint working approach between care staff and their teams. This allowed them to provide prompt and consistent advice and support to people who used the service.

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

- People had prompt access to healthcare services. They had regular visits from a doctor and other healthcare professionals.
- Staff were proactive, they referred people to health care professionals when needed. They supported people to monitor their health conditions. A health professional told us, "The quality of referrals are good, any recommendations are followed through by staff."
- People were supported to maintain good oral hygiene.

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

- The design and the layout of the home was suited to the needs of people who used the service. People had access to safe spaces and could have some privacy if they required this.
- The provider considered the needs of people living with dementia and had made reasonable adjustments to support their orientation within the home and promote their independence.

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.

- Staff had good knowledge of the MCA and applied this in their practice. They sought people's consent before they provided care and support. They supported people to understand their right to withdraw their consent if they wished.
- Where people were deprived of their liberty, the registered manager applied for relevant authorisation. We saw the conditions of such authorisations were met where required.
- Staff supported people to make their own decisions as much as possible. They tailored information in a way that supported people to make their own choices.
- Staff had good knowledge of how people's conditions may affect their behaviour. This enabled them to support people effectively without the use of restraint or restrictive practices.

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 were supported by kind and caring staff.
- Most staff had a long service history at Orchard House. They had gained good knowledge of people's history, likes and dislikes and ensured they received support as they preferred.
- Throughout our visit, we saw staff were prompt and proactive with meeting people's needs. They responded quickly when people needed their support.

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

- Staff empowered people and their relatives to express their wishes and make decisions about their care.
- Throughout our visit we saw the registered manager and staff team show compassion to people in the way they deployed staff and related to people and their relatives. Records showed this way of working was embedded in the service.

Respecting and promoting people's privacy, dignity and independence

- People were treated with dignity and respect.
- Staff supported people to maintain their independence. A visitor told us, "[Person] is still cognitively independent. Staff look past the physical support needs and promote independence and cognition by offering choices – making sure they are in charge of own life."
- People's right to privacy was respected. They had access to private spaces when needed. The service also used privacy screens when required to promote people's dignity and privacy in communal areas.
- People's records were stored securely. Staff understood the importance of confidentiality and ensured only authorised people could access sensitive information.

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

- The care people received was tailored to their individual needs. They had choice and control were possible, and staff supported them as they wished.
- People and their relatives were involved in care planning and reviews. This is to ensure their care plan reflected their current wishes and needs.
- Care plans were comprehensive and reflected people's history and preferences. We observed staff supported people as stated in their care plan.

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 tailored information to each individual to aid their understanding and support them to express their wishes. For example, they used visual prompts or altered the tone of their voice when communicating to people.
- The provider had policies in place to support them provide written information in alternative formats if required.
- Care plans included guidance to staff on how to make information accessible to people.

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 were supported to maintain relationships with their loved ones. Their friends and family could visit them without any restrictions.
- People had regular access and opportunities to engage in meaningful activities. This included activities they could participate in a group and one to one time with staff.
- People were supported to maintain links they had within the local community. They were supported by staff or their family to access the local community, and could maintain relationships they developed when they lived in their own homes.

Improving care quality in response to complaints or concerns

- The provider had a complaints policy. The service had not received any formal complaints since our last inspection.
- Relatives and staff told us they could raise any concerns with the registered manager who took prompt

action to resolve any concerns.

End of life care and support

- People were treated with compassion and dignity at the end of their life. Staff supported people to express their wishes, recorded their wishes and provided care as they wished.
- People's relatives were supported with care and sensitivity. Relatives spoke very highly of staff care, support and empathy.
- Staff worked proactively with health professionals to ensure people were comfortable and pain free in their final days. When people died, staff treated their body in a dignified manner.
- During our visit we saw evidence of good practice of staff support when people came to 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

- People were at the centre of the service. The registered manager and staff team had shared vision and values of achieving good outcomes for people who used the service.
- There was an open culture within the service. The registered manager was transparent and easily accessible to staff, people and relatives for support, guidance and advice.
- The registered manager was skilled and provided effective leadership of the service.

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 a good understanding of their regulatory responsibilities. We saw they displayed the rating of Orchard House's latest CQC report. They reported relevant information to statutory organisations.
- The registered manager demonstrated a good understanding of the duty of candour. The systems within the home support transparency and openness.
- The registered manager maintained good oversight of the service. They completed regular checks and audits. This ensured people received a good and safe standard of care.
- The registered manager received good level of support from the provider. They told us this supported them to fulfil their responsibilities.

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

- People and staff were involved in service planning. They were empowered to raise any concerns or suggestions to improve the service. The registered manager acted on their feedback.
- Orchard House was part of the local community. The registered manager told us, "Community is really good. We have coffee morning etc, the whole of Bosworth come in." A visiting professional also told us about the community approach to support people who use the service.

Continuous learning and improving care; Working in partnership with others

- The provider ensured the staff team had the resources they needed to provide good care and improve the service.
- The registered manager and staff team analysed incidents and accidents that occurred at the service and

took action to minimise the risk of a reoccurrence.

- Staff worked collaboratively with health and social care professionals to meet people's needs.