

# Random inspection report

## Care homes for adults (18-65 years)

Name:	Orchard House
Address:	Orchard House Maureen Terrace Seaham Durham SR7 7SN

The quality rating for this care home is:	three star excellent service
The rating was made on:	

A quality rating is our assessment of how well a care home, agency or scheme is meeting the needs of the people who use it. We give a quality rating following a full review of the service. We call this review a 'key' inspection.

This is a report of a **random inspection** of this care home. A random inspection is a short, focussed review of the service. Details of how to get other inspection reports for this care home, including the last key inspection report, can be found on the last page of this report.

<b>Lead inspector:</b>	<b>Date:</b>							
Nicola Shaw	1	8	0	6	2	0	1	0

## Information about the care home

Name of care home:	Orchard House
Address:	Orchard House Maureen Terrace Seaham Durham SR7 7SN
Telephone number:	01915817568
Fax number:	01915130388
Email address:	orchardhouse@espa.org.uk
Provider web address:	

Name of registered provider(s):	Education and Services for People with Autism Limited
Name of registered manager (if applicable)	
Peter Powell	
Type of registration:	care home
Number of places registered:	7

Conditions of registration:		
Category(ies) :	Number of places (if applicable):	
	Under 65	Over 65
learning disability	7	0

Conditions of registration:								
Date of last inspection								
Brief description of the care home								
<p>Orchard House is registered to provide care (but not nursing care) for 7 people with learning disabilities between the ages of 18 and 65 years. The home provides a specialist service for people with autism spectrum disorders, including challenging behaviour. The home is a large detached building, with seven single bedrooms, two living rooms, kitchen/dining room and a garden area. It was renovated last year so it is closer to meeting the current National Minimum Standards. It is near the town centre of the coastal town of Seaham. Orchard House is managed by the organisation now known as European Services for People with Autism (ESPA) Limited, which was</p>								

### Brief description of the care home

established in 1987 and runs a range of services for younger adults with autism.

Up-to-date information about the yearly fees for this service should be sought from the home.

## What we found:

Before this random inspection visit:

We looked at:

Information we have received since the last annual service review on 29th June 2009.

How the service has dealt with any complaints and concerns since the last visit.

Any changes to how the service is run.

The provider's view of how well they care for people.

The results of surveys. We received 3 from service users and 8 from staff.

The visit:

An unannounced visit was made on 18th June 2010.

During this visit we:

Looked at information about the people who use the service and how well their needs are met.

Looked at other records which must be kept.

Checked that staff had knowledge, skills and training to meet the needs of the people they care for.

Checked what improvements had been made since the last visit.

We told the person in charge what we found at the end of the visit.

Health and Personal Care:

The manager told us in the information we asked for before our inspection that each service user has a living plan which contains a support plan. It is the support plan which tells staff about how to meet each individual's needs. Each service user also has an individual behaviour profile and programmes developed from assessments involving staff and the multi disciplinary team. We looked at two service user's living plans. In one there was detailed information about the service user's health and personal care needs. Information was up-to date and included regular reviews and risk assessments for a range of activities. However, in the second file we looked at, although there was information in the assessments obtained as part of the admissions process, there was no support, living plan or risk assessments in place.

Lifestyle:

All of the service users access the local community. On the day of our inspection some of the service users had been to an allotment, one service user was at college, and others had been for a walk in the local community.

There are also things for service users to do in the house, for example jigsaws. The home has a projector so that service users can experience watching films and programmes on a large screen.

Service users have the opportunity of a holiday each year. These are all different depending upon the likes and needs of the service users. These range from a trip to the caravan owned by ESPA, and short breaks to Centre Parks and the Calvert trust.

The home also has its own transport.

Family visits to the home are encouraged. There is a quieter area designated for personal time with families.

Personal and Healthcare Support:

All service users have access to a multi-disciplinary team which includes a psychologist, speech and language therapists as well as psychiatrists. The support plans provide detailed information about the support each person requires and what they are able to do for themselves independently. However, as previously mentioned there was no support plan in place for one service user. And in another support plan we looked at there was a "toileting programme" which involved waking the service user at intervals throughout the night. This was not dated or signed, which is important for reviewing purposes. There was no assessment available to show which health care professionals had been involved in the decision to implement this plan.

Staff use a listening device when one service user is alone in their bedroom. On the day of our visit this was switched this on in the lounge where other service users and we were sitting. In this way this person's right to privacy was not respected. There was no risk assessment in the living plan to support the need to use this.

Staff receive training in medication procedures. Staff told us that it is the home's policy for two staff to administer medication. There are detailed protocols in place for those service users who require as and when medication.

Concerns, complaints and protection.

We have not received any complaints about this service. The manager told us in the information we asked for before the inspection that, due to the service users complex communication needs, staff use their knowledge of each individual to understand if they are unhappy or concerned about something.

All staff receive annual training about safeguarding adults. There is a newly appointed behaviour training manager who has been accredited in studio III training ( this is training about understanding why a person with autism may become agitated and the support they may need at this time), and 10 of the staff team have completed this training.

## Environment:

On the day of our visit the home was clean and well maintained. Staff told us that in the last year the ground floor of the building has been re-plastered and re-decorated and a service user's bedroom also re-decorated. Each service user has their own bedroom. These are all different reflecting the service users likes and tastes.

The home has a separate laundry facility and also employs a domestic who follows a cleaning schedule.

## Staffing:

On duty on the day of our visit were four staff. A senior member of staff later arrived to help with the inspection. These staffing levels are sufficient and meet the needs of the service users. In one survey a comment was made that it would be beneficial if there were more staff on during the evening to facilitate community activities. We spoke to staff about staffing levels at such times. Normally there are 3 staff on duty each evening. However staff confirmed that that none of the service users require 2:1 support when out in the community and therefore does not impact upon activities in the evening. Additional staff are on duty each Thursday evening so that service users can go swimming and also when special events have been arranged.

Staff told us that training provided was excellent. This has included Autism awareness, first aid, communicating with people with Autism Spectrum conditions, as well as an introduction to the behaviour some people may exhibit.

The manager told us in the information we asked for before this visit that staff are also supported to achieve relevant professional qualifications and access training to provide continuous professional development. Such training includes NVQ level 2, 3 and 4 in social care, the Registered Managers Award and the NVQ level 4 in management. The organisation has its own NVQ assessment centre.

## Management:

The information we asked for before the inspection was detailed and provided us with good information about what the home does well, how they have improved and what they feel they could do better.

The Registered Manager has completed the Registered Managers Award and NVQ Level 4 qualification in care. On the day of our visit the manager was in London receiving an "Inspirational Educators" award. His name had been put forward by the relatives of a service user in acknowledgment of the skills displayed by himself and the staff in "educating" and supporting the service users to lead independent lives.

Some confidential information about service users was not stored securely. It was stored in files in the lounge.

## What the care home does well:

Where support plans are in place they provide detailed up-to-date information.

There are plenty of staff on duty during the day so that service users can enjoy a range of activities in the community.

Orchard House provides a homely environment for people with learning disabilities and people with Autistic Spectrum Disorder and challenging behaviours.

Staff training is excellent. And the manager makes sure that he keeps his knowledge and skills up to date by attending additional training.

When asked what the service does well staff said:

"tries very hard to meet the needs of individual's. Diet is varied and good",

"the needs of service users are understood and met. The service users needs always come first. Staff are given regular training and there is support for staff if needed",

"caters for the individual needs of the service users very well, promoting choice and independence",

"it employs friendly, understanding staff who work well as a team and they support the people who live at Orchard House to have as good a quality of life as we can give them. The home encourages a warm atmosphere suitable for relaxation and activity".

### **What they could do better:**

Support plans must be in place for all service users and should be dated and signed for reviewing purposes.

Evidence must be available to demonstrate that the appropriate health care professionals have been involved in the development of continence programmes.

Where listening devices are used the reason for doing so must be clearly documented in the service user's support plan. Evidence must also be available to show that the relevant health care professionals have been involved in the decision making process.

Listening devices must not be used in front of other service users or visitors to the home as this clearly impinges upon the service user's right to privacy.

If you want to know what action the person responsible for this care home is taking following this report, you can contact them using the details set out on page 2.

Are there any outstanding requirements from the last inspection?

Yes

No

## Outstanding statutory requirements

These are requirements that were set at the previous inspection, but have still not been met. They say what the registered person had to do to meet the Care Standards Act 2000, Regulations 2001 and the National Minimum Standards.

No.	Standard	Regulation	Requirement	Timescale for action

## Requirements and recommendations from this inspection:

### Immediate requirements:

These are immediate requirements that were set on the day we visited this care home. The registered person had to meet these within 48 hours.

No.	Standard	Regulation	Requirement	Timescale for action

### Statutory requirements

These requirements set out what the registered person must do to meet the Care Standards Act 2000, Regulations 2001 and the National Minimum Standards. The registered person(s) must do this within the timescales we have set.

No.	Standard	Regulation	Requirement	Timescale for action
1	6	15	<p>A service user plan of care must be available for all service users.</p> <p>This is to ensure that staff know what support the service user needs.</p>	20/07/2010
2	18	12	<p>A risk assessment must be in place to support the use of any listening device which impacts upon the privacy of service users. Such devices must not be used in front of other service users or visitors.</p> <p>This is to ensure that the privacy of service users is respected.</p>	20/07/2010
3	19	12	<p>Evidence from the relevant health care professionals to support the implementation of continence programmes.</p> <p>This is to ensure the health of the service users is promoted.</p>	20/07/2010

## Recommendations

These recommendations are taken from the best practice described in the National Minimum Standards and the registered person(s) should consider them as a way of improving their service.

No	Refer to Standard	Good Practice Recommendations
1	41	All records should be dated and signed.
2	41	Confidential information should be stored securely.

## Reader Information

Document Purpose:	Inspection Report
Author:	Care Quality Commission
Audience:	General Public
Further copies from:	0870 240 7535 (telephone order line)

Our duty to regulate social care services is set out in the Care Standards Act 2000. Copies of the National Minimum Standards –Care Homes for Adults (18-65 years) can be found at [www.dh.gov.uk](http://www.dh.gov.uk) or got from The Stationery Office (TSO) PO Box 29, St Crispins, Duke Street, Norwich, NR3 1GN. Tel: 0870 600 5522. Online ordering from the Stationery Office is also available: [www.tso.co.uk/bookshop](http://www.tso.co.uk/bookshop)

## Helpline:

**Telephone:** 03000 616161

**Email:** [enquiries@cqc.org.uk](mailto:enquiries@cqc.org.uk)

**Web:** [www.cqc.org.uk](http://www.cqc.org.uk)

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