

# Key inspection report

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

<b>Name:</b>	Pages Orchard, 4
<b>Address:</b>	Pages Orchard, 4 Sonning Common Reading Berkshire RG4 9LW

<b>The quality rating for this care home is:</b>	three star excellent service
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A quality rating is our assessment of how well a care home 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 full review a 'key' inspection.

<b>Lead inspector:</b>	<b>Date:</b>
Mike Murphy	2   8   0   1   2   0   1   0

This is a review of quality of outcomes that people experience in this care home. We believe high quality care should

- Be safe
- Have the right outcomes, including clinical outcomes
- Be a good experience for the people that use it
- Help prevent illness, and promote healthy, independent living
- Be available to those who need it when they need it.

The first part of the review gives the overall quality rating for the care home:

- 3 stars - excellent
- 2 stars - good
- 1 star - adequate
- 0 star - poor

There is also a bar chart that gives a quick way of seeing the quality of care that the home provides under key areas that matter to people.

There is a summary of what we think this service does well, what they have improved on and, where it applies, what they need to do better. We use the national minimum standards to describe the outcomes that people should experience. National minimum standards are written by the Department of Health for each type of care service.

After the summary there is more detail about our findings. The following table explains what you will see under each outcome area.

**Outcome area (for example Choice of home)**

**These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:**

This box tells you the outcomes that we will always inspect against when we do a key inspection.

This box tells you any additional outcomes that we may inspect against when we do a key inspection.

**This is what people staying in this care home experience:**

Judgement:

This box tells you our opinion of what we have looked at in this outcome area. We will say whether it is excellent, good, adequate or poor.

Evidence:

This box describes the information we used to come to our judgement.

We review the quality of the service against outcomes from the National Minimum Standards (NMS). Those standards are written by the Department of Health for each type of care service.

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 bought 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)

The mission of the Care Quality Commission is to make care better for people by:

- Regulating health and adult social care services to ensure quality and safety standards, drive improvement and stamp out bad practice
- Protecting the rights of people who use services, particularly the most vulnerable and those detained under the Mental Health Act 1983
- Providing accessible, trustworthy information on the quality of care and services so people can make better decisions about their care and so that commissioners and providers of services can improve services.
- Providing independent public accountability on how commissioners and providers of services are improving the quality of care and providing value for money.

## Reader Information

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Internet address	<a href="http://www.cqc.org.uk">www.cqc.org.uk</a>

## Information about the care home

Name of care home:	Pages Orchard, 4
Address:	Pages Orchard, 4 Sonning Common Reading Berkshire RG4 9LW
Telephone number:	01734722928
Fax number:	
Email address:	dw@disabilities-trust.org.uk
Provider web address:	

Name of registered provider(s):	Dysons Wood Trust
Name of registered manager (if applicable)	
Lise Thorngate	
Type of registration:	care home
Number of places registered:	3

Conditions of registration:		
Category(ies) :	Number of places (if applicable):	
	Under 65	Over 65
learning disability	3	0
physical disability	3	0
Additional conditions:		
The maximum number of service users who can be accommodated is: 3		
The registered person may provide the following category/ies of service only: Care home only - PC to service users of the following gender: Either whose primary care needs on admission to the home are within the following categories: Learning disability - LD Physical disability - PD		
Date of last inspection		
Brief description of the care home		
4 Pages Orchard is a care home registered for three adults with learning difficulties, and is situated in a residential area of Sonning Common, South Oxfordshire. The home is managed by The Disabilities Trust, an organisation with experience in supporting service users with autistic spectrum disorders. The manager and staff support the three individuals to access the local and wider community and to maintain and develop		

Brief description of the care home

independence skills.

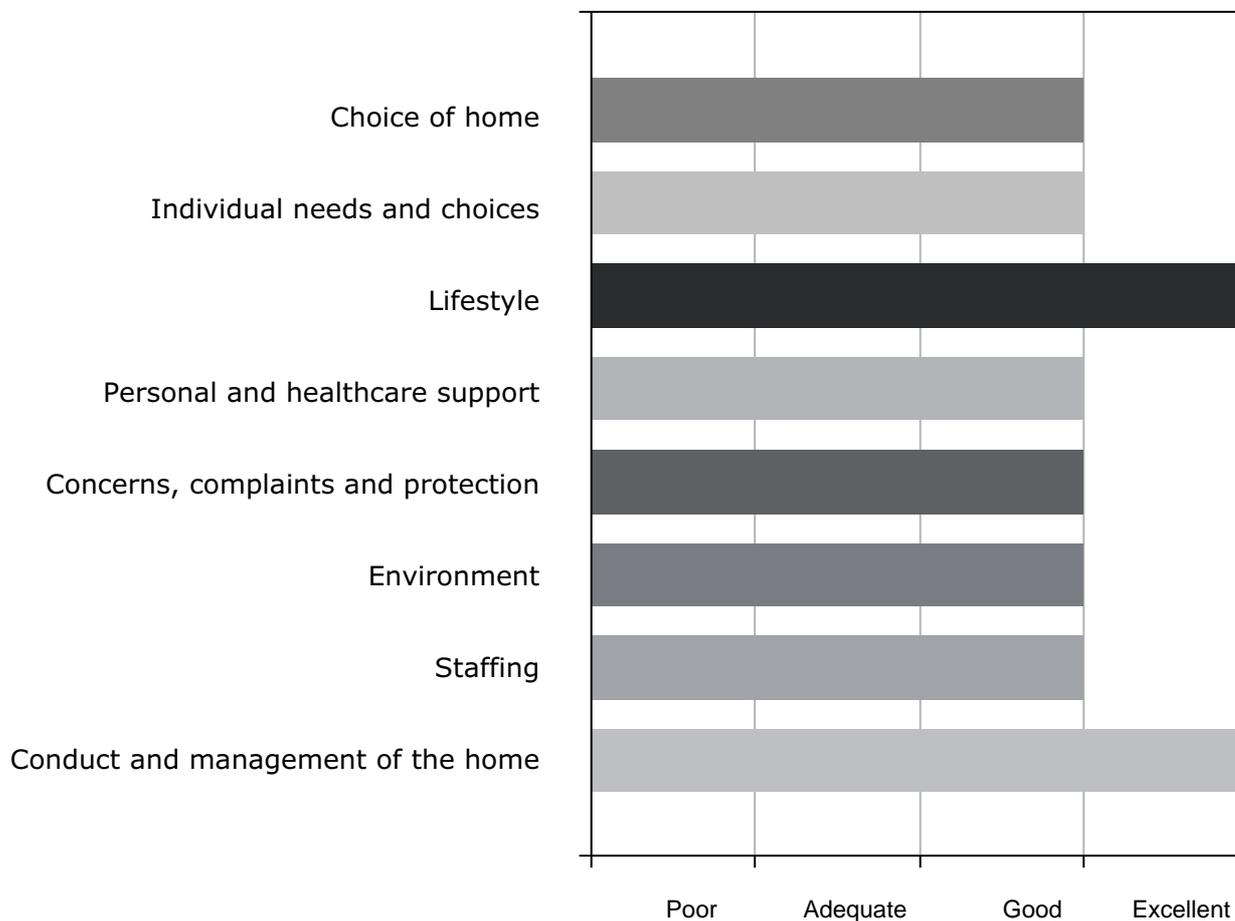
## Summary

This is an overview of what we found during the inspection.

The quality rating for this care home is:

three star excellent service

### Our judgement for each outcome:



### How we did our inspection:

This inspection was carried out in January 2010. The inspection included a visit to the service in Sonning Common on 28 January between 10:00 am and 3:30 pm. The inspection methodology included: consideration of the Annual Quality Assurance Assessment (AQAA) submitted by the registered manager prior to the inspection; a review of the report of the last key inspection carried out on 8 January 2007; discussion with the registered manager and staff during the visit to service; examination of documents such as the home's Statement of Purpose, policies and guidance to staff; examination of service user support plans, examination of personnel records; observation of practice; and, consideration of information received by us since the last key inspection.

The AQAA submitted for this inspection was completed and submitted to the required timescale. The AQAA was well completed, comprehensive and detailed.

We also carried out a survey for this inspection. We received completed survey forms from staff, health and social care professionals and family members of people living in the home (completed on behalf of the service user). The results of the survey have been taken into account in writing this report.

### **What the care home does well:**

The home provides a comfortable, safe and well-maintained environment for people living there. The home is well located for the amenities of the area.

The home has a well written and informative Statement of Purpose and Service User Guide to provide current and prospective users, their families and professional representatives with comprehensive information on the service provided.

The quality of care records are excellent and meet a wide range of needs from providing evidence of liaison with external professional, through to detailed planning of current support needs, communication to new and agency staff, and a picture record for each person using the service.

Good arrangements are in place for carrying out and recording risk assessments. These aim to ensure that people living in the home can participate in a range of activities both while in the home and in the wider community.

People living in the home benefit from the services of a multi-professional team based at the Dyson's Wodd offices of The Disabilities Trust.

People are well supported in maintaining contact with their families.

The health and personal care needs of people are well met, thus promoting health and well-being.

Staff have access to a good range of training opportunities aimed at providing them with the skills they need to provide appropriate support to people living in the home.

There is a positive and 'person orientated' ethos in the home which supports the maintenance of a service aimed at enabling people to develop their potential.

### **What has improved since the last inspection?**

The home has increased the use of 'visual strategies' providing information on activities, meals and other information in picture and symbol form.

The manager has attended a DOLS (Deprivation of Liberty safeguards) course and has liaised with the organisation's psychology department with regard to the completion of DOLS documentation for each person in the home.

Menu planning takes account of current good practice on nutrition and the preferences of service users.

All staff have attended update training on the administration of medicines.

New furniture and carpets have been obtained.

Service user plans have been updated in pictorial form.

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

There are no requirements or recommendations arising from this inspection. The home has systems in place to enable it to monitor its performance and get a measure of its strengths and weaknesses. It has taken corrective action in 2010 to address weaknesses in maintaining a regular programme of proprietor's visits (Regulation 26) and in Health and Safety update training identified in 2009.

Managers should consider two responses in our survey. First of all to the view of a user of the service about having a holiday in addition to the holiday with his or her family. Secondly, to the view of a professional about keeping records up to date at the Dyson's Wood office of the Trust.

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 on page 4.

The report of this inspection is available from our website [www.cqc.org.uk](http://www.cqc.org.uk). You can get printed copies from [enquiries@cqc.org.uk](mailto:enquiries@cqc.org.uk) or by telephoning our order line 0870 240 7535.

## Details of our findings

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## Choice of home

**These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:**

People are confident that the care home can support them. This is because there is an accurate assessment of their needs that they, or people close to them, have been involved in. This tells the home all about them, what they hope for and want to achieve, and the support they need.

People can decide whether the care home can meet their support and accommodation needs. This is because they, and people close to them, can visit the home and get full, clear, accurate and up to date information. If they decide to stay in the home they know about their rights and responsibilities because there is an easy to understand contract or statement of terms and conditions between the person and the care home that includes how much they will pay and what the home provides for the money.

**This is what people staying in this care home experience:**

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

The organisation and the home have good arrangements in place for assessing the needs of prospective users and to ensure that it can meet those needs before offering a place.

Evidence:

The service has a good and informative Statement of Purpose. This outlines the size of the service, its location, details of the registered manager, staffing, the home's mission statement, details of the environment, the assessment protocol, arrangements for drawing up service user's plans and reviews, social activities, emergency admissions, details of visiting professionals, key procedures, staff training, religious and cultural matters, and the complaints procedure. The Statement of Purpose was reviewed on 23 January 2010.

The Services user's Guide is a more concise document. It outlines the aims of the home, 'Key terms of the service user contract', the facilities in the home, communication strategies, staffing, fees, and contacts details for CQC, the local NHS trust and local authority.

## Evidence:

At the time of this inspection all three places in the home were occupied. The three people living there have been there since 1997.

If a vacancy should arise then referrals would only be accepted through local authority assessment and care management arrangements and in the context of the Admissions Policy of the Disabilities Trust (the Trust). This is summarised in the Statement of Purpose (p4 of the copy supplied for this inspection).

An enquiry would be discussed with the referring care manager. If the matter moves forward to a referral then detailed information is requested in writing. This would include recent reports and reviews on the prospective user of the service. If the referral seems appropriate then arrangements are made for an assessment visit to be made by two experienced managers of the Trust.

The outcome of that assessment is discussed by managers within the Trust. If it is considered that the home may be able to meet the person's needs then an offer of a place is made to the sponsoring authority. The prospective user is invited to visit the home. If the person wishes the process to continue to move forward then a transition plan is agreed between the person, their family, the care manager and the registered manager of the home.

## Individual needs and choices

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

People's needs and goals are met. The home has a plan of care that the person, or someone close to them, has been involved in making. People are able to make decisions about their life, including their finances, with support if they need it. This is because the staff promote their rights and choices. People are supported to take risks to enable them to stay independent. This is because the staff have appropriate information on which to base decisions.

People are asked about, and are involved in, all aspects of life in the home. This is because the manager and staff offer them opportunities to participate in the day to day running of the home and enable them to influence key decisions. People are confident that the home handles information about them appropriately. This is because the home has clear policies and procedures that staff follow.

**This is what people staying in this care home experience:**

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

Support plans and related documents support actions to meet the needs of users of the service.

Key documents are available in picture form to support the involvement of service users in the development of their support plan.

Evidence:

The care documents for each person includes the service user plan, personal care plan, personal care record, and medicines administration record.

Documents are detailed and comprehensive.. They include a photograph of the person, essential contact information, personal information, details of the person's likes and dislikes, their achievements, details of the support they require in the home and when out and about and the support needed to keep healthy. A 'Client profile' includes communication, choice, physical needs, therapeutic activities, interaction, relaxation, calming techniques, listening techniques, and sensitivity (the need to give

## Evidence:

praise and encouragement for example).

Records include certificates of achievement - in riding, cooking, music, and horticulture for example.

The service user plan includes current needs, health, medication, personal care, communication, coping with change, support routines and diet. Support plans include detailed guidelines for working with each person.

Records included details of each person's annual review. A report from day service's clinical psychology assessment. A DOLS (Deprivation of Liberty Safeguards) checklist for managing and for living in the home. Evidence of liaison with NHS services.

Risk assessments covered, shopping, cooking classes, excessive intake of fluids, travelling in a car, risks associated if fell against a radiator, risks while out in the community, trampolining, falling of a horse when riding.

Each person has a picture book as an aid to communication. Such books included an outline of the person's personal qualities, daily routine, activities they participate in, dislikes, food likes, domestic chores, and staying healthy.

Each person has a monthly personal care record. Entries are made four times a day - morning, mid morning to mid afternoon, mid afternoon to late evening, and night time (10:00 pm to 7:45 am). The notes provide a detailed account of each person's care and support.

## Lifestyle

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

Each person is treated as an individual and the care home is responsive to his or her race, culture, religion, age, disability, gender and sexual orientation. They can take part in activities that are appropriate to their age and culture and are part of their local community. The care home supports people to follow personal interests and activities. People are able to keep in touch with family, friends and representatives and the home supports them to have appropriate personal, family and sexual relationships. People are as independent as they can be, lead their chosen lifestyle and have the opportunity to make the most of their abilities. Their dignity and rights are respected in their daily life. People have healthy, well-presented meals and snacks, at a time and place to suit them.

People have opportunities to develop their social, emotional, communication and independent living skills. This is because the staff support their personal development. People choose and participate in suitable leisure activities.

**This is what people staying in this care home experience:**

Judgement:

People using this service experience **excellent** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

Users of this service lead a varied and active lifestyle which reflect their interests and support general well-being.

Service users have a varied and nutritious diet and are involved in the process of planning menus.

Evidence:

At the time of this inspection all three people living in the home attend Henley College and pursue courses in Art, Cooking and Communication.

The home is well established in its locality and people make use of the local supermarket and newsagent and go for walks with staff around the area. Some walks are designated 'Health Walks' as part of a healthy lifestyle.

## Evidence:

All are registered on the local electoral roll.

A wide range of activities are pursued by people in the home. The home itself has a TV, DVD/Video, Stereo, magazines and other reading material. Regular trips out include trampolining in Reading, horse riding in a nearby village, growing vegetables in the home's allotment near Caversham, and helping with food and other shopping for the home.

Numerous photographs of day trips out are on display around the house. The registered manager told us that people prefer day trips to a longer holiday. Some staff and users may however, consider a long weekend away in 2010.

Other activities include visits to pubs and cafes, a weekly evening social group in reading, picnics in the summer, bowling, trips on a canal barge, and day trips to places of interest.

Service users and staff seemed at ease with each other on the afternoon of our visit. With the exception of the manager, all were out in the morning. They returned around 2:00 pm. Service users seemed comfortable in the home. Some were preparing for an aromatherapy session in the lounge at around 3:00 pm.

All three service users were in regular contact with their families and go home at weekends.

One service user respondent, commenting on activities, in response to the question 'What could the home do better?' wrote 'It relies on my parents to take me away on holiday. I would like to go on holiday with them as well'.

The home has an established daily routine which suits the needs of the people living there. This is set out every day in a picture form activity planner, an individual activity planner is also on display in each person's room. each person has their own preferred routine.

Each service user has a key to their own room. Staff accompany service users outside of the home. Users are encouraged to participate in routine household tasks.

Menus are planned by staff and are based on dishes which service users have cooked at College. The menu operates on a three week seasonal cycle. Breakfast is usually cereals, bread or toast and hot drinks during the week. A cooked breakfast is served at the weekend. Lunch is a 'picnic' which people take with them for the day. Dinner,

Evidence:

served in the evening, is the main meal of the day. It is a two course meal consisting of a main course and dessert. A fish based dish is on the menu once or twice a week. A 'Take-Away' meal is always taken on Fridays - usually fish and chips from a local "Chippie".

There is a preference for fresh vegetables, on occasions selected from the home's own allotment. The menu can be adapted to suit individual preferences. Staff and users have developed the present menus together and the manager told us that service users are satisfied with them.

## Personal and healthcare support

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

People receive personal support from staff in the way they prefer and want. Their physical and emotional health needs are met because the home has procedures in place that staff follow. If people take medicine, they manage it themselves if they can. If they cannot manage their medicine, the care home supports them with it in a safe way.

If people are approaching the end of their life, the care home will respect their choices and help them to feel comfortable and secure. They, and people close to them, are reassured that their death will be handled with sensitivity, dignity and respect, and take account of their spiritual and cultural wishes.

### This is what people staying in this care home experience:

#### Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

The health and personal care needs of service users are well met, in liaison with community health services where required, and promote individual health and well-being.

#### Evidence:

The detail of personal support is recorded in each person's support plan.

All of the people living in the home are registered with a local GP group practice. The manager told us that it provides a very good service when required. The practice has now started offer an annual health check to each person.

NHS dentistry is available in Reading. There is an optician in Caversham. A chiropodist visits the home every six weeks or so. Each service user has a care manager who is usually accessed through the duty care manager. The home does not require ongoing contact with NHS specialist learning disability services. The Disabilities Trust employs its own psychologists and speech and language therapists who are based in the Trust's offices in Dyson's Wood, near Reading. Staff provide support to service users accessing healthcare services as required.

## Evidence:

Medicines are prescribed by the person's GP and dispensed by Boots chemists. Medicines are usually dispensed in the Boots monitored dosage system (MDS). On occasions the home may also go to a local chemist for medicines required on a short term basis.

Medicines are administered by trained staff - all staff have undertaken appropriate training. Training is provided by Boots and on occasions by the local NHS trust. Staff are required to attend update training every two years. Arrangements for storage are adequate for this small community based service. Medicines are stored in a metal cabinet in the office.

Examination of medicines administration records showed good practice in recording. No omissions or errors were noted. Creams were dated when opened.

Records include a photograph of the service user. Guidance on 'as required' ('PRN') medicines. A 'homely remedies' procedure for each person which was signed by the GP.

The home's arrangements are audited twice a year by a local pharmacy. The last audit was carried out in September 2009.

## Concerns, complaints and protection

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

If people have concerns with their care, they or people close to them, know how to complain. Their concern is looked into and action taken to put things right. The care home safeguards people from abuse, neglect and self-harm and takes action to follow up any allegations.

There are no additional outcomes.

**This is what people staying in this care home experience:**

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

The home has good arrangements in place for responding to concerns and complaints by users. These are available in text, easy read, picture and symbol formats.

The home's policy, procedures and staff training protect the interests and well-being of users of the service.

Evidence:

The complaints procedure is detailed in a document entitled 'Policy on Feedback from Stakeholders Incorporating The Disabilities Trust Complaints procedure'. This was issued in January 2009. This outlines the organisation's policy on feedback, including complaints, the procedure to be followed by staff receiving a complaint and a model letter of acknowledgement. The procedure is outlined in ordinary text, symbol form, and large print 'easy read' format.

The home has not received any complaints since the last inspection. The registered manager told us that the weekly house meeting 'Interaction group' provides service users with an opportunity to raise any concerns with staff and other users. The home is also in regular contact with families who may wish to raise any concerns they may have. In the survey we carried out for this inspection one respondent answered 'Yes' to the question 'Do you know who to speak to if you are not happy?' and 'No' to the question 'Do you know how to make a complaint?'.

Evidence:

We have not received any complaints about this home since the last inspection.

The staff induction and training programme includes training on safeguarding adults. The home had a copy of the current Oxfordshire statutory agency policy on Safeguarding Adults. The home also had a copy of The Disabilities Trust policy on this matter. This was last reviewed in October 2008. Staff seen during the course of our visit to the home had knowledge of the subject and told us that abuse would not be tolerated in the home. They expressed confidence in the manager and in senior to properly investigate any reports of abuse. All had received training on Safeguarding Adults.

There have not been any Safeguarding reports from this service since the last inspection.

All staff have received guidance on responding to aggression by attending SCIP (Strategies for Crisis Intervention and Prevention) training.

Arrangements are in place for managing some monies on behalf of service users. The home does not act in any formal capacity in relation to this matter - each person's family acts in an Appointee capacity. Each person living in the home has their own bank account. Arrangements are in place for the secure storage of cash for each person. All transactions are recorded and receipts are retained. The manager told us that parents do a periodic check of the arrangements.

## Environment

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

People stay in a safe and well-maintained home that is homely, clean, comfortable, pleasant and hygienic.

People stay in a home that has enough space and facilities for them to lead the life they choose and to meet their needs. The home makes sure they have the right specialist equipment that encourages and promotes their independence. Their room feels like their own, it is comfortable and they feel safe when they use it. People have enough privacy when using toilets and bathrooms.

**This is what people staying in this care home experience:**

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

The home provides a safe, comfortable and well maintained environment for people living there.

Evidence:

The home is a four bedroom semi-detached house in a quiet close. It is located in a residential area within walking distance of local shops. Shops include a supermarket, chemist, post office, restaurant, cafe and pub. The area is served by local buses. The nearest rail station is Reading. Car parking is available in nearby streets. The home has its own transport for use by service users and staff.

The accommodation comprises, on the ground floor, entrance hall, ground floor WC, kitchen, conservatory, dining room, living room. There is access to the garden through the conservatory and living room. Stairs to the first floor. the accommodation on the first floor is comprised of three bedrooms, staff office and sleep-in room, bathroom with bath, WC and electric shower.

The garden is an average sized domestic garden bounded by wooden fencing. The garden includes a lawned area, flower beds, a patio with garden furniture and a shed.

The home is a pleasant, well maintained house, matching other homes in the area. All

Evidence:

areas of the home were in good order, tidy and clean. Bedrooms vary in size - none have en-suite facilities. The home provides a comfortable and safe home which meets the needs of the people currently living there. It would not be suitable for a person using a wheelchair.

Since the last inspection the front porch has been repaired, a new patio laid and new furniture acquired for the lounge. The manager expects to have new garden fencing installed in the near future and is in discussion with managers about changes to the downstairs WC.

## Staffing

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

People have safe and appropriate support as there are enough competent, qualified staff on duty at all times. They have confidence in the staff at the home because checks have been done to make sure that they are suitable. People's needs are met and they are supported because staff get the right training, supervision and support they need from their managers.

People are supported by an effective staff team who understand and do what is expected of them.

**This is what people staying in this care home experience:**

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

The organisation and the home's arrangements for the recruitment, training and development of staff ensure that staff have the personal qualities and skills to meet the needs of service users.

Evidence:

The staffing of the home at the time of this inspection consisted of two staff in the morning (between 7:00 am and 3:00 pm), one member of staff in the evening (between 3:00 pm and 10:00 pm), and one sleep-in member of staff at night. These levels are maintained from a basic establishment of four staff, supplemented when required by bank or agency staff.

Staff turnover is very low. The home uses bank or agency staff to cover sickness and annual leave. The home has an agency file which includes an introduction to the home, risk assessments, and key information on each service user including support guidelines.

Of the four staff employed in the home at the time of this inspection, two staff had acquired NVQ at level 3, one the Learning Disability Qualification, and one, the manager, NVQ at level 4.

## Evidence:

One new appointment has been made since the last inspection. The manager told us that the home is generally able to recruit staff locally. Examination of one personnel file during our inspection visit showed good practice in recruitment. The organisation has a good application form which facilitates exploration of any gaps in previous employment where necessary. Two references had been obtained. An Enhanced CRB disclosure had been received prior to appointment. Good interview notes were made. Health status had been ascertained and equal opportunities monitoring completed in accordance with the policy of the Trust. A recent photograph of the person was on file.

New staff attend an induction programme. An index card for each individual staff member records details of training attended.

The Disabilities Trust runs a range of training events over the course of the year. Details of training attended by staff were provided for this inspection. This included training on: 'Boots Care of Medicines', 'Non-Person Lifting and Handling', 'SCIP', 'Basic Food Hygiene', 'First Aid', 'Fire safety', 'Health and Safety', (it is noted that the last Health and Safety training attended by staff was in February 2006), and 'Safeguarding Adults'.

A copy of the training plan for 2010 -2011 was also made available to this inspection. In addition to the subjects mentioned in the previous paragraph (and including 'Health and Safety') the programme included training on: 'Autism Awareness', 'Asperger's Syndrome Awareness', 'Epilepsy', 'Why are we Here?', 'Sexuality', 'Bereavement', 'TEACCH' (an approach to responding to challenging behaviour), 'Certificate in Care of Autistic Spectrum Disorders', 'Defensive Driving', 'NVQ 3 and 4', and, 'Learning Disabilities Qualification (LDQ)'.

Individual personal supervision of staff is carried out at one to two monthly intervals. Sessions are planned and the agenda includes matters arising from the staff member's work with service users, training and professional development needs and any other matters which either party wishes to discuss. The process is confidential and records are maintained. We were informed that all staff have an annual appraisal - Performance Development and Review (PDR). Appraisals are normally carried during the first quarter of the calendar year.

Staff seen during the course of our visit to the home were positive in their views of the service and its management. They confirmed that the organisation offers many opportunities for training and development. All had a clear view of their job and all thought that the home was run in the interests of the people living there. They suggested that this could be measured by observing how content and relaxed people

Evidence:

looked, that one could see they looked well cared for, that users led a varied and active life, and that the incidence of challenging behaviour was low. The manager was described as "strict but fair".

## Conduct and management of the home

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

People have confidence in the care home because it is run and managed appropriately. People's opinions are central to how the home develops and reviews their practice, as the home has appropriate ways of making sure they continue to get things right. The environment is safe for people and staff because health and safety practices are carried out.

People get the right support from the care home because the manager runs it appropriately, with an open approach that makes them feel valued and respected. They are safeguarded because the home follows clear financial and accounting procedures, keeps records appropriately and makes sure staff understand the way things should be done.

**This is what people staying in this care home experience:**

Judgement:

People using this service experience **excellent** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

The home is very well managed in the interests of the people living there. The home enjoys a high level of confidence from stakeholders.

Weaknesses in some management processes in 2009 have been recognised and are being addressed in 2010. This should ensure the ongoing maintenance of a high quality service which is run in the interests of users of the service.

Evidence:

The Registered Manager (the manager) has managed the service for over six years. The manager has acquired NVQ at level 4 and holds the Registered Manager's Award (RMA). The manager keeps her skills and knowledge up to date by attending in-house courses run by The Disabilities Trust.

The manager told us that she endeavours to maintain an ethos which is consistent with the home's statement of purpose, namely 'It is the aim of the home to provide a service tailored to individuals on the autistic spectrum by recognising and developing their potential to achieve self-fulfilment within a safe environment.(The home) aspires

## Evidence:

to promote respect and individuality to people who use the service, by empowerment through total communication and a holistic approach'. The manager told us that she wants to create a 'real home' for the people living there. Each of the people in the home at the time of this inspection is "non verbal" and ensuring that their needs are met is a partnership between the users, their families and staff.

We carried out a survey for this inspection. We received completed forms from staff and families (completed with the service user). A member of staff wrote 'The work is all about knowing the service users and we need to work hard, train hard on knowing and identifying the communication needs of our service users, physically, emotionally and spiritually to support them better. We do well here but we need not rest on our oars, there is always room for improvement'.

A family member wrote 'The home gives the very highest care to all service users, who enjoy a homely, relaxed, stimulating environment.'. A service user, with help from a family member, wrote '(The home) cares for me extremely well and liaises with my parents and fits in with any specific requests whenever possible. It arranges a full timetable of activities and takes me and the other service users on regular outings to places of interest'.

A health or social care professional wrote '(The home) provides different forms of useful and enjoyable stimulus. The residents are fit, because they go for long walks. They are useful in the home and feel it is their home. They chop vegetables, vacuum, help with the washing and laundry. They are kept well informed about activities, therefore they feel secure. They also know they are respected and liked....'. and 'This is the best run residential home for people with Autism that I know of. Much could be learnt from the way this home is run'.

These extracts would support the view that the home, its manager and staff, is doing well in meeting the aims of its statement of purpose.

The organisation's policy is that homes are visited monthly by a senior manager and a proprietors report under Regulation 26 made. The manager told us that due to changes in management during 2009 the home experienced discontinuity in such visits. The most recent visit was on 23 January 2010 ( a few days before this inspection visit). As far as we can tell from the records the visit before then was in July 2009. The visit pattern prior to this in 2009 was irregular.

Proprietors reports include the outcome of the visitin manager's review of care plans, monies, discussion with service users, complaints, and staff matters.

## Evidence:

Annual reviews of each person's care and support are carried out with the service user, their parents, and their care manager.

The organisation carries out an annual quality assurance review. The outcome of the July 2009 review was noted to include 'recognition of excellence' in the home. The next review is scheduled for July 2010.

The results of the survey we carried out for this inspection included some very positive comments on the home. Some responses have already been included in this report. A healthcare professional wrote 'Pages Orchard provides a homely atmosphere that suits all service users who live there. Always busy and constantly active and they try and involve their residents in daily life as much as possible'. Another wrote 'Pages Orchard is managed extremely well, it is well run and organised, and service user needs are always the priority. It is a warm and friendly place and I believe it provides excellent support and opportunities for personal development for its service users. There are strong links between management and clinical services, and many meaningful activities are on offer, with many taking place in the community. Service users are respected and supported in a person centred way'. One final extract from comments on survey forms - '(Pages Orchard) cares and supports its clients physically and emotionally. It comes across as a clean, healthy and caring environment to live and work in'.

Responses to the question 'What could the service do better?' included the following. 'Keep [a department at Dysons Wood office] more up to date with relevant documents (to keep current clinical files up to date and ensure access to relevant information)'; 'Very little! However, Pages Orchard could involve clinical services more in Annual Reviews and ensure [they] have up to date information in files'; 'It relies on my parents to take me away on holiday. I would like to go on holiday with them as well'; 'I honestly can't think of anything!'; and, '...to continue to change as the needs of the service users change. Always be open to new ideas and improvements'.

Arrangements for health and safety are good - although it is noted that there were some gaps in health and safety training in recent years. This omission is being addressed in the 2010/11 training programme.

The home is required to conform to the Health and Safety policy and procedures of The Disabilities Trust. Staff are required to sign that they have read and understand that material.

Evidence:

The manager completes an environment checklist each month. Arrangements for storing COSHH (Control of Substances Hazardous to Health) materials are satisfactory. Contracts are in place for the maintenance of fire safety equipment, portable electrical appliances, fixed electrical wiring, and gas appliances. The home does not have emergency lighting. Torches to be used in an emergency are tested weekly.

A comprehensive fire risk assessment was carried in January 2010.

Arrangements are in place for recording accidents. No accidents have been recorded since the last inspection.

The home has a development plan for 2010. Items are listed in order of priority.

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, Care Homes 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, Care Homes 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

### 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

## Helpline:

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