

Quality Outcomes Report 2015



North Tyneside Council

Home Farm Trust September 2015



North Tyneside Council

Name of Service:	Home Farm Trust, Ponderosa House, Morpeth.
Date of Visit:	28th 29th September 2015
Manager:	Suzanne Loughran
Person in Charge on day of visit:	Suzanne Loughran
Contracts Team Officers:	Chris Clapperton and Beverley Gosling.

Not Met	Poor evidence of outcome being met
Partially Met	Good evidence of outcome being met /majority of evidence is in place but not all
Fully Met	All evidence is in place demonstrating the outcome is fully met

SUMMARY;

Home Farm Trust provides ISL support in three locations across North Tyneside. The service was able to evidence examples of positive risk however this was not always underpinned with clear risk assessments. The opportunities for individuals to utilise local services and maintain a community presence remains positive. The Care Planning process can be developed to have more involvement from the service users. An established means of collecting the views of the clients would benefit the services and assist in shaping their support and outcomes. The supervisions for the staff could be more regular to maintain clear lines of communication. The Business Continuity Plan could be developed to include its routine testing and reviewing. Where necessary, the individuals PEEP documents should include risk assessments for individuals who are unable to summon assistance. The visit to the service was very positive and the service users we spoke to appeared to be very relaxed and content. The staff we spoke to were all positive about the service and the support they receive.

Main Outcome	Related Outcome Measures	Comments	Outcome	Outcome Score
1. People benefit from Personalised Care	1.1 Effective assessment procedures ensure that placements are appropriate and well planned	This outcome was partially met. Best practice would see consent for the assessment and the care planning process for each client whether this is explicit or expressed. Where necessary there would be involvement from a representative or advocate.	Partially met	1
	1.2 Effective care planning and review processes ensure people receive excellent, individualised care	This outcome was met overall. Not all clients had annual health checks however some of the files we saw demonstrated very good examples of regular health checks and subsequent actions. The life histories could be developed to assist in further developing individualised care.	Fully met	2
	1.3 Positive risk taking ensures people are encouraged to maintain independence	This outcome was partially met. There were staff signatures on the risk assessment however there was no signatures by clients where it was possible to do so. The risk assessments on the whole were generic. For example, cookery, this applied to all tenants. Best practice would see the risk assessments based on the individuals specific capability. There was anecdotal evidence given regarding examples of how positive risk had reduced dependency on the support. All examples of this should be formalised and reviewed.	Partially met	1
			Score	4
People are supported by excellent staff	2.1 Comprehensive training procedures ensure staff have access to up to date knowledge and skills that is appropriate to the needs of the clients receiving the service.	This outcome was met overall. The Manager has a copy of the National Safeguarding Competence Framework, however staff have not had their competency checked against the framework at this point.	Fully met	2
	2.2 Staff are supported to undertake their duties	This outcome was partially met. The staff files viewed suggested that supervisions were not held regularly. The most recent being between January and May 2015. Best practice would see these being more regular. The minutes of staff meetings had not been signed by staff to demonstrate they have read and agreed with the content. The handovers differ between the supported living arrangements we visited. It would be beneficial to formalise the process.	Partially met	1

Main Outcome	Related Outcome Measures	Comments	Outcome	Outcome Score
2. People	2.3 Positive Staff Morale ensures people receive dignified care from a stable and productive staff team	This outcome was partially met. There was an annual satisfaction survey however there was no action plan. There was no loyalty scheme with in the service which was linked to staff retention.	Partially met	1
			Score	4
3. Management systems ensure an excellent quality of service provision	3.1 Effective quality assurance procedures ensure the manager has a clear overview of service performance	This outcome was met overall. The audit documents would benefit from a control version at the foot of the page to ensure the most recent version is used.	Fully met	2
	3.2 Effective Business Continuity procedures ensure the service can continue to care for people during crisis situations	This outcome was partially met. There was a good Business Continuity Plan in place and the teams had limited knowledge of it. The Plan had not been tested or reviewed. This was discussed during feedback and advice given that this could be achieved by discussing this at team meetings, concentrating on a specific emergency.	Partially met	1
	3.3 Effective recruitment procedures ensure the right staff are employed and people are protected from harm	This outcome was met overall. The references viewed had not been verified by the manager to ensure authentication.	Fully met	2
	3.4 Effective staff management ensures the right numbers of staff are available at the right time and have the right skills, knowledge, experience and competencies to carry out these duties.	This outcome was fully met.	Fully met	2
	3.5 Robust financial procedures ensure people retain as much financial independence as possible and are protected from financial abuse	This outcome was met overall. All financial arrangements for staff should be formalised and reflected in the policy. This should be reviewed annually. Not all service users held inventories for their belongings. The ones we viewed were adjusted as items are renewed and others disposed of. There was a Self Unlimited Policy which was the company name prior to HFT taking over.	Fully met	2
			Score	9
Benefit from a transparent, consistent and equitable care through effective policies and procedures	4.1 Effective Health and Safety procedures ensure people are cared for in a safe environment	This outcome was partially met. The Fire Risk Assessment has been carried out however copies were not held at ISLs. There were no PEEP documents in place. We were informed the Managers have been advised they use the fire evacuation plan. PEEP documents are necessary for the service users to highlight their individual requirements. Risk assessments should be in place for individuals who are unable to summon assistance.	Partially met	1
	4.2 Equal Opportunities procedures promote equal access to services and protect people from discrimination	This outcome was met overall. Best practice would see Equality Impact Assessments being used when implementing and reviewing policies.	Fully met	2
	4.3 Proactive Complaints and Compliments procedures ensure services are reactive and responsive to people's needs	This outcome was fully met.	Fully met	2

Main Outcome	Related Outcome Measures	Comments	Outcome	Outcome Score
4. People be service	4.4 Confidentiality and data protection procedures ensure that sensitive information is treated with respect	This outcome was fully met.	Fully met	2
			Score	7
5. People experience dignity and respect	5.1 People are able to engage in meaningful activity and occupation	This outcome was met overall. Whilst there was some evidence of community inclusion it would benefit the service to record the work undertaken by staff to encourage this even if the service users have not wished to engage.	Fully met	2
	5.2 People are encouraged and supported to maintain and develop relationships	This outcome was fully met.	Fully met	2
	5.3 People are proactively involved in services	This outcome was partially met. The recruitment procedure should be developed to incorporate the involvement of service users, family members or significant others and to have this formalised. Whilst there was information about gathering the views of those outside the service, this should be formalised and used to inform the service in the future.	Partially met	1
	5.4 People experience Choice and Control in every part of their life	This outcome was met overall. The advocacy service could be further promoted in tenants meetings or 1:1 sessions to ensure service users are aware of the service.	Fully met	2
	5.5 Privacy is a valued part of everyday life	This outcome was met overall. The care plans should be developed to include the decision making process regarding service users holding a room key.	Fully met	2
	5.6 People experience a sense of belonging and being a valued part of the community	This outcome was met overall. The community mapping exercise could be broadened to develop the use of local services. It is worth noting some of the service users are volunteers within the wider community.	Fully met	2

Main Outcome	Related Outcome Measures	Comments	Outcome	Outcome Score
	5.7 People have timely and appropriate access to information	This outcome was met overall. There was good information for the clients in their handbook. It would be worth broadening the content to include Safeguarding procedures and Advocacy arrangements.	Fully met	2
			Score	13
6. People are protected from avoidable harm and are cared for in a safe environment	6.1 The Mental Capacity Act 2005 and Deprivation of Liberty procedures are effective and ensure people are treated with dignity and are protected from harm	This outcome was partially met. Best practice would see mental capacity considered when important or specific decisions need to be made and for this to be reviewed and the appropriate paperwork to be held. This should include agreement to the placement.	Partially met	1
	6.2 Excellent safeguarding procedures ensure people are protected from harm	This outcome was partially met. The Safeguarding policy should be developed to include joint working. The whistle blowing policy should include the contact details for North Tyneside Local Authority. There were contact details for CQC however this should be expanded to include Local Authority Gateway team. The Manager is required to implement the National Safeguarding Competence Framework. This will allow a clear line of responsibility for safeguarding to the organisation. The Safeguarding policy should be expanded to include the people entering the home to carry out work and others who will have direct contact with service users.	Partially met	1
	6.3 Proactive falls prevention practices and procedures ensure that actions are taken to reduce the incidence and impact of falls	This outcome was not applicable at the time of the visit.	Not applicable	Not applicable
	6.4 Maintaining a safe environment ensures people are protected from potential hazards	This outcome was fully met.	Fully met	2
	6.5 Appropriate and safe equipment ensures people receive safe and dignified care	This outcome was not applicable based on the needs of the individuals supported at the time of the visit.	Not applicable	Not applicable
			Score	4
7. People experience improved health and well-being	7.1 People's nutritional needs are comprehensively met and dining is a positive experience for all	This outcome was fully met.	Fully met	2
	7.2 Effective Health and Hygiene practices minimise the risk of cross infection	This outcome was met overall. There was evidence of service users being encouraged to be involved in keeping their own spaces clean and tidy, this extended to the communal areas also. The cleaning regimes were evidenced, however these needed to be signed off by the responsible person when required.	Fully met	2
	7.3 Robust medication procedures ensure people receive the right medication at the right time to protect their health	This outcome was fully met.	Fully met	2
			Score	6

Total Scored	47
Maximum Score	56
Percentage scored	84%