

HOME ORCHARD QUALITY ASSURANCE FEEDBACK REPORT



HOME ORCHARD CARE AND SUPPORT FOR ADULTS WITH A LEARNING DISABILITY

DECEMBER 2017-DECEMBER 2018

CONTENTS

SECTION 1	INTRODUCTION TO THE REPORT
SECTION 2	METHODOLOGY
SECTION 3	STAFF FEEDBACK: EVALUATION, 2016 COMPARISON & ACTION PLAN
SECTION 4	FAMILY / ADVOCATE FEEDBACK: EVALUATION, 2016 COMPARISON & ACTION PLAN
SECTION 5	OUTSIDE PROFESSIONAL FEEDBACK: EVALUATION, 2016 COMPARISON & ACTION PLAN
SECTION 6	CONCLUSION & RECOMMENDATIONS FOR 2018
SECTION 7	Appendix 1: Staff Feedback Graphs Appendix 2: Family / Advocate Graphs Appendix 3: Outside Professional Graphs

SECTION 1: INTRODUCTION

Home Orchard Care is committed to providing the highest possible quality of service to the people, their families, staff, and all other associated customers and stakeholders. We endeavour to understand the current and future needs of people and will work to meet and exceed expectations at all times.

Home Orchard is registered to provide accommodation for persons who require personal care under The Care Quality Commission (CQC). CQC is the independent regulator of all health and Adult Social Care in England. CQC publish its inspection reports on their website www.cqc.org.uk or you can read the latest inspection reports by clicking the link on our website www.homeorchard.co.uk/cqcinspectionratings.html

The home will monitor satisfaction levels in all key areas of its operations, and will review, evaluate, and implement improvements, where necessary, on a continuous basis. This process will be known, throughout the home, as the “Quality of Service Programme” (QSP).

Procedure:

The QSP has the following key elements:

1. *Programme purpose;*
2. *Communication, education and training;*
3. *Implementation;*
4. *Review, analysis, feedback;*
5. *Action planning and improvement.*

1. Programme purpose

The QSP has the following main aims:

- A. To allow important stakeholders (people who use the service, their families or advocates, staff members and outside professionals) to have their say in how well the home is doing in the provision of its services, and the achievement of its aims and objectives etc.;
- B. To identify areas of excellence within the home, through to identifying areas where improvements can be made;
- C. To allow those who contribute to the achievement of excellence to be suitably identified, and praised;
- D. To facilitate the production of an improvement plan/development plan for the home which identifies the steps which need to be taken to improve those aspects of the service which are under-performing, together with identifying those who are to be responsible, with time frames etc. and to update this Plan on a regular basis.

2. Communication, education and training

The home recognises that in order to obtain best value for the investment in the review/evaluation process, all stakeholders need to be aware of the existence of the programme, its purpose, how it works, etc. This report focuses on formal feedback gained from annual questionnaires which invite suggestions for improvements on all aspects of the home’s services. The report is published on our website and communicated internally within the home.

SECTION 2: METHODOLOGY

3. Implementation

The QSP seeks views from stakeholders as to their levels of satisfaction within the home informally on a regular basis. Home Orchard uses a questionnaire to request formal feedback annually.

The home aims to incorporate the QSP into the management and ethos of the home, and will therefore run formal questionnaires on an annual basis.

The questionnaires cover a wide range of topics that ensure stakeholders are able to give feedback on all aspects of the services provided by the home. Each questionnaire has a list of statements with closed answers of '*Strongly Agree*', '*Agree*', '*Neither Agree or Disagree*', '*Disagree*', '*Strongly Disagree*' and '*Don't Know*'. The questionnaires also give an opportunity to give more detailed feedback on the final page where written comments can be given to show reasons for feedback or to suggest service improvements. The questionnaires sent to the staff team, families / advocates and outside professionals are largely the same but some statements are different to fit in with the prospective respondent. The questionnaires are sent out by post, where possible, to allow for anonymous feedback.

4. Review, analysis and feedback

The feedback from the questionnaire is displayed in Pie Charts to allow for a visual explanation and analysis of the results. This report will document and evaluate the results of the questionnaires from 2017 and will compare these to the results from previous years, with specific reference to 2016 results. Additional comments are documented on the final page. Feedback on the results of surveys will be published by the home on its website.

5. Action planning and improvement

- a) The home will ensure all staff are involved in the process of evaluation and planning for improvements based upon feedback from questionnaires;
- b) Meetings with people who use the service and other stakeholders will be held on a regular basis to discuss feedback and action plans.



SECTION 3: STAFF FEEDBACK

DECEMBER 2017

SECTION 3: STAFF FEEDBACK: IDENTIFIED IMPROVEMENTS 2017

Overall, staff feedback and comments from the 2017 questionnaires have been very positive (see appendix 1 Staff Feedback Graphs). Staff members have largely agreed with the statements. Staff comments show they are able to use all of their skills at work “and more thanks to plenty of training and supervisions”. A staff member said there is a “home from home family atmosphere and inclusion” and “great communication all the time”. Looking at the answers and comments, the staff team are overall very happy with many aspects of the home and their employment. There have been three key areas where improvements are recommended, please see below:

Identified Improvements	Action	Next Review Date
15% of staff feel that not everyone pulls in the same direction.	<ul style="list-style-type: none"> • Information will be discussed at the next staff forum (15th February 2018) with ideas sought to improve the flow of information. • Feedback from management meetings and senior meetings to be given at Staff Forums. • Staff Forum Feedback to be given at Management Meetings. • Interactive feature on the online Rota notice board' to be used by all staff and managers. 	December 2018
16% of staff feel they are asked to do too much.	<ul style="list-style-type: none"> • To be discussed in next Staff Forum, (15th February 2018) and action to be taken accordingly. 	December 2018
19% of staff feel that they are not paid fairly compared to other providers in the care sector.	<p>The 2017 results show that 16% of staff disagree and 3% of staff strongly disagree that they are paid fairly compared to other providers in the care sector. Some staff have commented that they feel sick pay should be available. Pay review to take place in April 2018, taking into consideration average pay in the Care Sector for the South West.</p> <p>It is recommended that further feedback from staff members is sought through a staff forum discussion. This will help to establish their specific thoughts and suggestions on pay rates and sick pay.</p>	December 2018
A member of staff was not sure about how complaints between residents are resolved.	<p>Complaints are dealt with in line with the Homes complaint policy. The complaints policy has been since discussed at a residents meeting and this is available in the homes. A manager responds to all complaints in the most appropriate way. A manager / senior reviews all household complaints each week, or sooner and holds meetings with people to investigate and resolve complaints.</p>	December 2018

SECTION 3: STAFF FEEDBACK: *RESULT COMPARISON TO 2016*

Identified for Improvement 2016	Summary:	Action Taken 2016-2017:	Comments December 2017:	Further Improvements:	Review Date:
Staff to be happy with the amount of information they receive.	The 2016 survey indicated that 13% of staff were not happy with the amount of information they receive. No comments were given to indicate if these staff members feel they are receiving too much information or not enough.	Feedback and ideas were sought from staff via supervision and staff forums.	The 2017 results show a shift in staff opinion of this aspect of the service; 3% of staff are unhappy with the amount of information they receive. The home should continue with measures in place which includes 6 weekly staff forum and an interactive Rota system.	To further improve staff opinion in this area, the next step would be to use the 'Notice Board' facility of the online Rota system more often. The 'Notice board' is an interactive feature and can be used by all staff and managers to keep staff and workers fully informed of all matters relating to their job roles. The messages must be appropriate and not disclose personal information re: people who use the service, staff or workers.	Dec-18
Staff to feel that they are fairly paid compared to other providers in the care sector.	The 2016 survey indicated that 20% of staff feel that they are not paid fairly compared to other providers in the care sector.	Staff pay review to take place April 2017.	The 2017 results show that 16% of staff disagree and 3% of staff strongly disagree that they are paid fairly compared to other providers in the care sector. Some staff have commented that they feel sick pay should be available.	Pay review to take place in April 2018, taking into consideration average pay in the Care Sector for the South West. It is recommended that further feedback from staff members is sought through a staff forum discussion. This will help to establish their specific thoughts and suggestions on pay rises and sick pay.	Dec-18
Staff indicated that they did not know if the people who use the service are assessed properly when they come into the home.	The 2016 survey results showed that 27% of staff said that they did not know if the people who use the service are assessed properly when they come into the home.	Staff were invited to voice any concerns regarding the assessment and care plans at the next staff forum.	The percentage of staff feeling that they do not know if the people who use the service are assessed properly when they come into the home, has now reduced to 16%. This is a welcome reduction especially considering that we have had no new transitions to the home since 2015.	Staff members to be kept informed of new transitions to the home, as appropriate. Communication to be an important aspect of people accessing the service for the first time, both with staff, the person and their family.	Dec-18
Staff did not know if the needs of the people who use the service are assessed regularly, and changes made to the Care Plan when necessary.	The 2016 showed that 20% of staff did not know if the needs of the people who use the service are assessed regularly, and changes made to the Care Plan when necessary. Comments made by some staff suggest that they do not know because it is not part of their everyday job role.	Staff to be made aware that they all play a valuable part in the regular assessment and care planning of the people who use the service.	The 2017 staff feedback now shows that this figure has reduced to 6%.	Assessing need and Care Planning are part of the mandatory training courses and staff are encouraged to suggest concerns or improvements at 6 weekly staff forums, during individual supervisions or as and when necessary. Any changes are communicated with the staff team.	Dec-18



SECTION 4: Family and Advocate FEEDBACK

DECEMBER 2017

SECTION 4: FAMILY AND ADVOCATE FEEDBACK: *IDENTIFIED IMPROVEMENTS 2017*

Family and friend feedback and comments from the 2017 questionnaires has been very positive (see appendix 2 Family and Friend Feedback Graphs). The majority of statements have been answered with “strongly agree” which is extremely positive and shows that the home is meeting core and additional expectations of people’s representatives in key areas such as communication, protecting people’s rights, privacy and dignity and through providing a safe, comfortable and well maintained home. One Family member has written about the managers of the home “They are always willing to help in any way they can”. In regards to promoting and supporting family / friend visits one comment is “you are always made to feel very welcome”. A further comment expresses that “this is by far the best home I have been to and I have worked in the sector for over 20 years”. Family members have expressed they are happy with the home’s assessment of peoples needs and care planning “ The care plans and risk assessments are excellent. Good care plans and regular reviews”. A small percentage of feedback in some areas is shown as “neither agree or Disagree” or “Don’t Know”, please see identified improvements below:

Identified Improvements	Action	Next Review Date
13 % of feedback shows that people’s representatives “neither agree or disagree” that the Home promotes choice in food and recommends healthy eating and a balanced diet	<ol style="list-style-type: none"> 1. The Home has arranged for weekly fitness sessions to take place at Palace Farm. These sessions are provided by a specialist company that have experience in supporting people with a learning disability to benefit from exercise classes. These sessions are funded by the Home. 2. The Home will continue to monitor and maintain good opportunity for exercise and physical activity for each person on an individual basis according to their Care Plan. 	December 2018
13 % of feedback shows that people’s representatives “don’t know” whether complaints are taken seriously by the Home.	<ul style="list-style-type: none"> • It seems that, as people have not felt the need to complain, they are not sure of how the home has performed in this area. We will continue to ensure representatives are aware of how to complain by ensuring an up-to-date procedure is available to all. The home welcomes, records and monitors all feedback. 	December 2018

SECTION 4: FAMILY AND ADVOCATE FEEDBACK: *RESULT* *COMPARISON TO 2016*

Identified for Improvement 2016	Summary:	Action Taken 2016- 2017:	Comments December 2017:	Further Improvements:	Review Date:
9% of Family and Advocate feedback disagreed with the statement “The Home provides good opportunities for exercise and physical activity”	To encourage healthy living and exercise while balancing the rights of the people who use the service.	<ol style="list-style-type: none"> 1. Home Orchard continued to develop the Walking and Cycling groups. 2. Healthy eating and exercise has been discussed at a Residents Meeting chaired by an independent advocate. 	Feedback from the 2017 survey shows that family and friends now either “agree” or “strongly agree” with this statement. However, the home will continue to monitor this and take additional measures to improve opportunities for exercise and physical activity.	<ol style="list-style-type: none"> 1. The Home has arranged for weekly fitness sessions to take place at Palace Farm. These sessions are provided by a specialist company that have experience in supporting people with a learning disability to benefit from exercise classes. These sessions are funded by the Home. 2. The Home will continue to monitor and maintain good opportunity for exercise and physical activity for each person on an individual basis according to their Care Plan. 	Dec-18



SECTION 5: Outside Professional Feedback

DECEMBER 2017

SECTION 5: OUTSIDE PROFESSIONAL FEEDBACK : *IDENTIFIED IMPROVEMENTS 2017*

The level of response from the Outside Professional feedback has been low this year. Unfortunately, of the 14 questionnaires sent only 3 were completed and returned. It is recommended that Outside Professionals are given questionnaires soon after they have had involvement with the home and responses collated throughout the year. Although Feedback was limited in its quantity, the 3 questionnaires do show positive responses (see Appendix 3), often at 100 % agree i.e. “I am confident that the Home assesses individual needs properly and is capable of meeting them” and “Residents’ rights are protected at all times”. Two identified areas for improvements are detailed below:

Identified Improvements:	Action:	Next Review Date:
1/3 of feedback shows Outside professionals “neither agree or disagree” that the Home provides good opportunities for exercise/physical activity	<ol style="list-style-type: none"> 1. The Home has arranged for weekly fitness sessions to take place at Palace Farm. These sessions are provided by a specialist company that have experience in supporting people with a learning disability to benefit from exercise classes. These sessions are funded by the Home. 2. The Home will continue to monitor and maintain good opportunity for exercise and physical activity for each person on an individual basis according to their Care Plan. 	December 2018
1/3 of feedback shows Outside professionals “neither agree or disagree” that the Home answers all questions punctually and courteously.	<ol style="list-style-type: none"> 1. Feedback will be circulated to the home and staff will be reminded of the importance of working in partnership with community professionals to inform in the quality of the service for people. 	December 2018

SECTION 5: OUTSIDE PROFESSIONAL FEEDBACK: *RESULT* *COMPARISON TO 2016*

Identified Improvements	Action Taken 2016/2017	Comments December 2017:	Further Improvements:	Review Date:
<p>One Outside Professional commented that they had limited experience of some subjects and could only answer “Don’t know”.</p>	<ul style="list-style-type: none"> Consideration should be given to the type of questions asked in next years questionnaire and whether they are appropriate for all Outside Professionals involved in the survey. A new response of “Not Applicable to Area of Expertise” or similar could be added to give more clarity to the results. 	<ul style="list-style-type: none"> Some statements have been answered with “Don’t Know” this year and it is made clear this is because areas have not been applicable to a Outside Professional within the last 12 months i.e. Complaints are taken seriously by the Home, The Home is comfortable and well-maintained and The Home has a positive and inclusive atmosphere. 	<ul style="list-style-type: none"> In order to maintain continuity between feedback groups and comparison, it was decided that no changes would be made to the questions or “don’t know” category. Additional comments can be given in response of questions to clarify “Don’t know” answers. Consideration to be given to review all questions and answers to ensure they remain relevant to the aims of the report. 	<p>December 2018</p>
<p>One Outside professional has written in the additional comments after question 2 “I think that staff do really well with this most of the time but can allow agreed strategies to peter out”.</p>	<ul style="list-style-type: none"> Home Orchard will review all communication strategies currently in place to ensure that they are still relevant and person-centred and identify improvements. 	<ul style="list-style-type: none"> The feedback this year is 100% “agree”. Therefore the home has been able to ensure communication strategies are relevant and are used appropriately to support people with communication. 	<ul style="list-style-type: none"> The Home has ensured that people are aware of the “Accessible Information Standard” and have been given easy Read documents for this. People have also been supported to create communication cards to ensure everyone including Outside Professionals communicate with people in a way that they can understand. 	<p>December 2018</p>



SECTION 6: Conclusion and Recommendations

DECEMBER 2017

SECTION 6: CONCLUSION AND RECOMMENDATIONS

The Quality Assurance questionnaires have been successful in identifying areas of the service that are excelling and areas that require improvement. Overall the feedback has been extremely positive. However, improvements will be discussed, planned and implemented according to the Action Plans detailed in sections 3,4 & 5.

The level of response from the Outside Professional feedback has been low this year. Unfortunately, of the 14 questionnaires sent only 3 were completed and returned. It is recommended that Outside Professionals are given questionnaires soon after they have had involvement with the home and responses collated throughout the year.

Consideration to be given to review all questions and answers to ensure they remain relevant to the aims of the report.

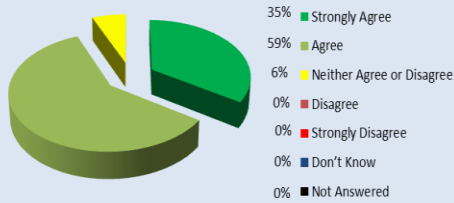


SECTION 7: Appendices

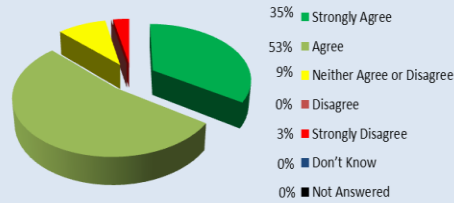
DECEMBER 2017

Appendix 1: Staff Feedback Graphs

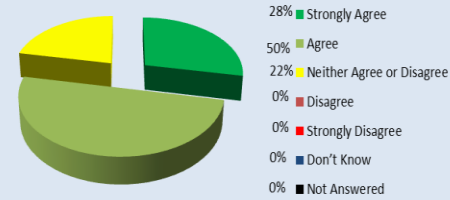
1. My work is satisfying and enjoyable



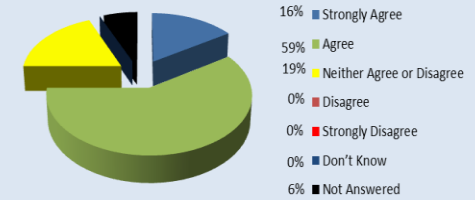
2. I am able to use all of my skills at work that are appropriate to my Job Description



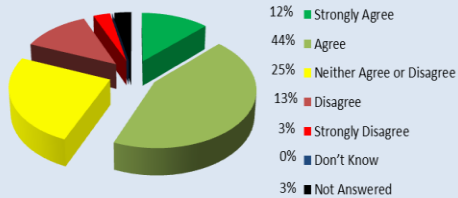
3. Working patterns are sensible and reasonable



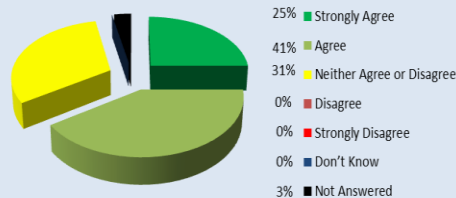
4. I feel secure about my future



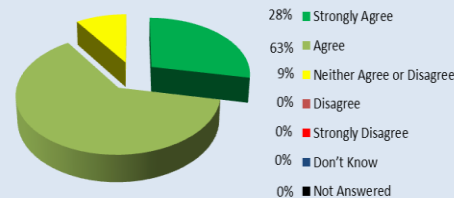
5. I am not asked to do too much



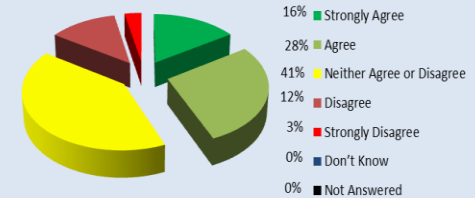
6. I am made to feel valued



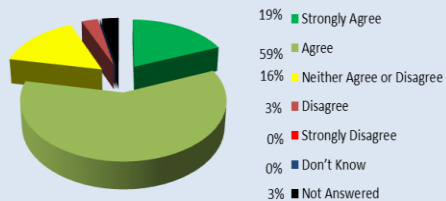
7. I feel fairly treated



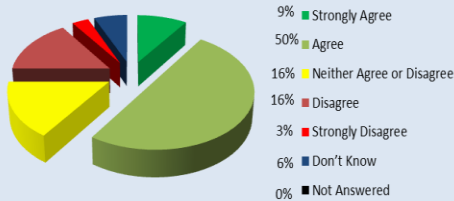
8. Everyone pulls in the same direction



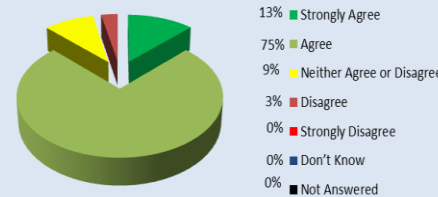
9. I am happy with the amount of information I receive



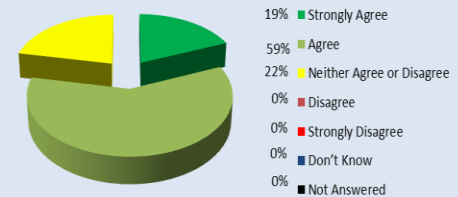
10. I am paid fairly compared with other providers in the care sector



11. Safety Equipment and information is available to all

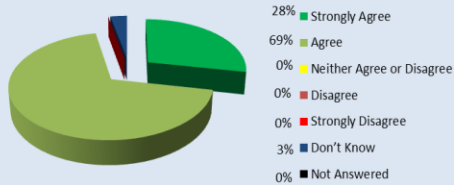


12. My training needs are recognised

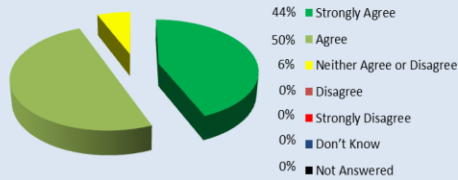


Appendix 1: Staff Feedback Graphs Continued

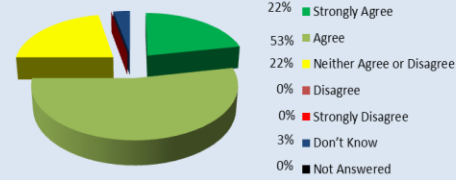
13. The Home communicates well with Residents and their Families etc.



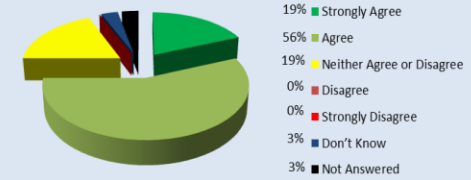
14. The Management team is supportive and approachable



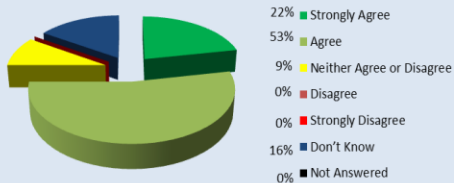
15. The Management team is open to ideas and suggestions



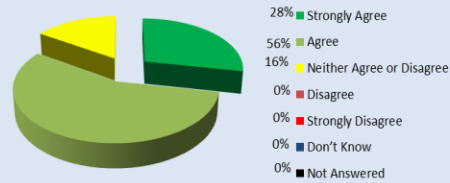
16. The Management team communicate well with the staff team



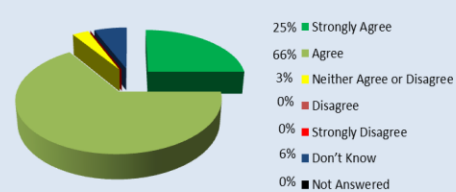
17. Residents are assessed properly when they come into the Home



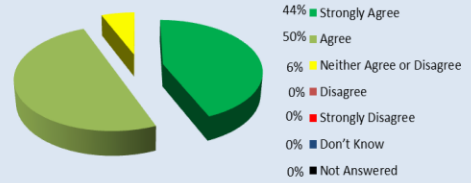
18. The Home is capable of meeting the needs of Residents who come here



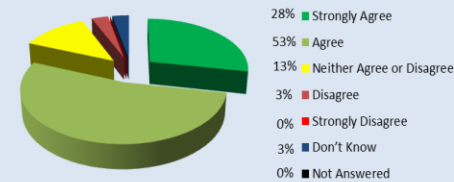
19. The needs of Residents are assessed regularly, and changes made to the Care Plan when necessary



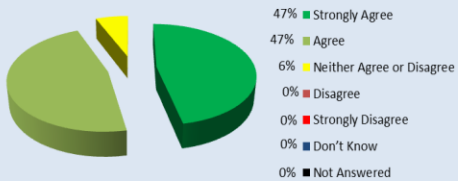
20. The Home takes an interest in the health and wellbeing of its Residents



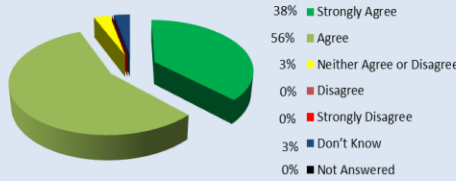
21. There is always time to deal with Residents properly



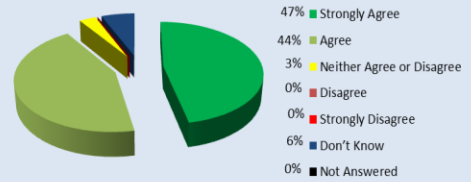
22. The Residents have plenty of opportunity to live fulfilling and enjoyable lives



23. Staff are encouraged to take an interest in the hobbies and interests of Residents

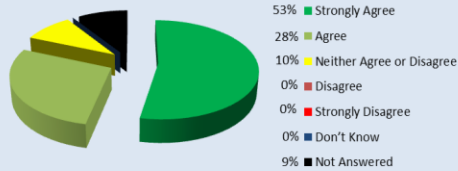


24. Staff respect the privacy and dignity of Residents

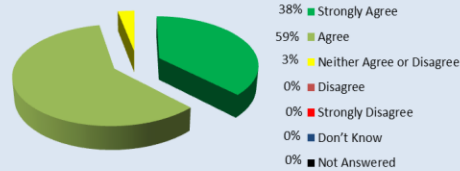


Appendix 1: Staff Feedback Graphs Continued

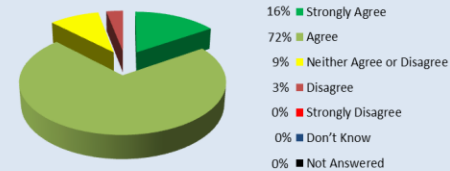
25. Visitors are encouraged to come to the Home



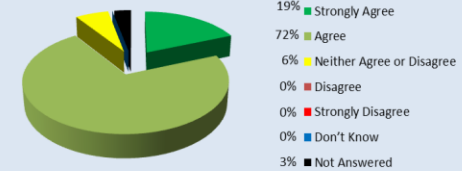
26. Residents are able to exercise choice in what they do



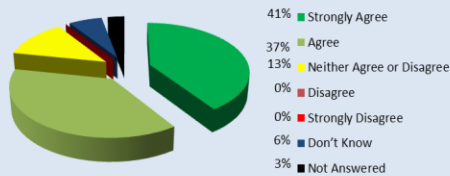
27. Food is well prepared, nutritious and wholesome



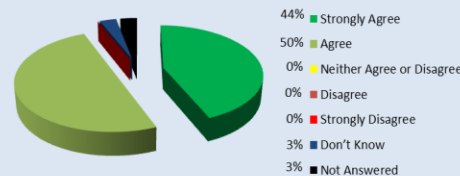
28. Food is presented in an appealing manner



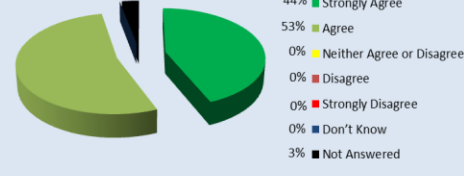
29. Complaints are taken seriously by the Home



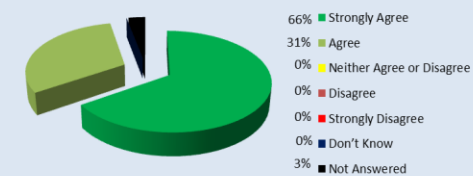
30. Residents' rights are protected at all times



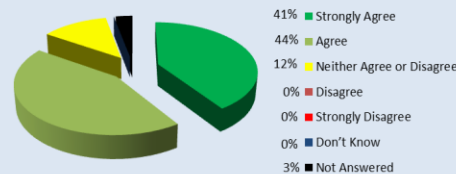
31. Residents are safe here



32. Any allegation of abuse would be taken seriously

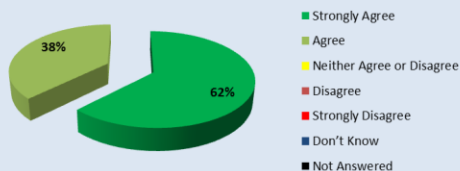


33. The Home is comfortable and well-maintained

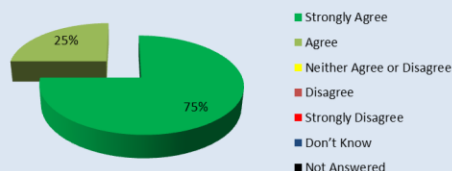


Appendix 2: Family Graphs

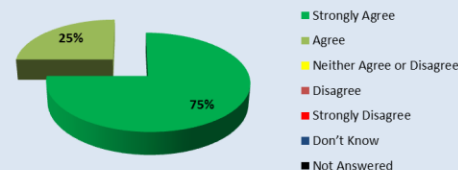
1. I am confident that the Home assesses individual needs properly and is capable of meeting them



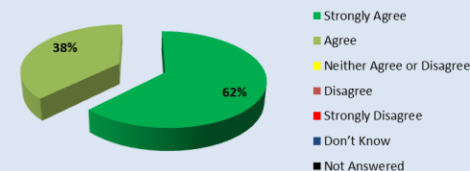
2. The Home understands that communication with residents is sometimes difficult, and uses appropriate communication techniques when necessary e.g. signs, symbols and pictures



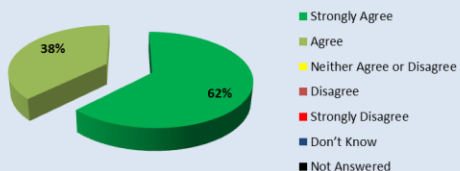
3. Care is planned, based on assessed needs and reviewed regularly



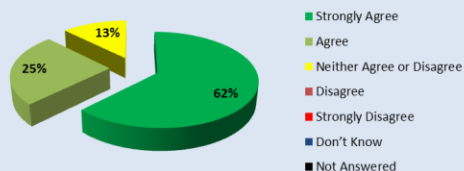
4. Good personal hygiene and dental care are seen as important by the Home



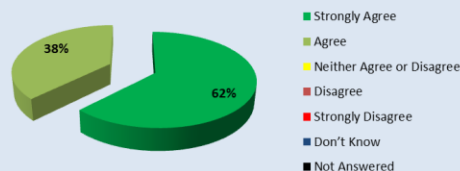
5. The Home provides good opportunities for exercise and physical activity



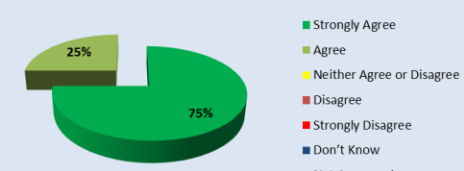
6. The Home promotes choice in food and recommends healthy eating and a balanced diet



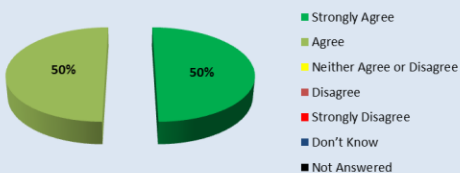
7. Promoting and maintaining good health are issues which the Home takes seriously



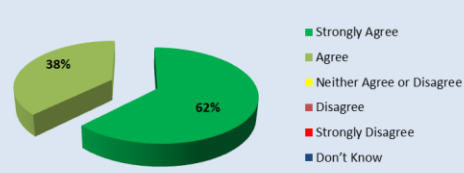
8. The Home monitors what medication is being taken, how it is taken, when it is taken and ensures it is reviewed by a doctor on a regular basis



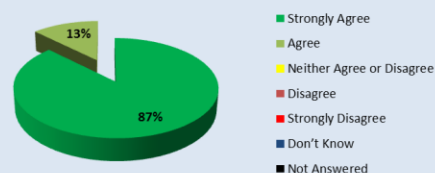
9. I am happy with the amount of information I receive from the home



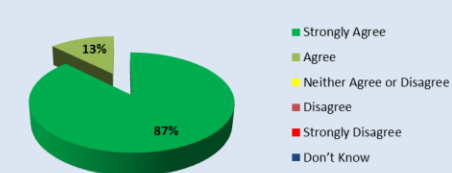
10. The home ensures that the residents have a very person centred life



11. The Home promotes and supports family/friend visits

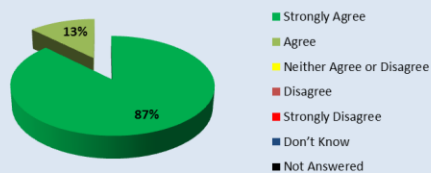


12. The Home answers all questions from family punctually and courteously

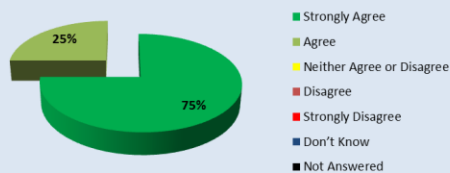


Appendix 2: Family Graphs Continued

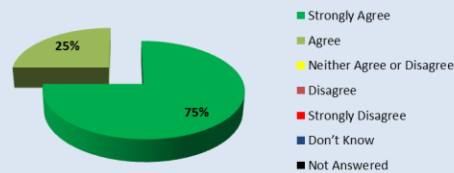
13. Staff are always courteous and welcoming



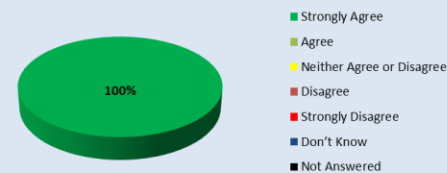
14. The managers of the Home are approachable



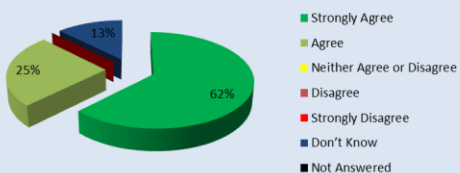
15. The Home is capable of meeting the needs of Residents



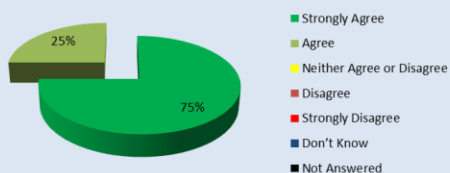
16. Staff respect the privacy and dignity of Residents



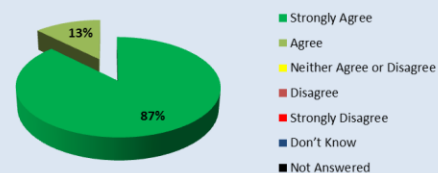
17. Complaints are taken seriously by the Home



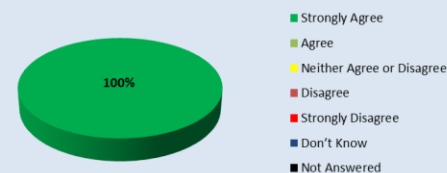
18. Residents' rights are protected at all times



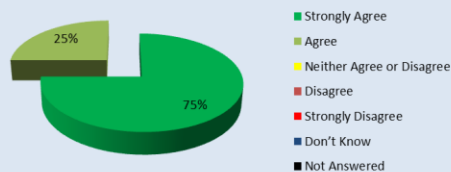
19. Any allegation of abuse would be taken seriously



20. The Home is comfortable and well-maintained

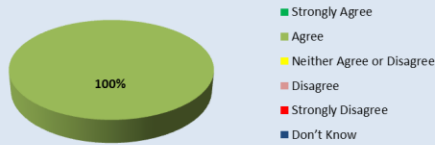


21. The Home has a positive and inclusive atmosphere

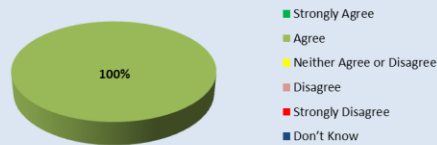


Appendix 3: Outside Professional Feedback Graphs

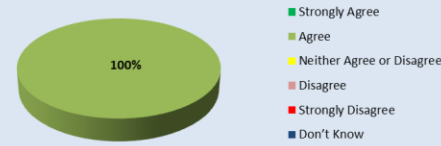
1. I am confident that the Home assesses individual needs properly and is capable of meeting them



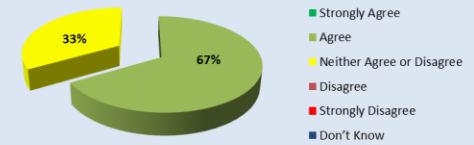
2. The Home understands that communication with residents is sometimes difficult, and uses appropriate communication techniques when necessary e.g. signs, symbols and pictures



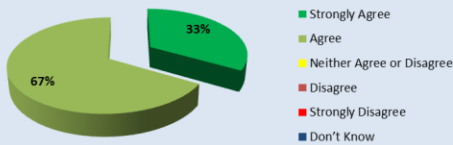
3. Care is planned, based on assessed needs and reviewed regularly



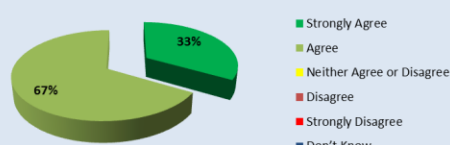
4. The Home provides good opportunities for exercise/physical activity



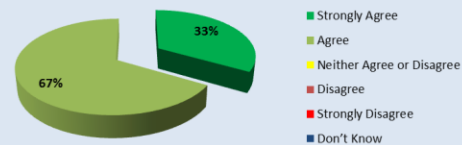
5. Promoting and maintaining good health are issues which the Home takes seriously



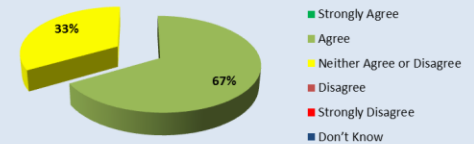
6. The Home shows a keen interest in what medication is being taken, how it is taken, when it is taken and when it ought to be reviewed/assessed by a doctor



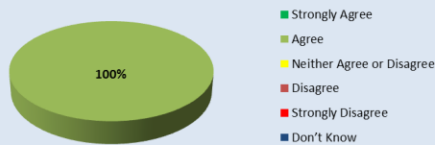
7. The home ensures that the residents have a very person centred life



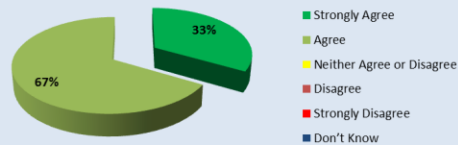
8. The Home answers all questions punctually and courteously



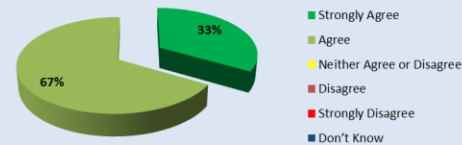
9. Staff are always courteous and welcoming



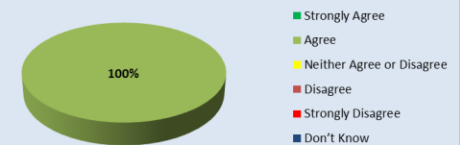
10. The managers of the Home are approachable



11. Staff respect the privacy and dignity of Residents

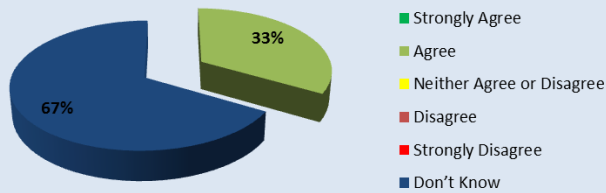


12. Visitors are encouraged to come to the Home

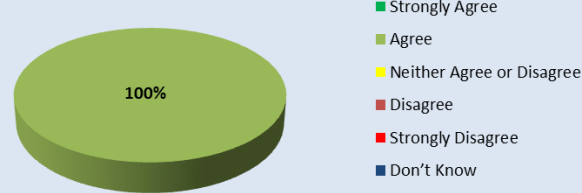


Appendix 3: Outside Professional Feedback Graphs Continued

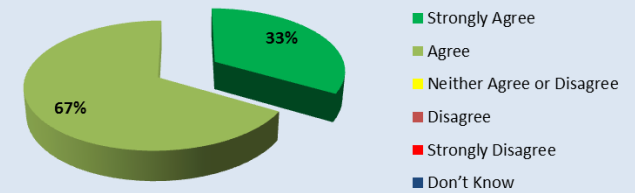
13. Complaints are taken seriously by the Home



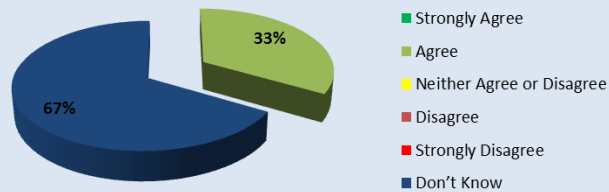
14. Residents' rights are protected at all times



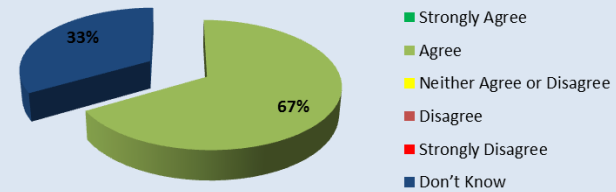
15. Any allegation of abuse would be taken seriously



16. The Home is comfortable and well-maintained



17. The Home has a positive and inclusive atmosphere



HOME ORCHARD QUALITY ASSURANCE FEEDBACK REPORT



**HOME ORCHARD CARE AND SUPPORT FOR ADULTS WITH A LEARNING
DISABILITY**

END OF REPORT