

Mrs Jacqueline Jenny Smith

Poppy Cottage

Inspection report

Poppy Cottage
Denham Green Lane
Denham
Buckinghamshire
UB9 5LG

Tel: 01895833104

Website: www.poppycottagelimited.co.uk

Date of inspection visit:

26 July 2016

28 July 2016

Date of publication:

07 September 2016

Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service effective?

Good ●

Is the service caring?

Good ●

Is the service responsive?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

This inspection took place on 26 and 28 July 2016. It was an unannounced visit to the service.

We previously inspected the service on 08 October 2014. The service was meeting the requirements of the regulations at that time.

Poppy Cottage is registered to provide personal care. It provided this within supported living accommodation. At the time of our inspection sixteen people were being supported by the service.

The service had a registered manager in post. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

We received some outstanding feedback from people and their relatives. Comments included, "In our opinion Poppy is excellent, and the care she receives is outstanding and she has improved in so many ways due to the care she is given", "Our opinion of the way Poppy is managed we feel it is of the highest standard", "We definitely recommend the service", "I feel safe, as the staff are always around" and "It's a safe haven for her, I am reassured that she is looked after."

People were protected from avoidable harm as the service had safeguarding procedures and staff knew what to do should a safeguarding concern be raised.

Poppy Cottage prides itself on providing a personalised service which helped people to achieve their maximum potential. We received many examples of how the service had supported people to move from supported living to more independent living. The registered manager told us "One of the main reasons we are all so passionate about our work is because all our staff including myself are equal. I've always maintained each of us are on the same level, some of us have more qualifications and experience but our work ethic is the same, it's the way I've always worked with staff and I believe it works, our staff are always willing to go the extra mile."

People were supported by staff with the right skills and attributes as the service had a robust recruitment process. All the required checks were made.

People received their medicines when required and staff only provided support with medicines after they had received the appropriate training.

People were supported to undertake activities of their choice. Staff met with each person every week to plan forthcoming events. This ensured there was enough staff on duty to make sure the activities took place. In the event of unplanned absences of staff, other staff were flexible to cover the shifts. Where possible people

were supported to attend work placements and or college.

Care plans were written in a way to ensure staff knew how to support people; they were reviewed on a regular basis to ensure the information was up to date.

People were supported to maintain a healthy lifestyle and were supported to attend important medical appointments.

People and their relatives had confidence in the management team. Comments included "I have always found that (manager) and her team not only provide the care that you would expect from a Supported Living environment but are always willing to go the 'extra mile' to make sure their service users are happy and well adjusted" and "We are confident she is very good hands."

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Good ●

The service was safe.

People were protected from harm because staff received training to be able to identify and report abuse. There were procedures in place for staff to follow in the event of any abuse happening.

Potential risks to people were clearly identified and mitigating actions were available to all staff. Risk assessments were reviewed regularly.

People were supported by staff with the right skills and attributes because robust recruitment procedures were used by the service.

Is the service effective?

Good ●

The service was effective.

People received safe and effective care because staff were appropriately supported through a structured induction, supervision and training.

People were encouraged to make decisions about their care and day to day lives. Decisions made on behalf of people who lacked capacity were made in accordance with the Mental Capacity Act 2005.

People received the support they needed to attend healthcare appointments and keep healthy and well.

Is the service caring?

Good ●

The service was extremely caring.

The registered manager and staff were committed to a strong person centred culture. Kindness, respect, compassion and dignity were key principles on which the service was built and values that were reflected in the day-to-day practice of the service.

Staff were knowledgeable about the people they were supporting and aware of their personal preferences.

People were treated with respect and their privacy and dignity were upheld and promoted. People and their families were consulted with and included in making decisions about their care and support.

Staff promoted independence and supported people as they wished.

Is the service responsive?

Good ●

The service was responsive.

Care plans were written in a way that described what support was required.

People were able to identify someone they could speak with if they had any concerns. There were procedures for making compliments and complaints about the service.

The service responded appropriately if people's needs changed, to help ensure they remained independent.

Is the service well-led?

Good ●

The service was well-led.

People were supported by staff who felt supported by the management team and were confident that any issues raised would be dealt with.

People and relatives had confidence in the management. Management were visible and accessible.

There was a clear vision and values set by the management team. These were understood by staff who worked in the service.

Poppy Cottage

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

The inspection took place on the 26 and 28 July 2016 and was unannounced; this meant that the staff and provider did not know we were visiting. The inspection was carried out by one inspector.

Before the inspection, the provider was not asked to complete a Provider Information Return (PIR). The PIR is a form that the provider submits to the Commission which gives us key information about the service, what it does well and what improvements they plan to make. We reviewed notifications and any other information we had received since the last inspection. A notification is information about important events which the service is required to send us by law. We gave the provider an opportunity to share evidence of what it did well and what they had planned for the future. They told us about a new supported living home they were due to open.

We spoke with three people who were receiving care and support and one relative. We spoke with the registered manager, the operational manager and four other staff members. We reviewed four staff recruitment files and four care plans within the service and cross referenced practice against the provider's own policies and procedures. After the site visit we contacted a further 10 relatives to seek feedback of the service.

We also contacted social care and healthcare professionals with knowledge of the service. This included people who commission care on behalf of the local authority and health or social care professionals responsible for people who were supported by Poppy Cottage.

Is the service safe?

Our findings

People and their relatives told us they felt Poppy Cottage provided safe care and treatment. Comments included, "I feel safe, as the staff are always around" and "It's a safe haven for her, I am reassured that she is looked after." A staff member told us "Here at Poppy Cottage, we ensure that each and every one of our service users feels safe, secure and cared for."

People were protected from abuse. The service had a safeguarding procedure in place. Staff received training on how to safeguard people. Staff had knowledge on recognising abuse and how to respond to safeguarding concerns. Contact details for the local safeguarding team were displayed in the care office. Staff told us they would report a concern to an external agency if they felt it had not been dealt with appropriately by the management team.

We saw previous safeguarding issues had been reported to the local authority when required. People we spoke with had no concerns about their safety or any actions by staff which restricted their human rights. People we spoke with felt confident to discuss concerns if they had any with any member of staff and would not hesitate to raise a concern with the registered manager or a family member.

People were supported by sufficient staff with the right skills and knowledge to meet their individual needs. Pre-employment checks were completed for staff. These included employment history, references, and Disclosure and Barring Service checks (DBS). A DBS is a criminal record check.

We observed staffing levels were adequate to meet people's needs, this was supported by what staff and people told us. The management team explained how they managed the rota. Staff told us that weekly planning meetings were held with people. These detailed what activities people wished to undertake. The management would then ensure there was enough staff on duty to facilitate them. The management team told us the staff were flexible and worked hard to support people as they wished. For instance, the registered manager told us how they had recently arranged for a person to have an additional holiday away. Staff had been asked to cover the holiday. One member of staff told us "I have come in before on my day off for a couple of hours to ensure a service user did not miss her horse riding lesson."

On day two of the inspection we observed the management team checked to ensure they had enough staff to cover a new care package for someone who had been referred for support. This meant that the service was able to provide safe care.

People who required support with medicines were supported by staff that had received training and understood the different types of medicine. We observed medicine records were well maintained. A senior member of staff was responsible for ordering and checking new medicines in. People told us they received their medicines on time. The operational manager told us, if a medicine error happened the member of staff would be taken away from administration of medicine and re-trained. One member of staff told us "We understand that giving their medication correctly is a vital part of their day and therefore we require specialised training on this."

Risks were managed well within the service. Risk assessments were completed for a number of potential hazards. This included manual handling, risk of choking and falls to name a few. Risk assessments gave clear instructions to staff on how to minimise risk, they were reviewed when changes occurred so staff had the updated version. Staff told us they had time to read the risk assessments and were able to tell us how they would provide safe care.

Where people required equipment to support them to be independent, the service ensured that this was regularly maintained. We saw maintenance appointments were placed in people's diaries.

Incidents and accidents were reported. The registered manager and operational manager were alerted to completed forms via an electronic link. This allowed them to sign off the incident or accident and to monitor any trends. We saw where required onward referrals were made following incidents and accidents. For instance, one person had been referred to the occupational therapist following a fall.

Is the service effective?

Our findings

People received effective and compassionate care, from staff who understood their preferences, likes and dislikes. People told us they knew the staff well and would not hesitate to ask them for support.

People and their relatives told us they felt the staff were well trained and equipped to provide a high standard of care and support. This was supported by what staff told us. Comments included, "The training is really good" and "I love training, I have been doing this work for twelve years, but you always need to learn, as things change." The service had identified a need for a training co-ordinator and had successfully recruited into the post. We observed discussions being held between the training co-ordinator and the operational manager about upcoming training events.

The service provided staff with an induction period to help them understand their role and ongoing support through one to one meetings. An annual review of their performance and a development plan was made. Staff we spoke with felt the induction had helped them. One member of staff told us "I had a good induction; I think this is really homely, I didn't know anything before I started, the training has been really good."

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The Act requires that as far as possible people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible. People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA. Providers of personal care can only deprive people of their liberty upon authorisation by the Court of Protection. We checked whether the service was working within the principles of the MCA.

Staff had received training on MCA. Senior members of staff were aware of their responsibilities under the Act. We saw evidence where the service had supported people have their mental capacity assessed and meetings held in their best interest.

Staff were able to demonstrate how they involved people in decisions about their care and treatment. For example, one member of staff told us "We would with all our service users make sure they understand what we are asking them. We have weekly catch up meetings so service users can express any concerns they have."

People told us they were supported with a meal of their choice. Staff told us they were aware of what a healthy diet was. We saw that people were supported to think about a weekly menu. People told us they would go shopping to purchase ingredients needed for the week.

A relative told us "When he first went there his diabetes was not well controlled and he needed insulin. The staff took this in their stride, improved his diet and exercise and he is now off the insulin which is great."

Where people required adapted cutlery to enable them to maintain a level of independence, we saw this was provided. Staff we had contact with understood the importance of this and told us "One of our service users struggles to eat with a knife and fork due to her condition, so support workers always encourage her to use specialised cutlery."

The service supported people to maintain a healthy lifestyle. We saw that any changes in conditions were reported to senior staff and appropriate action was taken. For instance, one person had been supported to see the GP when a change in their condition had occurred. One relative told us how quickly the staff had responded when their daughter had been taken unwell. They told us "(member of staff) is always chasing up with GP, they have been a real help to me in trying to get the right medical treatment."

Is the service caring?

Our findings

People were supported by staff who provided caring and compassionate care. People told us "The staff are really nice" and "I like living here, we have fun." We received positive feedback from relatives. Comments included "The staff are excellent, very caring. It's beyond what you would expect", "In our opinion Poppy is excellent and the care she receives is outstanding" and "The staff are very friendly and caring towards her."

Staff spoke passionately about the support they provided. Comments included "Going above and beyond is an enjoyable and fulfilling aspect of our job", "I love my job" and "I thoroughly enjoy coming to work. If I can go home with a smile on my face because I have made a difference, it's worth it." The registered manager told us "We are passionate about providing a home for life, I have to think, it has to work, and it's what is best for the service user." The passion from staff about the work they did was evident at all levels from the provider down.

People who were supported by Poppy Cottage had a variety of communication needs. Some people did not express themselves using verbal language and other people's abilities varied from one day to another. Staff were aware of communication needs. They told us "The way we communicate depends on the service user." Staff were able to tell us how they would communicate with the people they supported. We observed communication styles were discussed in team meetings. One member of staff was able to tell other staff how they had approached a situation which had been challenging. This was particularly important as new members of staff were present. People used a variety of communication styles; the way they communicated was clearly described in care plans. We observed staff using 'Makaton' (a type of sign language) with one person and another person used picture boards. Staff helped people speak with the inspector on the days of inspection. This ensured that people were involved in the inspection and were able to share their views of the service. We observed that communication training was provided to new staff, for instance, a forthcoming training session was being carried out on 'Intensive interaction'. This is a way of communicating with people who do not use verbal communication. Staff were passionate about learning about communication as they understood the importance of this and how it could have a positive impact on people. One member of staff told us how they lay on the floor to communicate with one person. This meant staff understood each person own communication style.

Staff understood what was important to each person, for instance, they were knowledgeable about important relationships. One relative commented "They have been very supportive of (family member) maintaining regular visits to our elderly mother." Another relative told us "I have always found (registered manager) and the team not only provide the care that you would expect from supported living but are always willing to go the extra mile to make sure their service users are happy and well adjusted." This meant that staff were not task focused but person focused and wanted to help them live a life they wanted to.

The registered manager told us how they promoted independence in people; this was supported by what staff told us. For example, one member of staff told us "Overall I firmly believe that support workers at Poppy Cottage support the service users in a number of different ways, while promoting their independence and

ensuring they are treated as people regardless of disabilities." The registered manager gave us an example of how they had supported someone with a particularly challenging medical condition access a work placement. They described the planning involved which included educating the existing staff within the work placement about the medical condition. This was particularly important as the person's health could have been affected if staff did not understand their condition. The person had been able to develop their independence and had gained confidence, which had a positive impact on their life as they felt valued.

In another example the registered manager told us how they had worked with a person to help them manage their medical condition. The condition presented as high risk if the person did not follow a specialist diet. However they wished to be able to go to the shops independently. The service worked with the individual to put systems in place to help them achieve that goal. The systems in place worked well and the person was able to go out shopping independently. The registered manager told us how the person had gained confidence and their behaviour had improved. The ability to go out independently had a positive impact on their wellbeing.

The registered manager gave an example of how they had supported someone overcome their fear of going out of their home. The registered manager and the staff, worked closely with the person, building their confidence and helping them to manage their anxiety by teaching them breathing exercises. The person went from not being able to go out, to going out with staff and eventually moved into more independent accommodation. It was evident that the registered manager was proud of their whole staffing group and enjoyed supporting people to achieve their potential. The registered manager told us "Changing life's and helping a service user achieve a goal no matter how small is such an achievement."

One relative told us the service had worked with their family member to work on their confidence, and people who knew their relative before they were supported by Poppy Cottage had commented how the person had grown in confidence and had become more independent. Another relative told us how staff had encouraged their family member to maintain their independence even though their medical condition had deteriorated. The same relative told us how they had also been made to feel welcome. They told us "It's important for me that (family member) does as much as she can for herself, while she can, staff support her with this."

All the staff and relatives we spoke and had contact with commented how friendly the service was. Comments included "I love coming to work, you have to care in your heart, this is my second family" and "What I love it's a family environment, it's a family business." One relative told us, "As a parent I am most concerned with my whole family's well-being. That well-being is very dependent on (relative) happiness and I am delighted to say that the last four years have been a pleasure for (relative) and her extended family."

Staff spoke respectfully about the people they supported; we observed interaction between staff and people who they supported. We found staff promoted people's dignity. People told us how staff always knock on their room and wait to be invited in before entering. One staff member told us "I understand how valuable it is to have somebody who really respects and encourages you to be the best you can possibly be." Another staff member told us "It's their home, and I need to respect that." We heard this was also reinforced at team meetings.

People were supported by the local advocacy team. Advocates are independent of the service and provide support to people to express their views. The registered manager told us how a person had recently been supported by an advocate which had been a positive experience for the person. The service understood the importance of supporting the human rights of each person they supported. The registered manager was able to give many examples of how they had supported people in their choice to remain living in

Buckinghamshire. For instance in a recent best interest meeting with the local authority the service supported the person to tell the local authority that they wished to remain living where they did and being supported by Poppy Cottage. This was particularly important as the local authority had initially wanted to move them back into their locality. This meant the service understood how to advocate for a person and support them to express their views.

Staff understood about people's diversity and life style choices were respected. For instance, one person expressed to the staff they wanted a tattoo. The service supported the person to understand about the risk involved. Once fully informed the person still wished to go ahead and staff supported them to get the tattoo. We spoke with the person and they were very pleased with it.

The service took a person centred view to supporting people. They supported people attend the activities they wanted to, these included horse riding, shopping and going to the local leisure facilities. The registered manager told us how they tried to facilitate people going on holiday. One person had already had one holiday booked and then stated they wished to go on another holiday. The registered manager had arranged for them to spend a short break away and they told us how staff had been flexible and had accommodated the holiday by working additional hours. This meant that staff understood how to provide a person centred service. Staff told us of other occasions when they had come into work on their day off to ensure that people attended the activities they wanted to.

One relative told us how the service helped their relative celebrate special events in their life. "They (staff) arranged a pink party, as they know her favourite colour was pink." They also told us everyone who was supported by the service had their birthday celebrated by the staff. We saw photographs of previous events, these included, celebrations for Halloween and Easter to name a few.

Is the service responsive?

Our findings

People were supported by a service that was responsive to their needs. It put people's wishes first and involved them and other people of their choice in making decisions about their support. People had their needs assessed prior to receiving support from the service. The operational manager told us that a senior member of staff would undertake an initial assessment. The service also requested the last assessment conducted from the local authority. The service offered a phased introduction to the service. For instance, people would be invited to spend time within the supported living accommodation, prior to both the service and the person agreeing to move in and have support from Poppy Cottage. The registered manager told us this was very important, as they wanted to create "Happy homes."

Staff worked with people to produce personalised care plans. Care plans were comprehensive and provided staff with the detail they needed to provide support required. Staff were able to describe what level of support people required. A member of staff was identified to update the care plans when changes occurred. One member of staff told us "We follow personalised plans which have been catered according to their own individual needs and wishes."

Staff told us they kept up to date with people's conditions, so they could respond to any changes. One staff member told us "We make sure we read up on their care plans, watch documentaries on their disabilities to gain further knowledge." Another member of staff told us how they had researched about hearing loss and aids to further their knowledge. They told us they had put a system in place to teach the person how the hearing aid needed to be cleaned; they also told us they would be creating a work sheet for other staff to help them understand hearing loss.

We saw that good records were held on a computer system, which staff had access to. This was used to track people's progress. For instance, we saw that body maps were completed regularly. One person had been referred to the district nursing team following concerns over skin integrity. Staff we had contact with spoke highly of the computer system and told us "It enables us to keep track of how a service user is getting on, helps us spot any abnormalities and ensures we are doing our job properly."

Staff met with people on a regular basis to discuss what activities they wished to undertake. A number of people were supported with social and educational activities. One person told us about what they did at college. We observed activities were discussed in team meetings. People told us they went out regularly with support from staff. One person told us they had been at work in the morning, and were going to a social club that evening.

The service had a complaints procedure, but had not received any formal complaints. We observed relatives had regular contact with the registered manager; they had received a number of text messages from relatives during the course of the inspection. One relative told us the service was responsive to suggestions made. For instance, they had made a suggestion about more coat hooks, and they had been provided the following day.

Relatives we spoke with and had contact with were contacted by the service when important events took place. For instance, one relative informed us that they were always contacted when their family member was unwell and the GP had been called.

Is the service well-led?

Our findings

People were supported by a service that was well-led. We received positive feedback from relatives. Comments included, "Our opinion of the way Poppy is managed we feel it is of the highest standard. We have every confidence in our daughter living there" and "Well done Poppy Cottage – keep up the good work."

There was a clear vision and culture within the service. It was evident this was cascaded from the provider and registered manager to staff. Staff we spoke with were passionate about the support they provided. Comments included, "I want to improve their life. I want to help people feel they have achieved." The service had a stable workforce. The registered manager told us how important it was to them to ensure new staff had the right qualities to provide a person centred service.

The senior management team were visible. We observed them interact with people who were supported by the service, it was clear that people were aware of who management were and were able to speak with them freely.

The management spent time within the service and described themselves as part of the team, therefore, they were able to monitor the quality of the service provided. In addition they surveyed people who used the service and their relatives. The operational manager advised us the service would be introducing an improved quality audit to ensure they had evidence on improvements they made. Feedback from the surveys demonstrated how happy people were with the service provided.

We received positive feedback from staff about the management team. Staff felt supported by management. Comments from staff included "(house manager) is on the ball", "She is a star" and "It's a lovely company to work for, you get the support you need."

The registered manager told us the service was "Very much part of the local community." They gave us examples of how they supported people to gain confidence in going out independently. They also provided examples of how they had supported people with work placements and maintaining important relationship with family members.

There was a clear commitment from the registered manager to provide a personalised service, it was important to them to know who they were supporting, they told us, "I can remember every service user name and they know me when I walk in their home, when I lose that I lose the personal family touch that I've maintained for so long."

The service used a computer based system to record important information about people. This was used by all the staff, this meant it provided up to date information for staff about how best to support someone. Information requested during the inspection was easily accessible and kept securely.

The provider and registered manager was aware of their role and responsibility. They told us about

important events when they needed to. Staff had been made aware of their responsibilities and were able to communicate that to us. They had a staff handbook which gave them guidance about the service and what was expected of them.

We saw that the service had a variety of policies in place to assist with the running of the service; these included safeguarding people and complaints. Staff were aware of the policies and could access them freely.