

# **Corran Support Limited**

# The Office at Smokey Farm

### **Inspection report**

The Office, Smokey Farm Smokey Lane, Cropthorne Pershore WR10 3NF

Tel: 07593011406

Website: www.corransupport.com

Date of inspection visit: 03 November 2021

Date of publication: 24 December 2021

### 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

#### About the service

The Office at Smokey Farm is a supported living service that provides personal care and support to younger adults who have autism, learning disabilities and/or mental health conditions. At time of our inspection the service was supporting six people living in their own flats in one building, known as 'Bredon View'. People's homes had ensuites and their own private gardens. People also had access to shared facilities such as outside spaces and a spa to enjoy, plus communal kitchens, a laundry room and a sensory room.

People's experience of using this service and what we found People were cared and supported for by a well led motivated management team and staff that were passionate and enthusiastic.

There was a strong person centred culture embedded within the service. People were supported by kind, caring and compassionate staff that had formed positive relationships with them. People were encouraged to live as full a life as possible and staff supported them to achieve this. People received care that was personalised to meet their individual needs and preferences.

Systems were in place to protect people from the risk of harm and abuse. Risks to people's safety had been assessed, monitored and managed so they were supported to stay safe while their freedom was respected.

Staff were recruited safely. The provider had robust recruitment procedures in place and was extremely committed in ensuring potential new staff were of good character and had the right values to work with vulnerable people.

Staff were provided with the relevant training and support needed to enable them to carry out their roles effectively. People received their medicines as prescribed. Infection control policies and procedures were in place to keep people safe.

People were supported to access healthcare services. Staff were able to identify and communicate any changes to a person's needs to ensure appropriate support was sought.

People were encouraged to do activities and hobbies they enjoyed and supported to try new ones. Relatives were positive about the service, how it's managed, the staff and the care and support provided.

The service was well-led. The provider and registered manager had a good oversight. There were robust quality assurance checks and audits in place. Feedback was welcomed and used to further improve people's experience of using the service.

The registered manager, supported by the provider, had developed a person centred culture. Staff and management were enthusiastic and spoke passionately about their roles and responsibilities and were

committed to constantly provide high quality personalised care. They actively engaged with people, their relatives and professionals in the ongoing delivery of their care and support.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

We expect health and social care providers to guarantee autistic people and people with a learning disability the choices, dignity, independence and good access to local communities that most people take for granted. Right Support, right care, right culture is the statutory guidance which supports CQC to make assessments and judgements about services providing support to people with a learning disability and/or autistic people. The service was able to demonstrate how they were meeting the underpinning principles of Right support, right care, right culture.

#### The right support:

The model of care and setting maximises people's choice, control and independence. The supported living location is set in a spacious rural area. The surroundings enabled people to take part in outdoor activities including accessing the local amenities. One relative described the setting as, "A specialist environment for people with complex needs." A further relative said, "[Family member] is given opportunities, we are more than happy with the care and support provided."

#### Right care:

People received good quality person-centred care that promoted their dignity, privacy and human rights. There was a strong person-centred culture within the staff team. Positive behaviour support plans had been developed for people, to understand the reasons for their behaviour, and provide guidance for staff to ensure consistent approaches were used. Staff knew people well and demonstrated an understanding of people's individual care, behaviour and communication needs.

#### Right culture:

People were supported by staff where the ethos, values, attitudes and behaviours of management and care staff ensured people led confident, inclusive and empowered lives. Staff created a nurturing family environment

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

#### Rating at last inspection

This service was registered with us on 04/02/2020 and this is the first inspection.

#### Why we inspected

This was a planned inspection as the service had not previously received a rating.

#### Follow up

We will continue to monitor information we receive about the service until we return to visit as per our reinspection programme. If we receive any concerning information we may inspect sooner.

# The five questions we ask about services and what we found

We always ask the following five questions of services.

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Is the service safe?	Good •
The service was safe.	
Details are in our safe findings below.	
Is the service effective?	Good •
The service was effective.	
Details are in our effective findings below.	
Is the service caring?	Good •
The service was caring.	
Details are in our caring findings below.	
Is the service responsive?	Good •
The service was responsive.	
Details are in our responsive findings below.	
Is the service well-led?	Good •
The service was well-led.	
Details are in our well-led findings below.	



# The Office at Smokey Farm

**Detailed findings** 

## Background to this inspection

#### The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Care Act 2014.

#### Inspection team

The inspection was carried out by one inspector.

#### Service and service type

This service provides care and support to people living in a 'supported living' setting, so that they can live as independently as possible. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for supported living; this inspection looked at people's personal care and support.

The service had a manager registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

#### Notice of inspection

This inspection was announced.

We gave the service 48 hours' notice of the inspection. This was because we needed to be sure that the provider or registered manager would be in the office to support the inspection.

#### What we did before the inspection

We reviewed information we had received about the service. We sought feedback from the local authority and professionals who work with the service. We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all of this information to plan our inspection.

#### During the inspection

We observed care to help us understand the experience of people who were not able to communicate their views verbally with us.

We spoke with three relatives about their experience of the care provided. We spoke with seven members of staff including the provider, registered manager, senior care workers and care workers.

We reviewed a range of records. This included two people's care records. We looked at three staff files in relation to recruitment. A variety of records relating to the management of the service, including policies and procedures were reviewed.

#### After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records.



## Is the service safe?

# Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- The provider had safeguarding processes and systems in place to protect people from harm or abuse. Staff received safeguarding training and showed a good understanding of safeguarding procedures.
- Staff knew how to report any concerns and told us they were confident any concerns raised would be addressed and dealt with immediately by the management team.
- Staff were aware of the role of the local authority safeguarding and Care Quality Commission (CQC) roles if they felt they were not being taken seriously.
- The registered manager understood their responsibility to report safeguarding concerns to relevant organisations including the local authority and the CQC.

Assessing risk, safety monitoring and management

- Risk to people were assessed, monitored and managed to support them to stay safe. For example, detailed information was provided on how best to support people with health conditions such as epilepsy.
- People who needed support to manage anxiety had positive behaviour support plans and risk assessments in place. This provided staff with guidance on how best to support the person. Information included triggers and response.
- Relatives told us they felt their family member was safe and well cared for by staff. A relative commented, "We are very impressed with the caring staff, the specialist training and how [family member] complex needs are managed. [Family member] anxiety has reduced since being there [Smokey Farm] therefore challenging behaviour had reduced."
- The provider independently financed sensory processing assessments for people using the service to avoid unnecessary delay during the COVID-19 pandemic.

#### Staffing and recruitment

- There were enough staff to ensure people's needs were met safely. Staffing levels changed according to people's individual needs and to ensure appointments and activities could be supported.
- The provider had robust recruitment processes in place which included Disclosure and Barring Service (DBS) checks and at least two satisfactory references. The provider was passionate about recruiting excellent staff and looking after them.

#### Using medicines safely

- People's medicines were stored, administered and managed safely. Staff who supported people to take their medicines had completed relevant training and regularly had their competency assessed.
- Regular audits on medicines took place to ensure these had been given as prescribed and to identify and

address any issues.

#### Preventing and controlling infection

- People, staff and visitors were protected from the risks of cross infection as the provider had robust infection prevention and control (IPC) measures in place. People were supported by staff to maintain their own homes. Staff supported people as much as possible, in their preferred form of communication, to understand COVID-19 and the importance of good IPC practices to remain safe.
- Staff were provided with appropriate PPE and confirmed they had received IPC training.
- We were assured that the provider was accessing testing for people using the service and staff.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured the provider's infection prevention and control policy was up to date.
- We were assured the provider was facilitating visits for people living in the home in accordance with the current guidance.

#### Learning lessons when things go wrong

- Staff knew how to report any accidents and incidents. They told us the management team would act promptly.
- Accidents and incidents records were reviewed and monitored by the management team for any themes or trends. This helped to identify any action necessary to prevent reoccurrence.



# Is the service effective?

# Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law; Staff support: induction, training, skills and experience

- People's needs were assessed meaning their preferences were known to staff. People received support that was tailored to meet their individual needs.
- People had comprehensive and detailed support plans in place. People also had positive behaviour support (PBS) plans, PBS is a person centred framework for providing support to people with a learning disability or autism who may display behaviours that may be challenging or distressing for themselves or others.
- One-page profiles were in place detailing important information about the person, such as how to support and what is important to the them.
- Staff were knowledgeable about people. They described people's different needs. For example, mobility, nutrition and hydration, communication.
- The provider provided staff with essential and specific training such as 'Signalong', epilepsy and positive behaviour support training. Staff confirmed they received relevant training to enable them to support people effectively.

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- The staff team worked in collaboration with healthcare professionals to ensure people's needs were met. Staff monitored people and worked closely with their relatives to identify any changes in their health.
- The registered manager worked with relatives to ensure people could be supported to access healthcare services. One relative told us, "We oversee [family member] health appointments then ring [registered manager] to inform them this appointment happening, that date, that time... [Registered manager name] is always accommodating and ensures [family member] is supported to their appointment.

Supporting people to eat and drink enough to maintain a balanced diet

- People were encouraged to follow a healthy diet and make healthy eating choices. This included growing their own vegetables and helping to prepare their own meals.
- Staff knew people's dietary requirements and understood how to support people's needs. For example, supporting people to eat a healthy diet to assist with weight management.
- People planned and had choice of their own menus and were supported to purchase their food shopping.

Ensuring consent to care and treatment in line with law and guidance 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. When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty.

- We checked whether the service was working within the principles of the MCA. Records showed people's capacity was assessed. People that lacked capacity were supported to make decisions in their best interests by family members or representatives. For example, covert medicines (covert administration is when medicines are administered in a disguised format) had been appropriately authorised for one person.
- People were supported to make their own decisions wherever possible and staff respected peoples choices.
- Staff had a good understanding of the MCA. They had received training and knew to always check with people before providing any care and support. Staff knew how people communicated and could interpret their choice and wishes. For example, through facial expressions, body language, gestures and signs.



# Is the service caring?

# Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; respecting equality and diversity

- People were supported by staff that knew them well and treated them with kindness and compassion.
- We observed positive interactions between people using the service and staff and this was confirmed by relatives. A relative said about the staff and service, "Absolutely no concerns, we are very happy with the care, it's wonderful."
- Staff confidently and respectfully explained how each person received support. Staff knew the things that were important to individuals, their preferences and how to support them.
- Staff spoke with empathy and passion about the people they supported. One staff member said, "They [supported people] are amazing, so resilient." Another staff member said, "We [staff team] respect them and see them for who they are."

Supporting people to express their views and be involved in making decisions about their care

- Staff supported people to make decisions about their care as independently as possible. Significant others were involved in decisions about the care of people they supported.
- People were involved in day to day decisions. People were able to choose how they their time and which activities they engaged with. People used different forms of communication to express their wants, needs and preferences. Staff had a good understanding of these which included signs, pictures and objects of reference.
- Staff ensured people's views were listened to and respected. Staff were knowledgeable about people's differing communication needs and what support they required to understand and communicate effectively.
- Staff understood the importance of empowering people to make decisions, even the smallest decisions in their lives.

Respecting and promoting people's privacy, dignity and independence

• Care plans contained information of what people could do for themselves so staff could ensure their dignity and independence was maintained as much as possible. There was a range of daily living skills plans in place to ensure staff took a consistent approach to support people to develop and learn new skills. For example, food preparation.



# Is the service responsive?

# Our findings

Responsive – this means we looked for evidence that the service met people's needs.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- People's care and support was detailed and tailored to their specific needs. It was evident throughout the staff and management team there was a fully embedded person-centred approach.
- Support plans were regularly reviewed to update and reflect any changing needs.
- Documents such as 'One page profile' and 'Sensory passport' provided staff with people's likes, dislikes, activities, interests and support needs.
- There were regular handover meetings with staff and managers to ensure people's needs were responded to and consistently met.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- The provider and registered manager were exceptionally motivated to ensure people's individual communication needs were fully understood and supported.
- People's communication needs were assessed and detailed in care plans. For example, one person's communication plan explains to staff how reinforcing verbal communication with pictures and objects aids the person to make decisions and feel in control.
- Staff were provided with training to enable them to communicate with people effectively. This included intensive interaction, an approach based on the way staff observe and respond to the actions and sounds that person makes and 'Signalong', a key word sign-supported communication system based on a British sign language.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- During the COVID-19 restrictions staff ensured people were not socially isolated. People had been supported to find alternative ways to continue activities and stay in contact with people who were important to them. For example, outdoor cinema screen and ice cream van were brought on site so they could still experience and do the things they enjoy at home. Staff supported people to remain in touch with family through the use of technology.
- Relatives we spoke with described how contact during the pandemic had been personalised to each individual. This included regular phone calls, video calls and sharing videos and pictures, this helped their family member's transition into the service a more positive and inclusive experience.

• People were supported to lead active lives with opportunities to take part in activities they enjoyed.

Improving care quality in response to complaints or concerns

- The provider had a complaints policy and procedure.
- People and relatives were provided with accessible information about how to complain.
- Relatives told us they could approach the management team regarding any concerns and they had no hesitation their concerns would be listened and responded to.

#### End of life care and support

- The provider was not currently supporting any end of life care at the time of our inspection.
- The registered manager told us end of life wishes was to be discussed with people and their relatives to enable people's wishes to be identified and recorded if they or their relatives wished.



## Is the service well-led?

# Our findings

Well-led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

This is the first inspection for this newly registered service. This key question has been rated good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- The provider and registered manager had created an inclusive, person-centred and empowering culture at Smokey Farm. They knew the needs of the people they supported and were passionate about achieving good outcomes.
- Staff were enthusiastic and committed to delivering high quality care. They spoke passionately about how people had choices and how care and support is tailored to their individual needs.
- Relatives found the provider and registered manager to be extremely supportive and found the care services to be exceptionally well-led. Comments included, "We have nothing but praise for the work they do, we chose Smokey Farm for [relative], we wanted them there." Another relative told us, "[Relative] seems happier now than ever been." A further relative said, "The service is well-led [provider] runs a good ship, makes sure things are done properly and disseminates information down to [registered manager] and down [staff team]."

How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- Notifications about specific events were sent to the Care Quality Commission [CQC] and other agencies in line with legal obligations. The registered manager understood their responsibility to be open and honest when things go wrong.
- Communication was open, honest and transparent. One relative told us, "We are most definitely kept in the loop. There are occasions when things happen, as would be expected and they [staff] are proactive informing us about the incident and any actions staff had taken, plus any queries we can ring and they are available."

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- The registered manager and provider had a clear vision for the service to deliver support which enabled people to live as independently as possible, to achieve their goals, and lead fulfilling lives.
- The registered manager was supported by the provider to help manage the service effectively and drive improvements in people's care. They carried out regular audits, checks and observations on staff performance and practice to ensure they continued to provide safe, high quality and compassionate care in line with the company's values.
- Staff were clear about their roles and responsibilities and what was expected of them at work. Staff were

complimentary about the support they received to understand their roles. One staff member said, "They [management] supported me in my role, they [management] didn't push me until I felt confident and competent such as administering medicines." Another staff member said, "Management are amazing, they are supportive through work and personal, you can talk to in confidence." Another staff member said, "Of all the places I have worked this is best, best managers ever had."

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Continuous learning and improving care

- The management team engaged with people in order to continuously improve the service in a variety of ways. For example, an annual questionnaire was sent out to tenants.
- Staff and relatives said they felt valued and listened to. A relative said, "Communication is open, they [management] are approachable, they listen. Any concerns we have are dealt with straight away and measures put in place immediately." Staff described the environment as open and transparent where colleagues work well together as a team and support each other.
- The management team completed a 'You said, We did' for people which demonstrated they had listened and acted on people's ideas and suggestions. Photographs were taken to illustrate changes made.
- Audits and monitoring systems were in place and used effectively to monitor and drive improvement in the safety and quality of people's care.

Working in partnership with others

- The staff team worked closely with external health and social care professionals to ensure positive outcomes for people.
- Relatives told us they feel the service works with them and their family members to achieve the best outcomes for people. One relative told us, "One important factor for us is the closeness of Smokey Farm which means we are able to continue to be able to see [family member] regularly and be an active part of their life."