

Curado Ltd

# Cranleigh Gardens

## Inspection report

1, Cranleigh Gardens, Sutton, Surrey, SM1 3EJ

Date of inspection visit: 12 October 2015

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### Ratings

#### Overall rating for this service

Not sufficient evidence to rate



Is the service safe?

Not sufficient evidence to rate



Is the service effective?

Not sufficient evidence to rate



Is the service caring?

Not sufficient evidence to rate



Is the service responsive?

Not sufficient evidence to rate



Is the service well-led?

Not sufficient evidence to rate



### Overall summary

This inspection took place on 12 October 2015 and was unannounced. This was our first inspection since the service was registered in April 2015. We did not give a rating to the service because there was only one person using the service and this was its first inspection. We did not have enough information about the experiences of a sufficient number of people using the service over a consistent period of time to give a rating to each of the five questions and an overall rating for the service.

Cranleigh Gardens provides accommodation, care and support for up to five people with mental health needs. The aim is to help people to live with more independence in the community and the average length of stay is approximately two years. There was one person using the service when we visited.

The service had a registered manager in place. A registered manager is a person who has registered with the Care Quality Commission (CQC) 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. The person who used the service told us they felt safe with the service they received. We saw there were arrangements in place to help safeguard people from the risk of abuse. The provider had appropriate policies and procedures in place that informed the registered manager and staff as well as people who used the service about how to report suspected abuse.

# Summary of findings

The person living at Cranleigh Gardens had a risk assessment and risk management plans to reduce the likelihood of harm to them. Staff knew how to use the information to keep them safe and work with them positively to help them be as independent as possible.

The registered manager ensured there were safe recruitment practices to help protect people from the risks of being cared for by staff assessed as unfit or unsuitable.

Staff worked with the hospital clinical team to ensure safe medicines management processes were in place for the person living at Cranleigh Gardens. People would be supported to self-medicate when they were able to do so.

The person we met received effective care and they thought staff were well trained and did their jobs well.

Staff had received appropriate training and had a good understanding of the Mental Capacity Act 2005 and the Deprivation of Liberty Safeguards (DoLS). DoLS provides a process to make sure people are only deprived of their liberty in a safe and correct way.

People told us they were encouraged and supported by staff in a way that was helping them to become more independent. They said their aim was to develop their own knowledge and skills to help them with this. One important part of this included eating well and staying healthy. They said that when they needed care and support from healthcare professionals such as the doctor or dentist, staff had helped them access these services.

There was a care plan in place for the person living at Cranleigh Gardens that outlined the goals they wished to

achieve and what support they needed from staff to achieve them. They had expressed their views and they felt they were an important part of the process. Staff monitored their needs and involved them in discussions about any changes that needed to be made to their care plan.

We observed that staff respected the person's privacy and treated them with respect and dignity.

People were encouraged to maintain relationships with the people that were important to them. People important to individuals using the service were made to feel welcome and they were free to visit relatives and friends without restrictions as long as they said where they were going.

The provider encouraged people to raise any concerns they had and responded to them in a timely manner. People were made aware of the complaints policy so they could raise any concerns they might have so these could be dealt with appropriately.

People gave us positive feedback about the management of the service. We found the registered manager and the staff approachable and fully engaged with providing good quality care for people who used the service. The provider had systems in place to continually monitor the quality of the service and to ask people using the service, relatives and health and social care professionals for their opinions via feedback surveys. Action plans were developed where required to address areas that needed improvements.

# Summary of findings

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

We always ask the following five questions of services.

### Is the service safe?

The service was safe. There were enough suitable staff on duty to support people. Staff knew how to recognise and report any concerns they had in order to protect people from the risk of abuse or harm. The provider had taken appropriate steps to protect people from the risks of being cared for by unfit or unsuitable staff through effective staff recruitment.

Risk assessments to do with the person and for the environment were carried out to ensure risks were identified. There were appropriate plans in place to minimise and manage these risks and to keep the person safe from injury and harm.

Medicines were stored and administered safely in conjunction with the hospital's clinical team.

**Not sufficient evidence to rate**



### Is the service effective?

The service was effective. Staff had the knowledge and skills to support the person who used the service. We saw that staff received regular training and support to keep their skills and knowledge updated.

The provider had arrangements to encourage and supported people to become more self-sufficient by developing their knowledge and skills. This included eating well and staying healthy.

Staff had received appropriate training and had a good understanding of the Mental Capacity Act 2005 and the DoLS.

**Not sufficient evidence to rate**



### Is the service caring?

The service was caring. The person we spoke with said staff were kind, caring and supportive.

Staff understood they needed to support people to make decisions about their care. They knew they had to listen to people's views and used these to plan their rehabilitation care and support plans.

Staff respected their dignity and right to privacy. People's relatives and friends were free to visit the home without restrictions.

**Not sufficient evidence to rate**



### Is the service responsive?

The service was responsive. The provider had processes to ensure people's needs were assessed and care plans were in place to meet any identified needs. The plan we saw reflected that person's wishes and choices for both the home and in the community.

**Not sufficient evidence to rate**



# Summary of findings

People were encouraged to maintain relationships with the people that were important to them. The provider supported people to live an active life in the home and in the community.

There were arrangements for people to raise any issues or concerns they might have with either the staff or the manager so these could be dealt with appropriately.

## Is the service well-led?

The service was well lead. Staff told us they thought the service was well managed and they experienced a positive working environment. People's views were sought about the quality of care and support they experienced. The views we saw were very positive about the service. Staff acted on people's suggestions for improvements.

The registered manager carried out regular checks to monitor the safety and quality of the service

**Not sufficient evidence to rate**



# Cranleigh Gardens

## 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.

This inspection took place on 12 October and was unannounced.

This inspection was carried out by a single inspector. We reviewed the information we had about the service prior to our visit and we looked at notifications that the provider is legally required to send us about certain events such as serious injuries and deaths.

We gathered information by speaking with the one person living at Cranleigh Gardens at the time of this inspection, the registered manager, the director and two members of staff. We observed the provision of care and support to the person. We looked at their care records, three staff records and we reviewed records related to the management of the service.

# Is the service safe?

## Our findings

The person who was using the service at the time of this inspection told us they felt staff supported them in a safe way. They said, “I feel safe and very well cared for here.” We observed a relaxed, friendly atmosphere and we saw that staff worked hard to keep this person safe.

The service helped to protect people from abuse. Staff told us they had received all the training they needed to carry out their safeguarding roles and responsibilities safely. They described how they would recognise the signs of potential abuse and what they would do to prevent and report it, if it occurred with people they supported. We saw certificated evidence for those staff whose records we checked for safeguarding adult's training. The registered manager told us if there were any concerns or safeguarding incidents they would report them to the CQC and to the local authority safeguarding teams.

The registered manager showed us a copy of the Pan London safeguarding policy that was available for reference - “Protecting adults at risk; London multi-agency policy and procedures to safeguard adults from abuse”. Staff told us they were required to know the appropriate policies and procedures to help safeguard people, which included; staff whistleblowing, how to make a complaint, and reporting accidents and incidents. They said they had to sign to say they had read and understood them. We saw evidence of this.

A risk assessment and risk management plan was in place for the person living at Cranleigh Gardens so that they were appropriately protected and supported. We saw the care plan and risk assessment had been recently reviewed with the person, staff and the hospital team. There was also an action plan for staff to address the identified risks and to reduce the potential harm to the person or others.

The service had other risk assessments and risk management plans in place to ensure identified risks were minimised so that people and staff were helped to be kept safe and protected. Regular service and maintenance checks of the home and equipment had been undertaken. There was an up to date fire risk assessment, an environmental audit and a quarterly health and safety check to help ensure any risks were identified so they could

be dealt with. We saw records that confirmed what we were told and we saw these had been maintained to date. We observed the home was clean, tidy and kept free of clutter. This meant that people could move safely around the home.

The person we spoke with told us there were enough suitably qualified and experienced staff to keep them safe and to meet their needs. They said, “There are enough staff here to support me.” We looked at the rota and we saw that the staff ratio to people provided sufficient cover to meet the needs of the person concerned. The registered manager told us that when the house was full and if people's needs increased, additional staff support would be provided as required.

Staff files we inspected showed there were recruitment checklists in each file to document all the stages of the recruitment process and to ensure all the necessary steps had been carried out before staff were employed. These included criminal record checks, proof of identity and the right to work in the UK, declarations of fitness to work, suitable references and evidence of relevant qualifications and experience. This showed that the provider had taken appropriate steps to protect people from the risks of being cared for by unfit or unsuitable staff.

The person we spoke with told us he did not self-medicate at this time but received support from staff. Staff told us they administered people's medicines as prescribed and only senior staff were allowed to administer medicines to people. The registered manager told us that the hospital clinical team worked with them to monitor and adjust medicines as necessary. However people were encouraged and supported to self-medicate when appropriate as a part of their rehabilitation programme.

People's medicines were managed so that they received them safely. We found that there were appropriate arrangements in place in relation to obtaining, storing, administering and the recording of medicines which helped to ensure they were given to people safely. All the medicines were safely stored away in a locked medicines cabinet. We looked at the medicine administration records (MAR). We saw they were maintained appropriately. We found no recording errors.

# Is the service effective?

## Our findings

Staff received regular training and support so that they were appropriately skilled and knowledgeable to meet the needs of people and of the person using the service. Records showed the registered manager met regularly with staff to discuss and appraise their work performance, their learning and development needs and any issues or concerns they had about their role. Staff told us they attended regular one to one supervision meetings.

One member of staff said, “I meet with the manager every two to three months for my supervision.” When asked what topics of discussion were included they said, resident’s issues, training needs and any other relevant issues to the work. Another member of staff said, “Access to training is really good, I’ve done a lot of really useful training for the work I do.” We looked at staff records and found training information on all the staff files. There was a list of all training that had been completed, together with certificated evidence. The training provided covered the essential areas of knowledge, skills and competencies that the provider had assessed staff needed to do their jobs effectively. We noted that there was specific training accessed by staff such as for the Mental Capacity Act and mental health awareness. Staff we spoke with understood their responsibilities under the Act and they were able to describe how DoLS provided a process to make sure people were only deprived of their liberty in a safe and correct way. The registered manager told us some of the training was provided in house, some by the London Borough of Sutton and some through e learning.

The person we spoke with told us they made decisions about their everyday life and were asked for their consent. It was clear from speaking with the person and from reviewing their care records that they were actively involved in their rehabilitation programmes and were encouraged to make decisions about their care and

support needs. The aim of the programme of care and support provided at Cranleigh Gardens was to enable people to move on to more independent accommodation and to successfully support themselves wherever possible. The registered manager said that people’s capacity to make important decisions was always discussed at their care planning meetings so everybody involved was aware of the person’s ability to decide on what was in their best interests.

People were assisted in planning their shopping and preparing their meals, so they could have a healthy and balanced diet and so they could learn the skills they would need when they did not have staff support. The person we spoke with said, “I go shopping sometimes on my own and sometimes with staff, who will help me if I need it.” The registered manager said people were encouraged to shop and cook their own food and provided with appropriate support when required. Some meals were also provided. The person we spoke with told us they enjoyed their meals and were pleased to gain the experience they hoped would help them to be able to live more independently in the future. We met a member of staff who told us their role covered doing some cooking but also to provide specific training to do with shopping, cooking and preparing meals. They said they found their role very rewarding as it was good to see people being enabled to learn new skills and to become more self-sufficient and move on into the community.

We were told by the person we spoke with that they were supported to maintain good health and have appropriate access to healthcare services. Care files confirmed they were registered with a local GP and had regular annual health checks. Their health care needs were also well documented in their care plans. We could see any visits or appointments people had with health care professionals were recorded in their health care plan.

# Is the service caring?

## Our findings

The person we spoke with said, “The staff are very caring and supportive to me. I want to get back to living in the community and to work and they are helping me to become more independent so that I can do that.”

When we inspected the person’s care file we saw that comprehensive referral information had been provided by the hospital’s clinical team before they came to live at Cranleigh Gardens. There was also good needs and risks assessment information on the files. Staff told us they were expected to read this information so that they had a better understanding of people, their personal histories, their preferences, their needs and their aspirations. During the inspection we saw the conversations and interactions with staff were warm and friendly yet respectful. Staff knew the person and we could see they used this knowledge to try to build a trusting relationship with them. Staff told us this assisted them engage with people better and to build their self-confidence and to develop strategies that would help them achieve their goals of moving on successfully into more independent living. In our conversations with staff we noted they talked about people in a caring way.

Staff told us that an important part of the rehabilitative programme was to help people to express their views and be involved in making as many decisions about their care and support as possible. The person we spoke with was very able to express their views and said they wanted to work, live in the community and maintain relationships with others significant to them. They knew what they were working to achieve at Cranleigh Gardens.

The care records we inspected showed that where appropriate, family members, partners and other

healthcare professionals had been involved in the planning of their care and support needs. As part of this process the person’s views and preferences had been sought and discussed which meant the care and support they received was reflective of their personal preferences. We saw that advocacy services were advertised on notice boards in the home and were available for people to use if they or their relatives wanted to do so.

We saw that a person’s right to privacy and dignity was respected. Care plans set out how these rights should be supported by staff. This included maintaining the person’s privacy and dignity when their care was being discussed. Staff told us they ensured this was done out of the earshot of anybody else. During the inspection we observed staff asking the person before entering their room. People’s records were kept securely within the home so that their confidential personal information was protected.

The person we saw was supported to be as independent as possible in the home and community. Records showed there was time built into their weekly activities for laundry, cleaning, shopping and any other tasks aimed at promoting their independence.

The person we spoke with said there were no restrictions on them to maintain relationships with others. Their family and friends would visit at anytime. . They said, “As long as I say where I’m going and when I will be likely to be back that’s ok with staff here.” The registered manager said that when the home is fully occupied the intention was to hold regular events at the home such as summer barbeques and other celebratory events and friends and family will be invited to attend and participate.



# Is the service responsive?

## Our findings

We inspected the person's care file who was living at Cranleigh Gardens. They had contributed to the process of their care planning. The care plans we saw identified each person's needs and their short and long term goals. Information was included in their records about what people could do for themselves, their strengths, and how staff could support people to achieve the identified goals. We saw from the daily records how staff actually supported people and we saw this was consistent with the information in their care plans. The care plan that we inspected had been reviewed regularly since the person started living at Cranleigh Gardens.

Copies of reports from meetings with the healthcare professionals and the hospital clinical team involved in the treatment of their mental health were kept in their care records. This enabled staff to be informed of any changes in the person's support needs and to identify progress the person had made since being at the service. We saw from the records there was good joint working with other professionals involved in the provision of care. The community psychiatric nurse from the hospital team we spoke with confirmed joint working was really effective and told us that people were encouraged and supported by staff to undertake various activities and tasks. Records for the person we saw showed they had individual goals and aspirations which had been agreed with them and was aimed at increasing their independence in the home and community. We saw from activity records we inspected people had a varied and wide timetable including courses and adult education classes as well as gym and going for meals out.

The registered manager told us that at the present time with only one person living in the home, house meetings had not yet been held. However a number of people were considering possible placement at Cranleigh Gardens and then there would be house meetings held every six weeks with people using the service. These meetings were designed to give people the opportunity to discuss any concerns they had with the service and a chance to make plans for holidays or other celebratory occasions such as BBQs.

The person we spoke with about raising a concern or making a complaint said they "felt completely comfortable to raise anything with either the staff or the manager." They said, "I am sure things would be listened to properly and dealt with". They were aware of the complaint procedure as they said they had seen it displayed in the hall. We saw it was displayed in the hall so it was clear to people how to make a complaint or raise a concern if they needed to. We reviewed the complaints policy and procedure and saw that it included an appropriate process with associated timescales to be met for a satisfactory resolution of any complaints that were made. The registered manager showed us the complaints log and we saw no complaints had been made since the home opened in April 2015.

They told us if a complaint was made it would be investigated and the complainant responded to within the timescales set out in the policy together with the outcome of the registered manager's investigation.

# Is the service well-led?

## Our findings

The person living in the home at this inspection said, “The home is well led and the staff are really good. I feel very comfortable here.”

Staff told us they had a good and supportive management team and they were able to raise any concerns they had. They told us there were regular staff team meetings and frequent informal occasions where any matters they wanted to raise could be discussed. Staff said the managers worked well with the rest of the staff team and they said there was a very good team spirit that reflected the helpful and supportive culture that existed in the home. Staff told us that this all made working in the home a positive experience for them. New staff members who we spoke with told us they were very well supported in their new roles by the manager and also by their colleagues. They said this had been particularly useful in helping them to get to know their roles and responsibilities more effectively early on in their jobs. Staff told us the managers included them in discussions about this relatively new service and they felt involved in helping the service to progress and develop positively.

Staff meetings were held every six weeks. A member of staff told us, “The meetings are a good way of sharing information with everyone so you all know what is going on and can act in a co-ordinated way.” We viewed the minutes from the last meeting in October 2015. This was used to update staff on the progress of the person living in the home, to highlight staff training achievements, the importance of confidentiality and the involvement of staff with the person’s activities. The registered manager also used staff meetings to discuss any issues or concerns about current working practices and any updates and changes within the home that staff needed to be aware of.

People told us they thought the registered manager listened positively to suggestions made. The registered manager told us they had in the last six weeks sent out

feedback surveys to the person living at the home, visitors, relatives and professionals. All the participants had been asked for their opinions about different aspects of the home and the support and care being provided.

The registered manager said the findings were very positive so far. We reviewed the returns that had been made from the satisfaction survey questionnaires and we can confirm the returns were positive about the service. We saw comments such as “the service is excellent” and “they treat people as unique individuals.” The registered manager said that when all the returns had been received the results would be analysed and any improvements needed would be implemented.

The registered manager undertook other audits to review the quality of the care provided for people using the service. These included a six monthly infection control audit; an environmental risk assessment referred to earlier in this report and care plan reviews that looked at the person’s placement and their needs. This was in order to ensure their care plan objectives remained appropriate to their needs. A quarterly monitoring report was also undertaken that included audits of the health and safety processes and fire safety equipment. The proprietor told us about an additional audit that has been used in the home that involved measuring people’s on-going mental wellbeing. The aim of this to being to measure people’s positive psychological functioning, their good relationships with others and their mental well-being. This has helped the service to more accurately monitor people’s progress in their rehabilitation programme.

No concerns were identified in the audits we viewed, and they showed that the care and support provided by staff was in line with the service’s policies and procedures.

The registered manager ensured that statutory notifications were sent as required. Information was included to do with incidents that required notification to the CQC and the registered manager was clear about what was required to be reported.