

Consensus Support Services Limited

Little Smugglers Barn

Inspection report

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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 

Overall summary

The inspection took place on the 24 February 2015 and was announced. Forty eight hours notice of the inspection was given to ensure that the people we needed to speak to were available

Little Smugglers Barn is a care home for a maximum of five adults with a learning disability and complex needs including mental health, challenging behaviour and epilepsy.

The service had a registered manager. 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.

The experiences of people were positive. People told us they felt safe living at the home. Staff supported them to live independently and helped with their living skills and self care. Staff showed a great understanding about their needs. People were encouraged and supported in daily activities such as going shopping and cooking their own food.

Summary of findings

People had access to and could choose suitable educational, leisure and social activities in line with their individual interests and hobbies. These included day trips and attending a local social club.

People's needs were assessed and care plans were developed to identify what care and support they required. Staff worked with healthcare professionals such as doctors and psychiatrists to obtain specialist advice to ensure people received the care and treatment they needed. People were supported to live as independently as possible.

Residents and staff meetings regularly took place which provided an opportunity for staff and people to feedback on the quality of the service. Staff and people told us they liked the regular meetings. Feedback was sought on a daily basis; the home accommodated five people and this meant they could communicate to the staff throughout the day and raise any concerns if needed. Feedback was also sought on an annual basis via a survey for people and staff.

Staff were aware of their responsibility to protect people from harm or abuse and knew what action to take if they were concerned. They told us they were confident to use the procedures to raise concerns.

We saw there were enough staff to meet people's needs. People were supported on a one to one basis. Staff were kind, attentive and patient when supporting people and treated them with respect. Staff spent time with people and were present in communal areas.

There were systems in place to regularly audit the quality and safety of the service, which were carried out by the homes management team and also a provider's representative to provide management support to the registered manager.

There was an open and vibrant working atmosphere at the service. People, staff and relatives all said they found the management team approachable and professional.

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 processes in place to ensure people were protected from the risk of abuse. Staff were aware of safeguarding procedures and knew what actions to take.

Assessments were undertaken of risks to people and staff. There were processes for recording accidents and incidents. Appropriate action was taken in response to incidents to maintain the safety of people who used the service.

People were supported to receive their medicines safely.

There were appropriate staffing levels to meet the needs of people.

Good



Is the service effective?

The service was effective.

People were supported at mealtimes to access and cook food and drink of their choice.

Staff supported people to attend healthcare appointments and liaised with other healthcare professionals as required.

Staff had the skills and knowledge to meet people's needs. Staff received regular training to ensure they had up to date information to undertake their roles and responsibilities.

Staff had an understanding of and acted in line with the principles of the Mental Capacity Act 2005. This ensured that people's rights were protected in relation to making decisions about their care and treatment.

Good



Is the service caring?

The service was caring.

People told us they felt the care staff were caring and friendly.

People were involved in making decisions where possible about their care and the support they received.

Staff were respectful of people's privacy and dignity.

Good



Is the service responsive?

The service was responsive.

People's individual care needs were assessed and reviewed on a regular basis.

People were supported to take part in activities within and away from the service. People were supported to remain in contact with people who were important to them.

There was a system in place to manage complaints. People felt able to make a complaint and were confident that any complaints would be listened to and acted on.

Good



Summary of findings

Is the service well-led?

The service was well-led.

There was a positive and open working atmosphere at the service. People, staff and professionals all said they found the management team approachable and professional.

Staff were supported by their manager. There was open communication within the staff team and staff felt comfortable discussing any concerns with their manager.

The service had detailed quality assurance and audit processes in place to monitor the quality of the service and make improvements where necessary.

Good



Little Smugglers Barn

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 24 February 2015 and was announced. The provider was given 48 hour's notice because the service had four people living there, we wanted to be sure that someone would be in to speak with us.

The inspection team consisted of one inspector and an expert by experience with experience in learning disabilities. The expert was accompanied by their support worker. An expert-by-experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Before the inspection we checked the information that we held about the service and the service provider. This included previous inspection reports and statutory notifications sent to us by the registered manager about

incidents and events that had occurred at the service. A notification is information about important events which the service is required to send us by law. We used all this information to decide which areas to focus on during our inspection.

During our inspection we spoke with three people who lived at Little Smugglers Barn, one team leader, two support workers and the registered manager. We observed care and support in the communal areas during the day. We also spent time observing people at lunchtime.

We reviewed a range of records about people's care and how the service was managed. These included the care records for five people, medicine administration record (MAR) sheets, five staff training records, support and employment records, quality assurance audits, audits and incident reports and other records relating to the management of the service.

After the inspection we spoke with one relative of someone who lived at the service and one health care professional who worked with the service. This enabled us to gain their feedback and they consented to have the feedback included in the report.

The service was last inspected on 25th November 2013 with no concerns.

Is the service safe?

Our findings

People told us they felt safe at the home. One person said “I am happy and I am safe”.

A relative told us “I have confidence everyone is safe at the home, they have everything in place”.

People were protected from the risk of abuse because staff understood how to identify and report it. Staff had access to guidance to help them identify abuse and respond in line with the provider’s policy and procedures if it occurred. They told us they had received training in keeping people safe from abuse and we confirmed this from the staff training records. Staff described the sequence of actions they would follow if they suspected abuse was taking place. They said they would have no hesitation in reporting abuse and were confident the registered manager would act on their concerns.

Safety notices including how to make a complaint and raising concerns were displayed in both written and pictorial format around the home enabling people to understand what they would need to do if they had any concerns.

We saw there were enough skilled and experienced staff to ensure people were safe and cared for. Staff rotas showed staffing levels were consistent over time. Staff confirmed that there were enough staff to meet people’s needs.

People were supported to receive their medicines safely. Policies and procedures had been drawn up by the

provider to describe how medication was managed and administered safely. Medicines were safely administered by the senior support worker on duty. All medicines were stored securely in a locked medicine cupboard and appropriate arrangements were in place in relation to administering and recording of prescribed medicine. A senior support worker described how they completed the medication administration records (MAR) and how they would support a person if they refused their medication. This description was in line with best practice guidance.

Staff took appropriate action following accidents and incidents to ensure people’s safety and this was recorded in the accident and incident book and reflected in people’s care plans. Individual risk assessments were in people’s care plans and measures in place to try and prevent any accidents or incidents. Any actions or follow ups to an accident or incident were documented. Emergency and contingency plans were in place for any unseen emergencies for example fire or flooding. The plans detailed what route staff would take in such emergency and a detailed disaster recovery plan for each event. Staff all confirmed they were aware of the plans and were to locate them.

Recruitment procedures were in place to ensure staff were suitable for the role. This included the required checks of criminal records, work history and references to assess their suitability. A new member of staff confirmed this was the process they had undertaken before working at the home. This ensured safe recruitment procedures were in place to safeguard people.

Is the service effective?

Our findings

People were supported to have sufficient to eat, drink and maintain a balanced diet. People said the food was good and there were lots of choices. People's diets and preferences were catered for. One person told us that they were having fish for dinner and another person told they were having chicken. People's preferences were recorded in their care plans so support workers could make sure they catered for people's individual needs.

One relative told us "My son has had some difficulties recently with food and the home discussed with us all whether to try gluten free products, which seems to be helping".

A weekly menu was available for people which offered choices and had pictures of food for ease of reference. One support worker told us that people choose daily what they would like to eat and were supported to go shopping and assist with the cooking. People were also supported to go out for a meal.

People were supported to maintain good health and had on going healthcare support. We saw visits from healthcare professionals were recorded in the person's care plan along with any information needed to assist staff. Care plans showed people's current health needs and care records were reviewed and updated to ensure people's most up-to-date care needs were met.

Care staff had knowledge and understanding of the Mental Capacity Act 2005 (MCA) and had received training in this area. People where possible were given choices in the way they wanted to be cared for. People's capacity was considered in care assessments so staff knew the level of support they required while making decisions for themselves. If people did not have the capacity to make specific decisions, the service involved their family or other

healthcare professionals to make a decision in their 'best interest' in line with the MCA. A best interest meeting considers both the current and future interests of the person who lacks capacity, and decides which course of action will best meet their needs and keep them safe.

The Care Quality Commission (CQC) monitors the operation of the Deprivation of Liberty Safeguards (DoLS) which applies to care homes. Whilst no-one living at the home was currently subject to a DoLS, we found that the registered manager had recently submitted applications to the local authority. This was due to the doors having keypads and some people's liberty could possibly be restricted. We discussed this with the registered manager who explained this had been risk assessed and were in place for people's safety. If a person wished to go out they were able to at any time with the assistance of their support worker.

Staff records showed that staff were up to date with their essential training in topics such as moving and handling and challenging behaviour and had all completed an induction which included working alongside an experienced member of staff. Specific training where needed was offered to staff. One staff member told us "I am supporting a person that is using sign language more and more and I have requested further training and will be doing it soon, we do lots of training and can request more if needed".

Staff had regular supervisions throughout the year and an annual appraisal. These meetings gave them an opportunity to discuss how they felt they were getting on and any development needs required. Staff met regularly with their manager to receive support and guidance about their work and to discuss training and development needs. One member of staff said "I have had great support from my manager which has enabled me to develop".

Is the service caring?

Our findings

One relative told us “The staff are very caring, they believe everyone should have fun and ensure people do the activities they would like to do”.

A healthcare professional told us “Personally, I have only ever observed a caring atmosphere where people and staff are respected equally and where participation in decision making is actively encouraged by the home manager.

Staff all felt how person centred the home was and how people benefitted from the support they received. One told us “Every day is different and sometimes challenging but we receive great training and the job is so rewarding, I feel we go above and beyond to ensure people receive great care and support”.

Each person had a ‘daily living skills day’ which was a plan of activities and chores for any particular day. This included cleaning, washing and going food shopping. The person would then be supported to cook a meal for everyone that day. This enabled people to develop daily skills and build confidence. People told us how they enjoyed cooking and shopping for food.

People were aware of their support plans and had involvement in them where possible. Care and support plans were personalised to the individual to facilitate individualised care. Support plans contained clear information about people’s likes and dislikes and what was important to them. We were also shown people’s picture folders, these were scrap books full of pictures and information on what a good day or bad day looked like for them and their circle of support with pictures of people important to them. People created these with their support worker and the registered manager told us how they enjoyed creating their books.

People were treated with dignity and respect. Staff knocked on doors before entering their rooms and closed doors when giving personal care. The atmosphere in the home was vibrant and people looked happy. We observed staff interacting with people in a friendly, respectful and caring manner.

Information for people who lived at the home was displayed in various areas. This included information on activities, menus and how to raise concerns. The information was informative and explained in a way for people to understand which included pictures. On a wall in the hallway was a “think tank” ideas board, this was for people to put their ideas on which could include ideas on changes in the home or what they would like to do. This enabled people to express their views and actively make decisions about their care and support.

In the dining area was a picture of a house with the photograph of the people’s family on the wall. By the picture was a number of small pictures of the house that people could stick on the big picture. Each small house represents one day and we were told It helps people to count how many days to go until they go home to visit their family.

The home had various communal areas including a lounge, kitchen, dining room and a conservatory. The majority of people chose to be in the kitchen/dining room on the day we visited. Staff were observed were supporting people in the kitchen and playing games. People looked happy and enjoying themselves. Staff responded to people when they asked for help and were available for people throughout the observation.

Is the service responsive?

Our findings

People had access to a range of activities and could choose what they would like to do. For example, one person told us, “I like football and we play at the local park when the weather is nice”. A support worker who was sitting with a person told us that they enjoyed going to Gatwick to watch the planes, the person nodded and agreed while smiling.

Each person had a weekly activity plan, and listed a variety of activities to do at the home or in the local community. These included shopping, cooking, attending a local social club and the cinema. People’s interests were encouraged and supported by their support worker. One person told us “I like making cards and selling them”. People also had flexible activity days, this was where they could choose what they wanted to do that day and could be in or out of the home.

One relative told us “I had a meeting with the staff at the home about my son’s bathroom and how it was looking tired and felt a wet room would suit him better. They listened to what we asked and he is currently having a wet room installed”. On the day we inspected we saw works being carried out creating the new wet room.

A health professional told us “The manager and staff have always been swift to respond to any changes in the needs of residents and have requested visits or reviews to address any concerns”.

Support plans included information on maintaining people’s health, their daily routines and how to support them. The plans showed how people wanted to be cared

for and supported. Staff had access to the plans which enabled them to provide support in line with the individual’s wishes and preferences. One support worker said “We involve people in their support plans”.

Daily notes were maintained for people and any changes to their routines recorded. These provided evidence that staff had supported people in line with their care plans and recorded any concerns. We saw staff throughout the day detail information in a communication book. This documented what was happening in the day with people and any changes to their needs or well-being or appointments they had.

People were aware on how to make a complaint or make a suggestion. Around the home were posters for people to remind them how to make a complaint if they wished too, the complaint form was designed in a pictorial format for people to understand. We saw records of complaints and the service had a policy which they worked to. Complaints had been recorded with details of action taken and the outcome. Follow ups to the complaint were in place where needed. This showed there was a commitment to listening to people’s views and making changes where needed in accordance with people’s comments and suggestions.

Staff talked about people’s families and how they supported people to see them on a regular basis. Staff confirmed that families were involved and kept updated on a person. One staff member told us “We have a person who goes to visit their family once a week which they enjoy”. In people’s picture folders were pictures of people’s family with days out and activities they had enjoyed together.

Is the service well-led?

Our findings

A relative told us “There is an absolutely great manager and a fantastic team at Little Smugglers Barn”.

A health care professional told us, “The current manager manages his team of staff well and is approachable and open to new ideas that are in the interests of improving services to the residents and staff alike. He has always been receptive to suggestions or recommendations from professionals and readily listens to relatives if they believe that something is not quite right and tries to work with them to resolve issues”.

People using the service and relatives received a survey annually. This enabled them to share their thoughts and ideas about how the service was run. The most recent survey sent to relatives showed that their responses were positive. A comment included read ‘We are pleased that our son now lives in a fantastic, happy, well run home. Where he is offered a varied, fulfilling quality of life, managed and run by a great team of people’.

There was an open and vibrant culture at the service. Staff and people all told us they were happy to raise any concerns with the registered manager. Staff we spoke with told us how they felt they delivered great person centred care. One support worker told us “My manager is very supportive and we all work together in such a great way”.

Staff meetings took place monthly, where staff could suggest improvements and ideas. Staff said they could approach the registered manager with any issues they wanted to discuss and if they raised a concern it was acted upon.

There was good communication at the service. The registered manager and staff confirmed that handover meetings were an integral part of this communication process. One support worker told us “The communication book is essential, I always read it before I start working to ensure I am up to date with everything”.

We saw that regular audits of the quality and safety of the service were carried out by the homes management team and also a provider’s representative to provide management support to the registered manager. Action plans were developed and followed to address any issues identified during the audits. Performance management systems for staff were in place and the registered manager told us how he had implemented these when necessary. This included observing and working alongside staff to ensure working practices delivered high quality care.

There was a commitment to quality assurance from the registered manager. We were shown the audits that were carried out monthly which reviewed care plans, health and safety, medication and training for staff. We were also shown a ‘first impressions audit tool’ this was used by the registered manager to gain a first impression of the quality of the service. It would be used as a walk around the service and rating the quality of areas such as the gardens, communal areas and exterior of the property. Any improvements that were needed were then addressed.

There were a range of policies and procedures in place that gave staff guidance about how to carry out their role safely. The manager ensured staff had copies and these were signed to show staff had read them. Staff we spoke with knew where to access the information if needed.