

A.Berry Support Services Limited Berrybrook House

Inspection report

230 Derby Road Denby Ripley DE5 8NN

Tel: 01332881682

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Good

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Ratings

Overall rating for this service

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?	Requires Improvement	

Summary of findings

Overall summary

About the service:

Berrybrook House is a care home. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. CQC regulate both the premises and the care provided, both were looked at during this inspection. The service is located in the small village of Denby, Derbyshire which also provides supported living, respite care and day services to young adults with learning disabilities. It is registered to provide accommodation and personal care for up to four people. At the time of our inspection there was one person living at the service.

The service has been developed and designed in line with the principles and values that underpin Registering the Right Support and other best practice guidance. This ensures that people who use the service can live as full a life as possible and achieve the best possible outcomes. The principles reflect the need for people with learning disabilities and/or autism to live meaningful lives that include control, choice, and independence. People using the service receive planned and co-ordinated person-centred support that is appropriate and inclusive for them.

People's experience of using this service:

People received their medicines as prescribed. Staff were trained, and competency assessed to safely administer medicines to people.

Environment risks were managed well.

People were safeguarded from the risks associated with abuse. Risks associated with people's care were assessed and monitored. Plans were in place and followed to minimise risks.

There were enough staff to meet the needs of each person. Recruitment was undertaken in a safe way. Accidents and incidents were monitored and well analysed.

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

Staff were knowledgeable and had received appropriate training and support. People received a balanced diet which met their individual needs and took into consideration their choices.

People were supported by staff who were very kind and caring and who maintained their dignity and privacy and treated them with respect.

Care plans we looked at reflected people's individual needs and preferences. The provider had not received any formal complaints however had a complaints procedure in place. People and their relatives felt able to raise issues if needed.

Audits were in place to ensure the service was monitored but needed strengthening and embedding into practice. Feedback about the registered manager was positive and staff felt well supported.

We made a recommendation to the provider.

People were involved in the service and opportunities to give feedback were in place.

Rating at last inspection: This is the providers first inspection since registering with CQC.

Why we inspected: This was a planned comprehensive inspection based in line with our guidance

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. Details are in our Safe findings below.	Good ●
Is the service effective? The service was effective. Details are in our Effective findings below.	Good ●
Is the service caring? The service was caring. Details are in our Caring findings below.	Good ●
Is the service responsive? The service was responsive. Details are in our Responsive findings below.	Good ●
Is the service well-led? The service was not always well-led Details are in our Well-Led findings below.	Requires Improvement 🤎



Berrybrook House 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 checked 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.

Inspection team:

The inspection was carried out by one inspector.

Service and service type:

Berrybrook House is a care home. People in care homes receive accommodation and nursing or personal care as single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

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.

What we did:

Prior to the inspection visit we gathered information from a number of sources. We also looked at the information received about the provider. Providers are required to send us key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We also spoke with other professionals who had involvement, to gain further information about the service and spoke to the commissioners of the service.

We spoke with two people who used the service and two of their relatives. We spent time observing staff interacting with people. We spoke with four staff including support workers, the assistant manager, registered manager and the director. We looked at looked at documentation relating to two people who used the service, staff files and information relating to the management of the service.

Is the service safe?

Our findings

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

Good: People were safe and protected from avoidable harm. Legal requirements were met.

Using medicines safely

- People were receiving their medicines as prescribed.
- Staff responsible for administering medicines had received appropriate training and competency checks.
- Some people required medicines on an 'as and when' required basis. No protocols were not in place to guide staff as to when these medicines should be given. However, staff knew people very well and were able to identify when people needed their medicines so there was no impact on people. The provider recognised the need for a formal protocol and had started implementing this straightaway.
- The provider gave assurances that best practice guidelines for medicines were being followed.

Assessing risk, safety monitoring and management

• Risks associated with people's care had been identified and risk assessments were in place to minimise them.

- Staff we spoke with knew people very well and knew how to support people to keep safe.
- Environmental risk has been assessed and the provider was carrying out health and safety checks.
- Each person had a personal emergency evacuation plan to ensure they were safely evacuated in the event of a fire.

• Fire safety checks were taking place, but the provider needed to ensure that night time evacuations were completed for all staff.

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of abuse.
- People told us they felt safe. One relative said, "Oh yes [my relative] is safe and thriving there."
- Staff were knowledgeable about what process to follow and what to do if they felt abuse was taking place.

Staffing and recruitment

- Staff were recruited safely, and appropriate checks were carried out to protect people from the employment of unsuitable staff.
- Relatives told us there were sufficient skilled staff available to meet their relative's needs. One relative said, "Yes there are always enough staff around and staff are very competent."

• There were suitable and sufficient numbers of staff always available to meet people's needs, staff worked flexibility to ensure people were supported in line with their assessed needs. .

Preventing and controlling infection

- People were protected by the prevention and control of infection.
- The home was clean, tidy and well maintained.
- Relatives we spoke with felt the home was clean and well presented. One relative said, "Its beautiful and

very quirky. The grounds are very nice and meet people's needs very well. I'm always made to feel welcome by the staff."

Learning lessons when things go wrong

- There had only been a small amount of accidents and incident which were recorded. The provider monitored incidents for trends and patterns.
- Action was taken to minimise the risk of further accidents and incidents occurring.

Is the service effective?

Our findings

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

Good: 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.

• Support plans had been developed with people and their relatives which ensured their preferences and diverse needs were met in all areas of their support.

- People's needs, and choices were respected.
- We spoke with people and their relatives and they felt involved in their care.

Staff support: induction, training, skills and experience

- People were supported by extremely well skilled staff who were trained and supported to carry out their role. Staff were incredibly knowledgeable about people and how to support them in line with their needs and preferences.
- Staff we spoke with told us they received training and had regular one to one meetings with their line manager.

• When staff began employment they completed an induction programme to ensure they had the necessary skills to be able to support people.

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

- People were supported to eat and drink sufficient amounts to maintain a healthy balanced diet.
- People told us that the food was nice and were complimentary. One person said, "The food is good."

Adapting service, design, decoration to meet people's needs

• The premises were suited to people's needs and people were seen to be able to access all areas of the home.

•The home was clean, well decorated and nicely furnished. There were extensive gardens to the property which people could use.

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

• Care records showed people had access to healthcare professionals, where this was needed as part of their support.

• Where healthcare professionals had been involved, their advice was followed.

• People we spoke with and their relatives confirmed the staff had the skills and knowledge to ensure their relative received healthcare when this was needed. However mostly people were supported by their relatives with healthcare.

• There were clear and detailed records in place to support people should they need emergency treatment.

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 with appropriate legal authority. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS).

• We looked at care records and found the service was working within the principles of the MCA, whether restrictions on people's liberty were in place there were authorised DoLS in place.

Is the service caring?

Our findings

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

Good: People were supported and treated with dignity and respect; and involved as partners in their care.

Supporting people to express their views and be involved in making decisions about their care • Relatives told us that their loved ones were able to express their views and opinions and care was centred around their choices.

• The provider made sure people and their representatives were involved in making decisions about their care. People were asked for their views and choices prior to them using the service and then on a regular basis. This meant the support provided to people was tailored at all

times to meet their specific preferences and choices.

• One relative said, " Staff try to build up [relatives] independence and completely understand where [my relative] is with development. Berrybrook is a fantastic place they understand the sensitivity and flexibility of my family. Totally family orientated, home from home."

Respecting and promoting people's privacy, dignity and independence

• We observed staff respecting people's privacy and dignity. They told us the importance of respecting people's privacy by giving them their own space and asking their permission.

One relative said, "You can't buy the expertise that the staff have they instinctually get the people and have a level of respect, they are not treated like children."

• The service ensured they maintained their responsibilities in line with the General Data Protection Regulation (GDPR). GDPR is a legal framework that sets guidelines for the collection and processing of personal information of individuals. Records were stored safely which maintained people's confidentiality.

Ensuring people are well treated and supported; equality and diversity

• We observed staff interacting with people and found them to be exceptionally kind and caring. People we spoke with said they liked being at Berrybrook and were complimentary about the care and support they received.

• Staff understood the importance of supporting people with learning disabilities in communicating their needs and wishes and staff knew people well. information available in picture format was available throughout the home and staff communicated exceptionally well with people.

• Staff were attentive and knew each physical and emotional support needs very well. For example, a person was a little nervous and was new to the service. We observed staff reassuring them and giving them praise and encouragement. This put the person at their ease and it was clear their confidence was boosted.

Is the service responsive?

Our findings

Responsive – this means that services met people's needs

Good: People's needs were met through good organisation and delivery.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control

• People received personalised care which met their needs and took in to consideration their preferences.

• People we spoke with were complimentary about the service. Comments included, "The staff are good." Relatives were able to further describe care, they said, "Transition into adult hood [for my relative] has been helped by the service. I have seen the service build up and naturally progressing, we are so lucky to have found this service that is tailored to people's needs. They [the provider] are totally flexible, and they work so hard, they put their heart and soul into it. It's hard to hand [my relative] over but they are an extended family so that makes it so easy. They are keeping the balance just right."

• We looked at care records and saw they were informative and reflective of the care and support being delivered.

• People who used the service enjoyed a variety of activities which were flexible to meet people's needs. Activities included, life skills sessions such as cooking, baking and independent living skills, Leisure facilities such as swimming and yoga and various other projects such as gardening and social activities.

• Relatives said the varied choice of activities suited their relative. They said, "They continue to support, develop [person's] life skills and independent living skills. Having this service available has given [person] confidence through being in the right service. [My relative] is also not nervous about trying new things. [Person] trusts them because they have built on [person's]confidence and level of trust. We are able to transfer his skills at home, they are working to him having max levels of independence."

Improving care quality in response to complaints or concerns

• Relative's told us they were confident to speak to staff if they were unhappy about anything. One person said, "I have raised things and I'm the sort of person to check things out, the manager gets where I'm coming from. I'm confident that anything I would raise would be handled. If anything goes wrong I could talk to any of the staff."

• We looked at the record of complaints and found there had been no formal complaints made.

• The provider had a policy in place. The policy was amended following our inspection to highlight who a complainant should go to if their complaint had not been satisfactorily handled.

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

Requires Improvement: Service management and leadership was inconsistent. Some regulations may or may not have been met.

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

• At the time of our inspection there was a registered manager in post. A registered manager is a registered person. 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.

• The registered manager was supported by an assistant manager and the director. This service was being built by everyone working together. Everyone had a shared vision of delivering a bespoke service, which we found to be the case during our visit.

• The management team had opened and developed the service after working for many years in children's education, they were incredibly skilled and knowledgeable. Many of the people who used the service had been supported in school and through transition by the staff into adult services.

• However, the management team needed to further strengthen their knowledge and understanding of legislative requirements and best practice for adult social care, but they had a good basis of knowledge which they had transferred from their experiences of working in education.

We recommend the provider seeks to further their knowledge and understanding of the legislative requirements of the Health and Social Care Act and best practice guidance in adult social care.

•The registered manager was in the process of completing a qualification which would support them in their role and ensure they were up to date with legislation and best practice.

• Staff we spoke with were clear about their roles and responsibilities.

• People we spoke held the staff and management team in high regard. Their comments included, "I can't believe how lucky we are. I hope more unique services like this open, they work hard and the reflection of their hard work is the level of independence seen in the people who use their brilliant service." Another person said, "They take a great amount of time and effort to get things right, to me that's good leadership."

Continuous learning and improving care

• We found some minor shortfalls in the delivery of the service. Audits needed to be strengthened and embedded into practice to ensure all areas of the service were monitored.

•The management team gave assurances that they had acted promptly on recommendations from visiting authorities, such as, fire services and commissioners. We saw they had completed an action plan to evidence how they were making improvements, and this showed that action had been taken promptly.

Engaging and involving people using the service, the public and staff, fully considering their equality

characteristics

• Regular team meetings took place to ensure everyone was aware of the services changes and improvements.

• Staff were fully able to fully explain that the services visions and values were to be a family orientated support service providing a calm and safe environment.

• People and their relatives told us they were provided with opportunities to share their views about the quality of the service. One person said, "Totally happy can't imagine [my relative] being anywhere else. This service is an extension to our family. They're effortless to work with [my relative] been in a brilliant place due to support from Berrybrook House. I can't speak highly enough; the staff are well trained with lots of experience. [My relative] is so comfortable I don't think we could be happier. Another person said, "I can't believe how lucky we are, hope more unique services like this open, they [the staff team] work hard and the reflection of their hard work is the level of independence seen in the people who use their brilliant service. Berrybrook is a fantastic place they understand the sensitivity and flexibility of my family. Totally family orientated, home from home, will push people to achieve their maximum potential. The vibe is lovely and relaxed."

Working in partnership with others

• The service worked in partnership with professionals to ensure the health and social care needs of people were met. One professional said," I feel [Berrybrook House] offers a bespoke service, whereby staff meet the needs of the service users rather than the service users having to 'fit in with them', offering a person-centred service. I have had several young people who Berrybrook have supported and can confidently say they provide a safe and welcoming environment, provide opportunities for individuals to pursue their own interests and support young people to develop and build skills for the future."