

The Disabilities Trust

# Disabilities Trust - 128 Beech Hill

## Inspection report

128 Beech Hill  
Haywards Heath  
West Sussex  
RH16 3TT

Tel: 01444455448

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## Ratings

Overall rating for this service

Outstanding 

Is the service safe?

Good 

Is the service effective?

Good 

Is the service caring?

Outstanding 

Is the service responsive?

Outstanding 

Is the service well-led?

Outstanding 

# Summary of findings

## Overall summary

Disabilities Trust 128 Beech Hill is a service registered to accommodate up to four people who require support with personal care. They specialise in providing support to younger adults with autism and a learning disability. On the day of the inspection there were four people using the service who required minimal support with personal care. The accommodation is provided in a semi-detached house located in a modern housing estate in Haywards Heath near to local shops and bus routes. There is one bedroom on the ground floor with the other three located on the first floor which is accessed by a flight of stairs. There is a secure rear garden and off road parking to the front of the property.

This inspection took place on the 15th May 2017 and was announced. This was because the service is a small service and we needed to make sure people would be in when we arrived. It was also so that the provider had time to arrange for sufficient numbers of staff to be deployed on the day to facilitate the inspection without disrupting people's daily routines.

At the last inspection on 5 May 2015 the service was rated Good.

The service has a registered manager. 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 service had an extremely positive culture that was exceptionally person-centred, open, inclusive and empowering. Staff went the extra mile to share information with people and provide explanations in a way that empowered them to make informed decisions and become more independent. One person told us "I make my own choices, I decide what I do". There was a strong emphasis on team work and communication sharing. The registered manager and staff had a 'can do' attitude and were solution focussed. One relative told us "Staff are brilliant, they have good ideas, useful one's, they have a lot of empathy and get things done. I've no concerns".

The service was exceptionally well led. Staff were enthusiastic and happy in their work. They felt supported within their roles and held the management team in high regard, describing a management approach, where managers were always available to discuss suggestions and address problems or concerns. A social care professional told us "It's very, very well organised. They are excellent and go beyond what they're supposed to do". A staff member told us "I love working here. I've learnt a lot and developed my career. (Line manager's name) is very approachable the management is good".

Staff had a common aim and purpose to achieve positive outcomes for people. They excelled at providing consistency which had a positive impact on people's wellbeing, reduced their anxiety levels and provided stability. A relative told us "Consistency is the key and they do that well". A staff member told us "We work well as a team, it works like clockwork. We provide consistent support; this is a very settled house". Another

staff member commented "I love it here, really good continuity of care and a rewarding job and great support".

People mattered and the care was exceptionally personalised. Each person had a trusted member of staff, known as a keyworker, who took a lead role in each person's care and wellbeing. They continuously looked for ways to ensure people had positive experiences and led fulfilling lives. Staff knew about people's lives, their interests and talents and encouraged them to become more independent and try new things.

Information was shared and explanations given to people to help them form their own opinions and make their own choices and decisions. People were fully involved in every aspect of the day to day running of the service from cooking and cleaning to decorating and completing safety checks.

The management team were approachable and flexible and embraced staff ideas and suggestions. Relatives and staff told us they were happy to raise any concerns and that management and staff worked well together.

People and their relatives were involved in the planning and reviewing of their care and discussed and shaped the activities they wished to take part in. One person told us "I make my own choices, I decide". People were supported to take part in a wide range of activities that were meaningful to them and which they enjoyed. A relative told us "It's great they've got (person's name) making things, it's an excellent achievement". People had been supported to create scrap books to document their achievements, holidays and trips out.

The staff we spoke with were aware of their role in safeguarding people from abuse and neglect and had received appropriate training. We saw risk assessments had been devised to help minimise and monitor risk, while encouraging people to be as independent as possible. Staff were very aware of the particular risks associated with each person's individual needs and behaviour.

Medicines were managed safely and in accordance with current regulations and guidance. There were systems in place to ensure that medicines had been stored, administered, audited and reviewed appropriately.

Recruitment practices were robust and new staff received and induction to the service which included shadowing experienced staff before working unsupervised. Staff received the training and support they needed to undertake their role.

The registered manager was aware of their legal responsibilities and kept up to date with good practice. They had formed links with the local community such as schools and colleges where they had given presentations to raise awareness of supporting people with autism. Accident and incidents had been recorded and monitored to identify trends and themes. Records had been audited and where gaps had been identified action had been taken to rectify this.

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

We always ask the following five questions of services.

### Is the service safe?

Good ●

The service was safe.

Staff were trained in how to protect people from abuse and knew what to do if they suspected it had taken place.

Staffing numbers were sufficient to people received a safe level of care. Recruitment records demonstrated there were systems in place to ensure staff were suitable to work within the care sector.

Medicines were stored appropriately and associated records showed that medicines were ordered, administered and disposed of in line with regulations.

Risks were managed in the least restrictive way.

### Is the service effective?

Good ●

The service was effective.

People were supported by staff who completed training to meet people's needs. Staff were supported to develop in their roles.

Staff worked in accordance with the Mental Capacity Act 2005 and Deprivation of liberty safeguards were applied appropriately.

People were supported to eat a healthy diet and access health care support when needed.

### Is the service caring?

Outstanding ☆

The service people received was exceptionally caring.

Staff went the extra mile to provide explanation to people, support them to become independent, make their own decisions and take charge of their own lives.

People were treated with kindness and compassion by staff who put people's wellbeing at the heart of everything they did. People's privacy and dignity was respected by staff with whom

positive relationships had been formed and who promoted their individuality.

People benefited from staff who provided consistent care and supported people to reduce their anxiety levels and promoted their wellbeing.

People were involved in their care and support and empowered to make their own decisions.

### Is the service responsive?

Outstanding 

The service was exceptionally responsive to people's individual needs.

The service was exceptionally flexible and responsive to individual's needs and preferences, and found innovative and creative ways to enable them to live life to the full. They were supported to access the community and follow diverse hobbies and interests. The support received promoted positive care experiences and enhanced their wellbeing.

People and their relatives were consulted about their care and involved in developing their support plans. Detailed plans outlined their care and support needs. Staff were knowledgeable about people's support needs, their interests and preferences in order to provide personalised care.

People knew how to make a complaint if they were unhappy with the service.

### Is the service well-led?

Outstanding 

The service was well-led.

The registered manager and staff were passionate about providing a high standard of bespoke care for people.

People were looked after by staff who were committed to providing a high standard of care. Staff shared the provider's vision and values to ensure people benefitted from the best possible person centred care.

Staff and relatives spoke highly about the management team and the service being delivered to people.

There was an effective quality assurance system in place to

ensure any improvements needed within the service were identified and the necessary action was taken to implement change.

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# Disabilities Trust - 128 Beech Hill

## **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.

This inspection took place on the 15th May 2017 and was announced. This was because the service is a small service and we needed to make sure people would be in when we arrived. It was also so that the provider had time to arrange for sufficient numbers of staff to be deployed on the day to facilitate the inspection without disrupting people's daily routines.

Before the inspection, we reviewed information we held about the service. This included previous inspection reports and notifications. A notification is information about important events which the service is required to send us by law. The provider was not asked to complete a Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make.

We spoke with three people who used the service, the registered manager, deputy manager and five members of staff. Following the inspection we spoke to two people's relatives and one social care professional involved in the care of one person.

We observed the support staff provided to people in the communal areas and also looked at the care and support plans for four people, the medication records for two people, three staff recruitment files, staff meeting minutes, minutes of residents meetings and resident discussion groups. We also looked at accident and incident records and records relating to the day to day management of the service and quality assurance audits.

# Is the service safe?

## Our findings

People were protected from harm and kept safe. A relative commented "Oh I do think people are safe. I was a bit worried about the main road, but they've made no attempt to run across it. They are always accompanied everywhere and that's important because they wouldn't be able to find their way home. I think they are completely safe". Another relative told us "Yes I think they are safe". A staff member told us "We're here to help keep people safe".

People were protected from the risk of abuse. The provider had systems in place to help protect people from potential harm. Staff knew what action to take if they had any concerns and how to protect people from abuse and avoidable harm. They had received regular training in keeping people safe from abuse and this was confirmed in the staff training records. Staff told us they would have no hesitation in reporting abuse and were confident that management would act on their concerns.

Robust risk assessments were in place for people which considered the identified risks and the measures required to minimise any harm whilst empowering the person to undertake the activity. We were given examples of people having risk assessments in place to use facilities and equipment such as the use of power tools and preparing meals. Risks associated with the safety of the environment and equipment were identified and managed appropriately. One person showed us photographs of themselves wearing protective gloves and safety goggles while making garden furniture and told us "I used the jig saw I wore gloves and safety goggles". There was a business continuity plan which instructed staff on what to do in the event of the service not being able to function normally, such as a loss of power or evacuation of the property. People's ability to evacuate the building in the event of a fire had been considered and where required each person had an individual personal evacuation plan. Water temperatures were tested to ensure they were within the recommended temperature ranges to prevent scalding and cleaning products and medicines were stored in locked cupboards.

Staff took appropriate action following accidents and incidents to ensure people's safety and this was recorded. This information was also analysed for any trends and any follow up action to prevent a reoccurrence was updated on the person's care and support plans and shared with staff.

There were sufficient care staff available to meet people's individual needs. The provider had systems in place to monitor people's level of dependency and identify the number of staff needed to provide people's care safely. Relatives and staff told us and records confirmed staffing levels were maintained. People were seen to be well supported and we saw good examples from care staff where people were provided and assisted with care promptly when they needed it. Staff told us and records conformed that staff duty rotas were flexible and managed around the needs of people and their activity schedules ensuring that people had the support they needed when they needed it for example for trips to the cinema in the evening and to accompany people to healthcare appointments. One staff member told us "Generally people don't go out of night but extra staff would be brought in if people did want to go out in the evening. There's a trip to the South of England Show coming up and most people will want to stay there for the day so we'll change the times of the staff shifts for that". another staff member told us "We have a stable staff team. There is always



enough staff. The good thing about this house is if we are short staffed we can be flexible".

People were protected by safe recruitment practices. The provider had a recruitment policy in place to help ensure that correct checks would be completed on all new staff. Records confirmed these procedures had been followed. The service also had a probationary period in place and a disciplinary procedure, which could be used when there were concerns around staff practice.

People had received their medicines safely and as prescribed. Medication had been administered, stored safely and recorded in line with the service's medication policy. Regular audits had been completed and staff had attended medication training and received regular competency checks. Where errors had been identified, action had been taken to minimise risks to the person and minimise future risks.

## Is the service effective?

### Our findings

People were supported by staff who had the skills experience and support to enable them to provide effective care and support with their health and dietary needs. Relatives told us they had confidence in the staff team who provided consistent support. One relative told us their loved one was "Supported very well" and commented "The staff are very good and understanding. They've had the same staff for quite a while now which I think is pretty good. I think their consistency is excellent".

People were supported by staff who received the training and support needed to deliver safe and effective care. Newly recruited staff completed an induction which included completing training and shadowing experienced staff. This helped new staff to understand how the service works and also gain information about people and their care needs prior to working unsupervised. New staff were also required by the provider to complete the Care Certificate which is an industry recognised qualification and induction process into care. One staff member told us "All the training is good. Some of it is on line and some of it is face to face. I did medication training last week that was face to face. I shadowed staff for three or four shifts before I worked on my own but I knew the people here already. The induction was really good and covered everything I needed to know". Another staff member of staff said, "It's a great place to work, everyone's supportive to one another".

Staff confirmed they received regular training and support through supervision meetings with their line manager and team meetings. One staff member told us "It's nice to have half an hour to stop and have the opportunity to be honest about stuff and give your views". They felt they had the knowledge and skills to carry out their roles and responsibilities as a care worker. They had also been provided with specialist training relevant to the people they provided care and assistance to such as training in how to support people with autism.

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 so that they can receive care and treatment when this is in their best interests and legally authorised under the MCA. The authorisation procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS). We checked whether the service was working within the principles of the MCA and whether any conditions on authorisations to deprive a person of their liberty were being met. We found that the management team had a good understanding of MCA and DoLS and had made appropriate referrals to the Local Authority. People's capacity to make day to day to day decisions had been assessed and documented within their care and support plans to help ensure they received appropriate support. Staff demonstrated an awareness of these assessments and confirmed they had received training in MCA and DoLS.

People continued to be supported to have sufficient to eat and drink and maintain a balanced diet. People's nutritional requirements had been assessed and their individual needs, including their likes, dislikes and

dietary needs were documented. Staff had a good understanding of each individual person's nutritional needs and how these were to be met.

People were supported to maintain good health. They had access to healthcare services and received annual health checks and medication reviews. The provider had its own contracted psychiatrist and psychologist to support people and records showed us how they liaised with NHS services to enable the person to have 'joined up care'. Each individual had a detailed health action plan and staff liaised with professionals and families to ensure they responded to every health need for example; one person attended a routine appointment and blood test and it was discovered they had raised cholesterol and was advised they required medication and dietary support to reduce this. Staff told us how they sat down with the person and explained what this meant and how the staff team could support them. As a result of this the person decided to change their diet as advised and this was fully documented within their support plan.

## Is the service caring?

### Our findings

People were supported by kind and caring staff who knew them extremely well and who were exceptional at helping people to express their views, so they understood things from their point of view. People were encouraged to be as independent as possible and empowered to take responsibility for their own lives and make their own decisions. One relative told us "The staff are very helpful in supporting them to be independent. They used to be very anxious before, but not so much now". Another relative told us "They take the time to motivate (person's name); that is not an easy task, but they manage it. It's quite an achievement to get (person's name) to partake in the things they do, an excellent achievement in fact. I feel (person's name) is supported very well. The staff are very good and very understanding". A staff member told us "People do their own thing. We're here to help with anxieties".

Staff went the extra mile to share information with people and provide explanations in a way that empowered them to make informed decisions and become more independent. One person told us "I make my own choices, I decide what I do". People told us they had weekly 'discussion groups'. Staff explained these were short group sessions which provided a forum for people to discuss things that were important to them, both as individuals and as a group. A member of staff told us "We help with the agenda, but it's their meeting, they take the minutes and sort out the drinks". People and records confirmed this and one person told us "We have discussions; (person's name) is in charge of the drinks". Another person told us "We have meetings once a month about things we want to do, plus we have the discussion group every Wednesday. They're lovely. (Person's name) buys the biscuits". A staff member explained because the discussion groups were more informal than the monthly residents meetings, people found it easier to give their views and contribute to the discussions and commented "We've found out all sorts of things about people we didn't know and things they'd like to do". The registered manager explained this in turn had helped them identify things people were interested in and areas in which people could further develop their skills and independence. They commented "We are always looking for things we can do to progress people." A relative told us "They listen to us and to (person's name) and see things from their point of view".

The registered manager explained the process of providing explanations to people in a way they could understand was continuous and commented "There is so much information out there that no one's ever explained to people. It's a continuous process, like items on the news and voting". They told us how they had explained to people what 'Brexit' meant and broke down to people what the choices were and supported them in the voting process. People had been provided with information and explanations to help them have a better understanding of their personal safety in their day to day lives for example; fire safety and good food hygiene. One person showed us a notice board in a communal area of the service which had easy read information in relation to people's safety and safeguarding on display. Easy Read information is sometimes called 'easier information' or 'simple words and pictures'. It is a way of making information easier to read and understand for people with learning disabilities.

Staff told us how one person found paper work of any sort stressful. They explained this meant reviewing their support plan with the person and talking about it was difficult for them. In order to help them overcome their anxieties and gain a better understanding of what support plans are and why they are

important, they had supported the person in writing a support plan for the house pet. The person showed us the support plan which had been printed out, laminated and hung on the wall by the gold fish bowl and told us "I did the support plan for the fish. I have a support plan, what I like and dislike. It's important so we know what the fish needs, how to look after it and keep it safe". We saw that the support plan covered the same areas as people's support plans did such as the environment (where we live), daily routine and personal care needs. Staff told us following this they had started to review the person's likes and dislikes paperwork from their support plan with them. They explained they had taken out the relevant paperwork from the support plan to make it less daunting for the person and told us that this had gone well. They commented "We are going through the care plan bit by bit at an easy pace. I wouldn't take the whole thing down to them as this would affect their day even their whole week. It's a big thing for them paperwork, we need to reassure them there is nothing harmful in it, but they worry about what is written about them. It's a big long term goal to give them the confidence with care and support plans". They also explained they had plans to introduce a different format for this person's support plan to make it more accessible to them. In the mean time they were establishing the person's views on their care through talking to them and updating the paperwork afterwards, so not to cause them any distress. Another staff member told us "We are trying to get more co-operation from people into their support plans. We go through different section each month. We are getting there; getting people more involved in writing their own care plans".

Staff continually supported people to develop, increase their independence and take more responsibilities for their own lives. Staff were supporting one person to improve their understanding of the concept of saving money. This person told us they were saving up to buy an item they wanted, and that they were "Putting money in a tin" and when they had enough they would buy the item themselves. Staff told us this meant the person was taking responsibility for saving for this item, rather than asking their parents for money for the item as they would have done previously. They explained the long term plans were for this person to hold their own bank card, but that this was 'the first step'. The staff told us another discussion had been around 'Five a day'; what it is and why it is important. They told us as a result of this one person had decided to swap a bag of crisps for a pot of strawberries and grapes. They commented "It's great they made that decision themselves with no prompting at all from staff; we just provided them with the information".

People's well-being was at the heart of the support they received from staff. The registered manager explained that one person was anxious around managers and found relationships with management difficult. They told us in order to help this person overcome their anxieties, they were having one to one 'coffee' meetings with them away from the service, so they could get to know each other better and give the person the opportunity to talk about things that may be worrying them in a relaxed and informal setting. The registered manager told us the last meeting had gone really well and that the person was far more relaxed around them and other managers than they used to be. They told us that the person had invited the registered manager to their birthday party, but as they scheduled to be at a meeting in another part of the country they had been unable to attend. The registered manager explained that being invited to the party was in itself a big step forward for this person, so to avoid letting them down and damaging the relationship they had built, all the managers and directors of the division who were at the meeting, sang happy birthday via video link instead. Records showed that this person had said "I really enjoyed the party. I want to say thank you for all the managers singing happy birthday to me it was very nice of them". People were supported to maintain relationships with people that mattered to them. Relatives confirmed there were no restrictions on when they could visit or call and it was evident from people's scrapbooks, photographs and conversations we had, that people were supported to stay in touch with their friends. People were supported to attend social clubs, visit friends, go on outings with them and invite them to events at the service.

Staff had a common aim and purpose to achieve positive outcomes for people. They excelled at providing

consistency which had a positive impact on people's wellbeing, reduced their anxiety levels and provided stability. It is particularly important for people with autism to receive consistent support from staff as this helps them to feel secure and lower their anxiety levels. Inconsistent care and responses can lead to people with autism feeling insecure, heighten anxiety levels and can be a trigger for challenging behaviour. We observed staff consistently provided one person who was feeling anxious with reassurance. This person repeatedly asked staff members the same questions throughout the day and each staff member gave the same answer and level of reassurance. Staff told us and we saw that this person's anxiety levels were raised before staff handover. We heard this person asking staff "Are you going to give me a good handover? I don't want to get a different answer that is what I'm worried about". Staff explained "They are a worrier and have a fear of handover and being told off". The registered manager explained the importance of this person receiving a consistent approach and told us that it was part of the person's make up to ask the same questions and continually seek reassurance that they wouldn't get a different answer from staff. They told us that if they did get a different answer or response from staff this could lead to the person's anxieties rising and lead to them feeling insecure and anxious and that everything they had been told may not be true. Each staff member the person approached gave the same reassurances to the person reinforcing to them that there was nothing to worry about. It was evident that this consistency had a positive impact on this person, because we saw that once they had asked each staff member the same question, their anxiety levels lowered, they then became more relaxed and started to laugh and joke with the staff.

Staff provided outstanding support for people with their anxieties and showed empathy and compassion. We saw one person who was feeling particularly anxious that day put out their hand to a staff member they were sitting next to. The staff member responded by holding this person's hand and it was evident that the person took comfort from this. Due to another person's condition they could, at times when they were feeling anxious, put inedible items in their mouth and chew them. Staff explained they had obtained some 'chewellery' for this person. Chewellery are items of jewellery specifically designed to be able to be chewed safely. They told us and showed us support plans and risk assessments that they followed to support this person when they were feeling anxious. These had been written with the person and agreed by them. Records showed that on some occasions this person requested the chewellery. On other occasions staff had recognised the person was feeling anxious and had asked the person if they would like their chewellery. They told us that using chewellery allowed the person to fulfil their need to put items in their mouth, and take comfort from this activity, without placing themselves at risk by chewing inedible and harmful items in their mouth. Staff monitored another person's moods, wellbeing and anxiety levels when their medicines were reduced. They had sought advice and guidance from the person's psychologist as to how the reduction in medication may affect the person and took care to check with the person how they were feeling throughout this process and how the reduction of medicines was affecting them.

People were consulted and involved in decisions about their care. Each person had a key worker who co-ordinated their care, and looked after their wellbeing. They reviewed and updated each person's care plans with them regularly. People were supported to express their views about their care and support. Everyone had relatives involved in their care reviews and decisions on care. The registered manager told us if someone did not have access to family or friends that could support them, they would arrange for an advocacy service to offer independent advice, support and guidance to individuals.

There was a strong emphasis on involving people in every aspect of the day to day running of the service. People were involved in choosing and preparing their own meals, cleaning their own rooms and the communal areas of the service and doing their own laundry. One person told us "I do the cooking, mopping and all that; I do the recycling, dusting and the washing up". Another person told us "I'm cooking chicken stir fry. I picked the food. I did the shopping I went to the supermarket to get it". One person was assisting fire safety checks such as checking the fire panel. People also had a better understanding of why it was

important to take the temperature of cooked food and of good infection control measures. One person told us "I mop the floor and clean the kitchen. It's important; keeps us safe". Another person told us that the PAT (portable appliance tests) were due in August and commented "I can get it done in August before I go away. It's all in date, everything is working well". In addition to this the development plan for the service over the next 12 months included the intention to 'develop audits for health and safety which empower service users to take the lead in monitoring the safety for their own home. People were also involved in the recruitment of staff. It was evident that people felt included in this process and that their views of prospective staff mattered. People told us they had the opportunity to meet prospective staff and ask them their own questions. One person told us they had asked "Will you be working full time or part time?" They also asked "Do you like to pull chains". This gave people an opportunity to gain insight into the prospective staff and prospective staff to gain insight about the people they would be supporting. People and told us following the interview people were given the opportunity to give their views on prospective staff as to whether they felt they would make a good support worker.

Staff demonstrated a strong commitment to providing good care. They knew people well and had a good understanding of how best to support them. They gave us examples of people's individual personalities and character traits. They were able to talk about the people they cared for, their personal history, what they liked to do and the activities they took part in. One member of staff told us "I love it here, really good continuity of care and a rewarding job and great support. There is a great sense of team work with good communication. Getting to know the people who use the service is key. Helping them to live as independently as possible with as few restrictions as possible". It was evident that although people were able to communicate verbally that knowledge of the person was key to understanding what they were trying to communicate. Staff supported our conversations with people and provided explanations as to why people said certain things at certain times. Without this insight it would not always have been possible for us to understand what some people were trying to tell us. People were observed to be relaxed with staff, sharing jokes and laughing together. They were seen to be happy and comfortable with the support provided and staff were kind and caring in their approach.

Peoples' differences were respected and staff adapted their approach to meet peoples' needs and preferences. Staff told us they always escorted people to their chosen activity, but "It depends on what people are doing on the day and their anxiety levels whether we stay with them or not. (Person's name) sets their own agenda. On a good day they could be out from morning until night, on others they won't come out of their room. It's mood dependant whether they will socialise or not, so we have to take things day by day and adapt to how they are feeling". People were able to maintain their identity; they wore clothes of their choice and could choose how they spent their time. One member of staff told us, "(Person's name) wears shorts from 1 May to the 30 September, that's what they do every year". This person confirmed this to us and commented "Shorts now. Trousers from 30 September".

People's diversity was respected and their bedrooms were personalised to reflect their own interests. One person's was full of their belongings and collections of items that interested them. Another person's room contained photographs of their family members and a map of the world which reflected their love of world travel. Staff told us the room of another person who did not wish us to see their room, reflected their love of music and that their person had a fridge in their room containing their own drinks and snacks.

Peoples' privacy was respected and consistently maintained. Staff knocked on people's doors and waited for people to open the door and invite them in before entering the room. They asked people if they would like to show us their rooms and respected the decision of two people who did not want to. Relatives confirmed that they felt that staff respected their privacy and dignity. Staff were polite and courteous when interacting with people and information held about people was kept confidential by being stored in locked

cupboards and an office. Staff were mindful of not discussing people's care in front of others.



## Is the service responsive?

### Our findings

People received care which was extremely person centred and responsive to their needs. They were supported and fully engaged in activities that were meaningful to them. Staff showed genuine interest in people's wellbeing and went to extraordinary lengths to support people to pursue their interests and celebrated their achievements. Staff continuously looked for ways to improve care, so people had positive experiences and led fulfilling lives.

There had been group discussions with people that had led to 'House projects' where people had taken responsibility for making decisions and played an active part in the project. One such project was the decoration of the lounge. Staff explained how people had been fully involved in every stage of the planning and decorating, from choosing the colour, moving furniture, to painting the walls without any additional support from the maintenance team. People we spoke to confirmed this. When we asked one person about who decorated the lounge they told us "We did. We chose the colour; meadow green. (Staff member's name) put the paint in the tray and we put the roller in and put it on the walls. We all did it". People were proud to show us a house project scrap book which detailed the plans they had made about how they would complete each stage of the project and had been illustrated with photographs of people undertaking the work. One person's relative told us "When I was told (person's name) had taken part in decorating the lounge I found it hard to believe. It was so out of the ordinary, I've never known them to go anywhere near a paint brush before. In fact I didn't believe it until I saw the photos".

The registered manager told us when people had been told they would no longer be able to use a woodwork workshop facility at one of the providers other premises, people had been very disappointed. They explained a member of staff had suggested 'Why not have our own workshop?'. They told us how people, staff and the provider had embraced this idea, a shed and equipment was bought and everyone had been involved in choosing, buying and painting the shed and using the wood work tools to make garden furniture which people painted themselves. Staff had also supported people to make their own items. One person showed us a cabinet they had made to display items they collected and a dolls house which was an item they had always wanted. Staff told us another person had made a clothes rail which they took pride in and used every day, whereas before they had shown no interest in hanging up their clothes. One person told us they had made a farm for their nieces and wanted to make a chess set. One person's relative told us "I was absolutely thrilled to hear about this. (Person's name) is very creative and loves to make things, it's great they are able to do this". Another person's relative told us "It's great they've got (person's name) making things, it's an excellent achievement".

Staff had an excellent understanding of people's backgrounds and supported people to pursue their interests and hobbies, try new things and learn new skills. Through discussion with people about the activities they liked and the activities they would like to try, it was identified that two people had a shared interest in going camping. Staff supported these individuals to source and borrow some camping equipment and plan a camping holiday to see if they liked it, which they did. Following this staff supported the individuals to think about what they could do themselves to raise money to buy their own camping equipment and they decided to do a sponsored walk. Staff supported the individuals in arranging online

sponsorship forms, advertising the event, planning and completing the walk. This too was a success and they told us they were looking forward to their next 'camping adventure'. One person showed us with pride photographs documenting their sponsored walk and camping trip and told us about the day trips out they had enjoyed while they were there. They told us "I went on the camping trip. Zippy was in the tent we had hot dogs and chocolate biscuits. We like it". One person's relative told us their loved one was also looking forward to going camping later this year.

Some topics of the weekly discussion group were based on subjects that were important to people, such as the arrangements for Christmas. From one such discussion it was evident that people wanted to have a Christmas party, so staff supported them to arrange one and made sure that things people had said at the discussion that they enjoyed most about Christmas were incorporated into the plans. People were also fully involved in preparing for the party, for example by decorating the house and helping to prepare some of the food. This was the first Christmas party the people living at the service had held, but records showed that it had been suggested by some people that it becomes a regular event.

Activities were individualised and each person had their own activity timetable in place which was based on their own likes and preferences. Some people enjoyed going trampolining and told us about the badges they had achieved and were working towards, other people enjoyed going out on country walks, going to cafes and meeting friends at a social club. We saw one person using the communal computer to search for and buy items that they collected over the internet. Staff told us some people's activity timetables were very fluid and included times when the person could choose on the day what they wanted to do, or where they wanted to go. Other people, who did not like change or found trying new things difficult, had more fixed activities and routines to follow. One person's relative told us "Staff try really hard to get (person's name) to go out and motivate them to try new things. They keep suggesting things and organising things, but (person's name) won't always go; they're not the easiest person to get motivated. That doesn't put them off though they keep trying and it pays off". Another relative told us "(Person's name) is always saying they went out here and there doing things and I was thrilled to here they were getting a daily paper and reading about sport which they love to do".

Staff supported people with arts and crafts sessions at the service. People and staff told us they had made hand crafted gifts for the relatives at Christmas such as snow globes and bath bombs. They told us about Eurovision party they had held at the service and showed us photographs of flags they had made to decorate the house with.

Scrapbooks had been put together by people and staff to document people's personal and group achievements, day trips, holidays and celebrations. Staff explained this was to help people remember good times and to celebrate their personal achievements. One person showed us a scrap book showing some of their trips. They told us they liked to make air fix models of ships, boats and planes. They explained that once they have made the model they like to then visit the real thing and leave the model hidden somewhere near or on the real object. It was evident they got a lot of pleasure from doing this and was proud of the scrap book they showed us. Staff told us the narratives under each photograph were "sometimes typed up by staff and sometimes by the person". It was evident that people were proud of their scrap books and they used them to support their conversations with us and show us the things they had been involved in over the last 12 months.

People were being supported with 'big dream goals' and supporting them to know what else is "out there". People were supported to plan and arrange their own holidays and outings including the budgeting for them. Staff explained two people had a shared interest in history, so had gone on trips together to places of interest to them such as castles. One person told us they were planning a trip to 'The Shard' and another

person had been supported to go on a day trip to France which they enjoyed. One person's relative told us "They went on a boat trip to France last year, I was surprised (person's name) went, but they really enjoyed it". A social care professional told us "The trip to France was really well managed and (person's name) thoroughly enjoyed it".

Some people were supported to obtain and maintain work placements. The registered manager explained how when one person work placement had come to an end they had been keen to find a new placement. They explained they had discussed various options with the person and as a result had contacted various businesses, including their head office to ask if they could provide a work placement for them. This had led to the person working in the provider's head office and gaining new skills and further experience and more confidence. Another person had been supported to set up their own car washing business which they now successfully ran themselves. This person was proud of this achievement and showed us posters they had been supported to produce to advertise the service they provided. Staff explained this achievement had helped to improve this person's confidence and independence.

Staff undertook an assessment of people's care and support needs before they began using the service, so they could be certain they would be able to meet their needs. These assessments were used to develop detailed care and support plans including clear guidance for staff to help them understand how people liked and needed their care and support to be provided. Records confirmed that where possible, people and their relatives were involved in the formation of these plans and subsequent reviews. The plans were detailed and gave descriptions of people's needs and the support staff should give to meet these. They had been reviewed regularly and updated as and when required. Relatives told us they and their loved ones were involved in assessments and on-going development and reviewing of care and support plans. One relative told us "We have reviews every few months or so, I'm always invited and kept informed of any changes". Another relative told us that a member of staff had visited their loved one to assess their needs before they were offered a place at the service and confirmed they had been consulted as part of the assessment and planning process. People's plans covered areas such as their communication, health care, personal care, activities and likes and dislikes. A social care professional confirmed they attended regular reviews and told us "As (person's name) changes they adapt what they do. They are coming out of their room more and staff are aware of the need to keep eye contact with them all the time and the importance of this to (person's name)".

Staff were observed being responsive to people's needs and assisting people with their care. Each person had a key worker and staff knew how each person wanted their care to be provided. People were seen being treated as individuals and received care relevant to their needs. 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. Staff completed a handover at the start of each shift; these documented what was happening in the day with people and any changes to their needs or well-being.

Relatives told us they were routinely listened to and the service responded to their needs and concerns. They were aware of how to make a complaint and all felt they would have no problem raising any issues. Complaints made had been recorded and addressed in line with the policy with a detailed response.

## Is the service well-led?

### Our findings

Everyone spoke highly of the service and felt that it was extremely well-led. A social care professional told us "It's very, very well organised. They are excellent and go beyond what they're supposed to do. There's a new manager, but the service hasn't changed, if anything it's got better, they are very much on the ball". A relative told us "Management isn't an easy task, but everything is working well. They keep me informed. There's always stuff going on. They stick up for the clients really well there. They're extraordinary". Another relative told us "Consistency is the key and they do that really well". A staff member told us "I love working here. I've learnt a lot and developed my career. (Line manager's name) is very approachable. We work well as a team, it works like clockwork. We provide consistent support; this is a very settled house". Another staff member told us they felt the service was "particularly well managed" and commented "We are very much led by people and what they want to do. It's a million miles away from they've experienced in the past. We are very fluid, that's just part of the way we do stuff. It's a very positive person centred and happy house". A third staff member told us "There's good management and team work, we work well together".

People received an exceptionally high standard of care because the management team led by example and set high expectations of staff about the standards of care people should receive. The registered manager had extensive background knowledge of working within care services for people who have Learning Disabilities and Autism and was committed to giving the staff team a clear focus and guidance on the care and support people required. The registered manager knew people and their needs extremely well. We observed people were relaxed and comfortable in the presence of management and did not hesitate to approach them for support and interaction. A relative told us "I'm extremely happy with the management and staff. We are so lucky to have secured a place here". The registered manager was supported by a deputy manager and team leader. Staff of all designations were clear of their own roles and responsibilities and those of their colleagues within the wider organisation. Whilst there was a clear hierarchy in place this was not an obstruction and there was a strong emphasis on the fact that every staff member had an equal voice. The management team were extremely approachable, flexible and embraced ideas and suggestions. They encouraged people and staff to 'think out of the box', had a 'can do' attitude and were solution focussed. The registered manager told us "We get so excited about the things we can do to help people achieve their potential". Staff were highly motivated, felt listened to and empowered to give their views and make suggestions to improve the service. One staff member told us "They are open to new ideas. We are given the freedom to introduce new things, they are open to change". The registered manager told us "I'm so proud of the staff team and everyone here and what they have achieved. We've had so many good ideas and the more we do, the more we think of". A relative told us "Staff are brilliant, they have good ideas, useful one's, they have a lot of empathy and get things done".

People were at the heart of the service, their opinions mattered and they were consulted on every aspect of the running of the service on an on-going and continuous basis. They were involved in every day decisions such as menu setting and deciding who to invite to social events through to larger decisions such as who to recruit. The registered manager explained that no decisions about the running of the service were made without consulting with people and explaining to them what their options were. The service had an extremely positive culture that put people first and was exceptionally open, inclusive and empowering.

Weekly discussion groups were fully supported and encouraged by management and had become embedded into practice. They were used as a forum to consult with people about things that mattered to them and to discuss any issues that would affect them in any way. The registered manager was seeking the views of people and staff on the service development plan for 2017/2018. This was to be shared with people at their next discussion group and with staff at their next team meeting so their views could be added to enable an 'inclusive plan of shared ideas'. The PIR stated 'We plan on continuing the work we do with the individuals at Beech Hill and to support the individuals to understand that everything they wish to do is achievable. We will continue to seek and resource ideas for new experiences and positive risk taking. We will continue with discussion group meetings supporting people to expand knowledge and we wish to seek training packages such as health and safety and first aid and infection control to help and support service users to have a greater understanding of safety at home. We plan to develop audits in an easy read style so individuals can audit their home with some staff support'.

People received a consistently outstanding standard of care, because the ethos of the service was to put people first and continuously looked for new ways to promote people's independence and enhance their quality of life. The management and staff took people's ideas and suggestions seriously and ensured they were supported to realise their aims and ambitions. When people had made suggestions for things they would like to do and things they would like to happen they had been encouraged to think about how they could achieve these aims. For example; people had said they would like a fire pit and BBQ in the garden and staff had supported people to make these items and then to use them.

The Registered Manager went the extra mile to establish and maintain links with other organisations in the community and was passionate about increasing people's knowledge and understanding of autism and the day to day challenges that people with autism face. They explained how they had approached local senior schools and offered to deliver training to their pupils. One college had accepted this offer and the registered manager had delivered presentations to years 10 to 11 explaining the roles of Social Care and how to support someone who has Autism. A local college had also accepted their offer and the registered manager was in the process of arranging dates to deliver presentations to their students. The registered manager, directors and divisional managers, staff and people completed a walk in the local area dressed in blue as part of the 'Light it up blue' world autism day to raise awareness of autism. The registered manager also worked in partnership with local health care providers and attended regular meetings with the Crawley Hospital West Sussex team with the aim to improving their knowledge and keeping up to date with good practice.

The management and staff were committed to supporting people to continue to develop, increase their independence and fulfil their dreams. The registered manager was committed to improving the opportunities for people they supported to be involved in the community and gain work experience in areas that interested them and would help them develop their skills, independence and confidence. They had approached local businesses and organisations and successfully sourced opportunities for people to get more involved in their local communities through volunteering and work placements. The aim of this was to help people to continue to develop as individuals and improve their social skills. They had also organised a 'Clubbercise' fundraising event in the local community to raise money to buy things for the house that people had said they would like but would not normally have the money to buy, such as a computer game console and videos for film nights. This was well supported by people, the staff team and the local community. They had also supported people to organise and advertise a sponsored walk in the local area to raise money for camping equipment. The development plan for the service for 2017/2018 outlined the aims for the service over the next 12 months and specified the registered manager will liaise with a community advice centre that people living at the service attended 'to discuss any joint working that we could do to support the local community.'

Staff were highly motivated to provide the best possible person centred care and promote people's independence. The achievements of staff were recognised by the registered manager and provider and it was evident that this had a positive impact on the staff team. All the staff spoke positively about their work and were full of enthusiasm about the positive affects the support they provided had on people. One staff member told us they found working at the service "Inspirational" and "Life changing". Another member of staff told us "It's amazing to see how far people have come but there is so much more we can support people with. The sky really is the limit". The member of staff who had suggested and 'project managed' the implementation of the woodwork shed and redecoration of the lounge had been nominated by the registered manager for the provider's 'employee of the quarter'. This staff member won the award and went on to win the provider's employee of the year award. The providers spring newsletter stated the staff member had won this award for their 'innovative thinking, project management and going the extra mile' in their role. The provider's staff awards were established in June 2014, with the aim of recognising employees who go the extra mile for the Disabilities Trust. The providers own information states 'Every member of staff makes an invaluable contribution to our mission, and the Staff Awards ensure that the incredible difference they make is acknowledged and rewarded'. The registered manager recognised the achievements and dedication of the staff team and had nominated them staff for the Team of the year. The team leader had been put forward for the CEO (Chief Executive Officer) 'Big Ambitions, Bright Ideas' panel which they now attend. The 'Big Ambitions, Bright Ideas' panel started in April 2017 and the team leader was involved in decisions in moving the provider forward in the world of social care. The panel make decisions on which 'Bright Ideas', as suggested by staff, are taken forward to meet the providers aims for the next five years. These aims included; Refreshing their model of support for adults with autism and physical disabilities, Pioneering the use of assistive technology drawing on research and clinical expertise and Enhancing opportunities for staff. The director of the Disabilities Trust also acknowledged the contribution of another member of staff by writing to them to thank them for the work they did supporting people to make handmade gifts for their family members at Christmas. It was evident that the recognition staff had received for their work was appreciated by the individual staff members and the staff team and helped to keep their motivation high.

The provider showed a strong commitment to supporting staff continuous learning and keeping up to date with best practice. The registered manager explained they kept their knowledge and skills up to date. They attended training provided by the provider and external training courses and showed great passion about their work. They told us they were continuing to undertake their own professional development by completing level 7 in Health and Social Care and the Assistant Manager and Team leader were completing level 5 in the management of Health and Social Care. The registered manager and other members of the management team attended external events, road shows and forums to gain knowledge and share best practice. These included attending a Care road show in March 2017 and an End of life conference in March 2017; as a result of which they had started some work with people and their families around end of life planning. The team leader and assistant manager were scheduled to attend a safeguarding workshop in May 2017. The registered manager was signed up with Skills for Care to ensure they kept up to date with current good practice and legislation. There was a learning board in the office where any updates were displayed and discussed in team meetings when necessary. The registered manager had also had started a process for team leaders to meet monthly for 'team leading knowledge days' to discuss reporting of incidents, budget management and other topics relevant to developing skills associated with their role. Staff meetings included knowledge quizzes in subjects such as safeguarding to help keep up to date with current practice.

Relatives and staff told us they were happy to raise any concerns with the registered manager or other members of the management team. Relatives and staff told us the management and staff worked well together. There was a strong emphasis on team work and communication sharing; for example staff had



time to discuss the events of the previous shift at handover. A staff member told us "I'd feel comfortable raising issues, they listen". One relative told us "I've no concerns".

Regular audits of the quality and safety of the service were carried out by the registered manager, senior staff and members of the provider's quality assurance teams. Quality assurance audits were embedded to ensure a good level of quality was maintained. We saw audit activity which included medication, care planning and health and safety. The results of which were analysed in order to determine trends and introduce preventative measures. The information gathered from regular audits, monitoring and feedback was used to recognise any shortfalls and make plans accordingly to drive up the quality of the care delivered.

The registered manager was part of the provider's management team providing on call support 24 hours a day to three services in the local area. The staff also had the support of a clinical team who supported the service with clinical needs and behaviour support. The support they provided included developing evidence based positive behaviour support plans. The registered manager was aware of their responsibility to comply with the CQC registration requirements. They were aware of the importance of notifying us of certain events that had occurred within the service so that we could have an awareness and oversight of these to ensure that appropriate actions were being taken.