

Care In Mind Limited

Brockenhurst

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 ●

Summary of findings

Overall summary

About the service

Brockenhurst is a residential care home that provides care and support to up to five people aged between 16 and 20 with complex mental health needs. At the time of our inspection, four people were living at the service.

People's experience of using the service and what we found

The provider's therapeutic approach to risk management enabled people to recognise and manage their own mental health and any risks that may cause harm to themselves or others. This framework of support was built around an ethos of giving young people with complex mental health needs the ability to live in the community and develop essential life skills and independence.

Risk management plans were created with the involvement of each person and provided both staff and people with detailed guidance about how to manage risks safely and effectively. People received their medicines at the right times and regular medication reviews were completed to ensure people's prescribed medicines remained appropriate for their health needs.

There were enough staff on duty to support people safely and those employed by the service had undergone detailed recruitment checks to make sure they were suitable for the role. Staff had received safeguarding training and people told us they felt safe and well-supported.

Detailed reviews were completed with people following incidents to help them reflect and learn and make any necessary changes to the support they received. The registered manager analysed incidents to look for patterns and trends to help identify triggers and prevent incidents occurring in the future.

Staff had access to information and guidance about infection prevention and control and were observed where the correct PPE. Regular cleaning tasks were completed by staff with the involvement of people living in the home to help develop skills and independence. We have offered some guidance in relation to this to ensure the home remains clean and hygienic.

A thorough assessment and transition process was followed before people moved in to the home to make sure staff were able to meet their needs safely and effectively. This assessment process took into consideration people already living in the home; including their needs, behaviors, risks and personalities.

The provider's internal multi-disciplinary team meant people had access to regular support from a range of health professionals; including clinical nurse specialist, consultant psychiatrist and psychologist. Routine reviews were completed with people to make sure their care and support remained relevant to their needs.

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

this practice.

People spoke positively about the staff and the support they received. Positive relationships had been developed between staff and people and it was evident staff knew people well and how to support them during incidents of crisis. People were supported and encouraged to develop essential life skills and independence.

People were integral to the care planning process and received support that was person-centred and based on their individual needs and preferences. This included supporting them to maintain healthy relationships with those important to them and support accessing the community and educational settings.

The registered manager promoted a culture that was person-centred and focused on empowering people to manage their own risks and be as independent as possible. People spoke positively about their experiences of living at Brockenhurst and the overall service they received. Staff told us they enjoyed working for the service and supporting the people who lived there.

Robust governance systems ensured that continuous learning was taken and improvements made to people's care and support. People and staff were given regular opportunities to share their views and be involved in any changes or improvements to the service.

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

Rating at last inspection

This service was registered with us on 25 September 2020 and this is the first inspection.

Why we inspected

This inspection was prompted by a review of the information we held about this service.

We looked at infection prevention and control measures under the Safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to COVID-19 and other infection outbreaks effectively.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

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 ●

This service was safe.

Details are in our safe findings below.

Is the service effective?

Good ●

This service was effective.

Details are in our effective findings below.

Is the service caring?

Good ●

This service was caring.

Details are in our caring findings below.

Is the service responsive?

Good ●

This service was responsive.

Details are in our responsive findings below.

Is the service well-led?

Good ●

This service was well-led.

Details are in our well-led findings below.

Brockenhurst

Detailed findings

Background to this inspection

The inspection

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

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

Inspection team

This inspection was carried out by one inspector.

Service and service type

Brockenhurst is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us.

Brockenhurst is a care home without nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Registered manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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.

At the time of our inspection there was a registered manager in post.

Notice of inspection

We gave a short period notice of the inspection. This was to give the registered manager needed time to prepare people for our visit and help reduce any anxiety it may cause.

What we did before the inspection

We reviewed information we had received about the service since they were first registered with CQC. We sought feedback from the local authority and we used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We received feedback from three people about their experience of the support they received. We spoke with three staff, the registered manager, deputy head of services and clinical nurse specialist.

We reviewed three people's care and support plans, medicine administrations records for two people, recruitment records for three staff and a range of other records relating to the overall running 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.

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

Preventing and controlling infection

- We identified some improvements needed to the hygiene practices within the home. There were detailed cleaning schedules, audits and walk-arounds completed and people were encouraged to take responsibility for the cleanliness of the home to help develop essential life skills. However, on the day of our visit some aspects of the environment were unclean. We have offered some guidance with regards to this.
- Staff had received training in infection prevention and control and had access to enough supplies of PPE. Staff were observed wearing masks in line with current guidance.
- Systems were in place to prevent visitors from catching and spreading infections; in particular COVID-19.
- The provider's COVID-19 visiting processes were in line with current national guidance.

Assessing risk, safety monitoring and management

- Risks to people's health, safety and well-being were assessed in detail. Clear guidance and procedures were in place for staff to follow when people presented with risks which could cause harm to themselves or others.
- Detailed risk management plans were created with the full involvement of people supported. One person told us; "No-one knows my mental health better than me. They [managers] have said I can start writing my own risk management plans."
- People were supported and encouraged to manage their own mental health and any risks that may cause harm to themselves or others.
- Routine checks on the environment and equipment were maintained. Certificates and audit documentation supported this.

Systems and processes to safeguard people from the risk of abuse; Learning lessons when things go wrong

- People were protected from the risk of abuse; policies and procedures supported this. Staff had completed safeguarding training and knew how to raise concerns.
- Incidents were recorded, reviewed and analysed by the registered manager and provider to look for any patterns, themes or triggers and identify whether future incidents could be prevented.
- Incidents were reviewed and discussed with people through structured meetings and reflective sessions. This helped them develop alternative ways to respond to incidents of crisis and manage any associated risks. One person told us; "Whenever I have gone through crisis, even if things haven't been dealt with well immediately, the staff always look after my best interests and help me to reflect and, best of all, also reflect on themselves."

Staffing and recruitment

- Safe recruitment processes were followed. Appropriate checks were completed on new applicants to make sure they were suitable for the role.
- Safe staffing levels were maintained to meet people's needs and keep them safe.

Using medicines safely

- Medicines were managed safely. Records of medicines administration were completed accurately and in line with best practice.
- Medicines were stored securely, and only administered by staff who were suitably trained.
- People were supported to be independent in taking their medicines when appropriate.

Is the service effective?

Our findings

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

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

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- A detailed assessment process was followed before people moved into the service to ensure staff could safely meet their needs.
- The assessment process took into consideration the other people living in the home; their personalities, behaviours and risks.
- A detailed transition process was in place to allow people to get to know staff, the home and the people already living there before moving in.
- People were provided with information and guidance about the importance of good oral health and the impact this can have on mental health and confidence.

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

- People's nutrition and dietary needs had been assessed and were being met.
- People were supported to plan menus, purchase their own groceries and cook their meals to develop their independence.

Staff support: induction, training, skills and experience

- Staff received training that was relevant to their role and the people they supported. This included detailed training in areas such as emergency first aid, breakaway and prevent training and oxygen use.
- Staff told us they were supported through regular supervision meetings. This gave them the opportunity to discuss any work concerns or learning and development opportunities.

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

- People received regular support and input from the provider's multi-disciplinary team assigned to each house. This included a clinical psychiatrist, psychologist and clinical nurse specialist.
- Where people needed referrals to external health professionals staff responded in a timely manner and care plans showed evidence of this. Staff followed guidance from professionals to ensure people received the right care and support.

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

- We observed Brockenhurst to be a relaxing and homely environment.
- People were encouraged to personalise their own bedrooms and communal areas of the home.
- Brockenhurst is a detached house in a residential area of Warrington. There were no obvious signs that

people living there were in receipt of care and support. This supported the provider's ethos of giving people choice, control, independence and inclusion.

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 MCA requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS).

We checked whether the service was working within the principles of the MCA.

- People living at the service had capacity to consent to the care they received.
- Policies and procedures appropriately reflected the principles of the MCA.
- Throughout our inspection, we observed staff asking people for consent before they delivered care.

Is the service caring?

Our findings

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

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

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

- People spoke positively about how well they were treated and the support they received from staff. Comments included; "The staff take a lot of value in their model of care being consistent with each young person and that is a very valued part of my experience" and "Staff are empathetic and never too busy to talk to you. They always look after my best interests."
- It was clear from observations that positive relationships had been developed amongst people living in the home and staff. One person told us; "There's just a vibe here. We all get on. We all have a laugh." Another told us; "The staff also seem to get on so there's a nice vibe."
- We saw evidence that staff and managers dealt with incidents of crisis in a calm and compassionate manner whilst preventing increased anxieties in other young people.
- Staff respected and celebrated people's diverse needs; including characteristics under the Equality Act 2010.

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

- People were given the opportunity to share their views about the support they received and were actively involved in decisions about their care.
- Regular reviews were completed with people to give them the opportunity to reflect and discuss the support they received and any changes they felt were needed.

Respecting and promoting people's privacy, dignity and independence

- Staff treated people with dignity and respect and provided them with the education and awareness they needed to take responsibility for their own personal hygiene.
- People were supported and encouraged to be independent and develop the life skills needed to live in a less-supported setting whilst also managing their mental health. One person told us; "Brockenhurst has helped me gain more independence within the community. It is a well-rounded place to live."
- People were given 'The Folder of Independence' booklet which provided information, guidance and 'top tips' for living independently. This included how to pay bills, look after and maintain a home, storing food, car care and how to deal with emergency situations.

Is the service responsive?

Our findings

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

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

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

- People were integral to the care planning process. People positively commented that staff and managers included them in the creation of their individual risk management plans.
- People received support that was person-centred and based on their individual needs and preferences.
- People spoke positively about the consistency of the staff team and how well they knew people living in the house. One person told us; "All the staff just get us. There's been a few new ones but even they just fit right in."

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- People's communication needs were considered as part of the care planning process.
- Where people found it difficult communicating their needs or verbalising their feelings, alternatives methods were used, such as writing things down, using text emojis, wrist bands or door hangers.
- Regular reviews were completed with people to determine whether their communication needs had changed and what adaptations were needed.

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

- People were supported and encouraged to maintain healthy relationships with family and friends.
- Staff worked with people to help them develop skills to manage destructive or unhealthy relationships to help them maintain their own well-being.
- People were supported to follow their hobbies and interests and any educational needs and wishes identified. Staff also provided educational and awareness sessions to people in a way they could understand.
- We were shown many examples of events and celebrations organised by staff. One person told us; "Events at Brockenhurst are memories that I'll carry for life which is really important when you live in services. Staff go out of their way to do overtime for things like this, and as a result, as a young person, you can tell that they really do care."

Improving care quality in response to complaints or concerns

- Systems were in place to respond to any complaints or concerns raised by people using the service.
- Complaints were used as a learning opportunity and records showed action was taken to improve the support people received.

Is the service well-led?

Our findings

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

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

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

- The registered manager promoted a culture that was person-centred and which empowered people to develop the skills they needed to manage their own mental health and associated risks.
- People spoke positively about their experience of the support they received from staff and managers. Comments included; "This is by far the best Care In Mind home. We all have a laugh and get on especially when we are all doing mad things together," "Brockenhurst has over all been a positive experience" and "Brockenhurst has been a home to me, as opposed to just a placement."
- Staff told us they enjoyed working at Brockenhurst and spoke warmly of the people they supported. One staff member said; "This is by far the best place I have worked. We all get on so well together and I love seeing them [young people] develop and learn how to manage their own mental health."
- The registered manager had contacted various businesses to request donations to support with specific awareness events such as oral health and personal hygiene.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; working with others

- The registered manager understood their role and responsibilities and had a great understanding of people's individual needs and personalities.
- Staff spoke positively about the registered manager and deputy manager and the support they received. One staff member said; "They [managers] are both great. [Registered manager] is so calm especially when one of the young people is in crisis. That helps us stay calm. There is always support after an incident if we need to talk about it."
- The internal multi-disciplinary team approach taken by the provider meant people had regular access to, and support from, a range of health professionals. This meant they received continuously evolving therapeutic support that achieved good outcomes.
- The registered manager and deputy manager had recently started to work closely with the local hospital's accident and emergency staff and local policing unit to provide information and guidance about the people supported. This helped create a more streamlined and effective approach to dealing with incidents.

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

- Managers regularly engaged with people living in the home and staff through various formats.
- Regular themed meetings, conversations and coffee mornings were held with staff to make sure they had

access to all relevant up-to-date information and provided an opportunity to share their views. One staff member commented; "[Deputy manager] led a waking night coffee morning to support the waking night staff and make them feel less isolated. It was clear [deputy manager] had worked really hard on the preparation."

- Meetings, awareness sessions and surveys were completed with people to provide them with information and guidance to help them develop and learn and to give them the opportunity to discuss what is important to them.

Continuous learning and improving care

- The registered manager and provider had robust systems in place to promote continuous learning and drive improvement to people's care and support.
- The registered manager, who was also a part of Care In Mind's audit committee, carried out various audits and checks to identify issues and make improvements.
- The deputy manager was responsible for creating action plans from audits completed to ensure any necessary improvements were made.
- Education and awareness sessions were completed with staff to help them understand the importance of audits and why they were completed.

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

- Governance systems in place demonstrated the registered manager understood their responsibility to notify CQC of events that occurred within the service.
- Records demonstrated a clear understanding of duty of candour and when people had been informed if things had gone wrong.