

Tinkers Hatch Limited Tinkers Hatch

Inspection report

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Ratings

Overall rating for this service	Good	
Is the service safe?	Good	
Is the service effective?	Good	
Is the service caring?	Good	
Is the service responsive?	Good	
Is the service well-led?	Good	

Overall summary

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, and to provide a rating for the service under the Care Act 2014.

Tinkers Hatch is a privately owned care home for up to 32 adult people with learning disabilities and/or physical

disabilities. On site accommodation is provided in the 'main house' which accommodates up to 24 people, 'the cottage' which accommodates up to five people, 'the flat' which is for up to two people and a unit for one person.

The registered manager, who was present throughout the inspection, has been in their current post for 15 years. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like

Summary of findings

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.

We found that Tinkers Hatch was a safe, secure and stimulating environment. People were cared for and supported by sufficient numbers of suitably qualified, dedicated, skilled and experienced staff. We observed staff speaking with people in a kind and respectful manner and saw many examples of enthusiastic but good natured interaction. Staff were aware of the values of the service and understood the importance of respecting people's privacy and dignity.

Care and support provided was personalised and based on the identified needs of each individual. Comprehensive care plans were reviewed regularly and helped ensure that people's needs were met and they were cared for and supported in a structured and consistent manner. People all had allocated keyworkers and were encouraged and supported to attend meetings, including the regular 'clients' forum' and 'ideas group.' This provided further opportunities for people to raise and discuss any issues or concerns and was further evidence of the person centred approach of the service.

We found people were cared for, or supported by,sufficient numbers of suitably qualified, skilled and experienced staff. Robust recruitment and selection procedures were in place and appropriate checks had been undertaken before staff began work.

CQC is required by law to monitor the operation of the Deprivation of Liberty Safeguards. The manager and staff showed that they understood their responsibilities under the Mental Capacity Act 2005 and Deprivation of Liberty Safeguards (DoLS). Where people were unable to make complex decisions for themselves the service had considered the person's capacity under the Mental Capacity Act 2005, and had taken appropriate action to arrange meetings to make a decision within their best interests, if this was applicable. The manager told us that they had applied for a DoLS authorisation for two people at Tinkers Hatch. We saw documentation to support this, together with records of 'best interest' meetings that had taken place.

Summary of findings

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?	Good
The service was safe. Staff knew how to recognise and respond to abuse correctly. They had a clear understanding of the	
procedures in place to safeguard vulnerable people from abuse. People were protected from avoidable risk because effective systems were in place for identifying managing and monitoring risk, as part of the support and care planning process.	
There were enough qualified, skilled and experienced staff to meet people's identified needs.	
Is the service effective? The service was effective.	Good
The manager had a good understanding of the Mental Capacity Act 2005 and how to ensure the rights of people with limited mental capacity to make decisions were respected.	
We found the service to be meeting the requirements of the Deprivation of Liberty Safeguards	
People's nutritional needs were met. The menus we saw offered variety and choice and provided a well-balanced diet for people living in the home.	
People had regular access to healthcare professionals, such as GPs, physiotherapists, dentists and speech and language therapists.	
Is the service caring? The service was caring.	Good
People spoke very highly of the staff and told us they were happy with the care and support they received.	
Staff had developed a close professional working relationship with people. They had a sound understanding of their identified care and support needs and comprehensive care plans helped ensure that such needs were met in a structured and consistent manner.	
Wherever possible, people were directly involved in making decisions about their care and their choices and preferences were respected.	
We saw many examples of how independence and individuality was promoted and people's privacy and dignity was respected,	
Is the service responsive? The service was responsive.	Good
People's health, care and support needs were assessed and individual choices and preferences were discussed with people who used the service and/or a relative or advocate.	

Summary of findings

Individual activity programmes had been developed, reflecting people's identified needs, interests and preferences.

Complaints were responded to appropriately and people were given information on how to make a complaint. They were also confident that any concerns would be listened to and appropriately acted upon.

Good

Is the service well-led?

The service was well led.

The manager assured the delivery of high quality personalised care that supported learning and promoted a stimulating environment and an inclusive culture.

Leadership was visible and efficient. Staff were supported to question practice. They told us the management of the service was good, always approachable and very supportive.

Accidents and incidents were recorded and closely monitored by the manager and the organisation to identify learning points and any emerging trends or patterns.



Tinkers Hatch

Background to this inspection

We inspected Tinkers Hatch on 21 October 2014. This was an unannounced inspection. The inspection team comprised one inspector, an expert by experience and their supporter. An expert-by-experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Before we visited the home we checked the information that we held about the service and the service provider. The provider also completed a Provider Information Return (PIR) which is a report that providers sent to us under Regulation 10(3) of the Activities Regulations, setting out how they are meeting the requirements of Regulation 10(1) We were not aware of any concerns by the local authority, or commissioners. During our inspection we observed how the staff interacted with people who used the service. We observed how people were supported throughout the premises, including the day centre, dining rooms and other communal areas. We also reviewed four care records, staff training records, and records relating to the management of the service such as audits and policies.

We spoke with four people who used the service and relatives of three people who used the service. We also spoke with the registered manager and four care workers.

We contacted external healthcare professionals who were involved in the lives of people who used the service, including speech and language therapists and physiotherapists.

The last inspection of this service was on 25 November 2013, where no concerns were identified.

Is the service safe?

Our findings

People who used the service told us they felt safe living at the home. One person told us, "I can talk to staff if I need help, the home is a good place." Another person told us "Yes I feel safe here." Relatives spoke positively about the service, they had no concerns about the way their family members were treated and felt that they were safe at Tinkers Hatch. One relative told us "I'm very happy that she (sister) is safe and it's even better now she has been moved to a ground floor room." Another relative told us "She (daughter) is safe there and it's important that she is not locked in now, like where she was before. It's a safe environment and there are always plenty of staff around."

This was reinforced by a health care professional from the local Community Learning Disability Team (CLDT) who has been involved with Tinkers Hatch for more than 15 years. They said they had a good working relationship with the manager, the deputy manager and many of the staff. They told us "I think people there are safe. They seem to manage risk very well and are quick to initiate referrals, for someone who may require specific input or additional support from us." A member of staff put it very well when they said "Risk awareness is paramount. You're thinking on your feet all the time, because you are responsible for their welfare."

The provider had updated safeguarding policies and procedures in place. Training records showed that all staff had received safeguarding training and staff we spoke with were aware of what steps they would take if they suspected abuse. Staff also told us they felt people were safe, the training was good and staffing levels were sufficient to ensure people's safety. One member of staff told us "I thought the induction was good and very comprehensive and having a colleague as a mentor was really useful. There's so much training here, including safeguarding. After a discussion with my manager, I've just had training in positive behavioural support for people who self-injure, it was so interesting." Another care worker told us "People are safe here, we all keep vigilant and risks are explained to clients at the level of their individual understanding. I think staffing levels are high. Evenings and weekends are actually my favourite shifts, when we get to spend quality time with clients, without appointments."

CQC is required by law to monitor the operation of the Deprivation of Liberty Safeguards (DoLS). We found the provider to be meeting the requirements of DoLS. The

manager told us that only one person at Tinkers Hatch was subject to a DoLS authorisation, although they had recently applied for a second. People identified at being of risk when going out in the community had up to date risk assessments in place. During our inspection, we observed that people going out in the community were supported by staff. We also saw that staff were provided with guidance and information regarding effective risk management, to help ensure people were protected.

Individual risk assessments were completed when required and included medication, nutrition, risk of choking, road safety and community activities. The manager confirmed that risk assessments formed an essential part of the care planning process. They told us "Positive risk taking is encouraged but safety is never compromised. Clients who go shopping and swimming are probably at a greater risk statistically than another client here who wants to go sky diving."

Staff told us they supported and managed people's behaviour according to their individual guidelines and risk assessments. One care worker told us "There's always that balance to be aware of between independence and potential risk." We saw that individual care plans including personal and environmental risk assessments were in place and regularly reviewed and updated to ensure people's changing needs could be met in a safe, structured and consistent manner.

Fire risk assessments were also in place and all fire protection equipment and fire alarms were regularly serviced and maintained. We saw that fire drills took place on a regular basis and staff received training in fire safety and first aid.. People had individual evacuation plans in their files. We saw that each person who used the service had a 'healthcare passport', which contained information on their health, medication and communication needs. This document was readily accessible in case of peoples' admission to hospital or for the information of emergency services.

Medicines were administered safely to people. During our inspection we observed a lunchtime medication round. We saw that, where appropriate, people were assisted to take their medicines sensitively, they were not rushed and simple explanations, appropriate to people's level of understanding were provided. A senior care worker (referred to in Tinkers Hatch as an In-Charge) confirmed that only in-charges had responsibility for administering

Is the service safe?

medication and all had received appropriate training. This was confirmed by records that we were shown. We saw that medicines were safely stored and medication administration records had been completed appropriately. Records were also maintained regarding people's allergies and this information was clearly displayed in people's rooms and the kitchen

Recruitment practices were robust and relevant checks had been completed before new staff started work. We looked

at the recruitment and personnel records for three members of staff and found that they contained evidence that Disclosure and Barring Service (DBS) checks had been completed. (The DBS checks have replaced the Criminal Record Bureau (CRB) disclosures.) We saw that the application forms had been completed appropriately and in each case a minimum of two references had been received.

Is the service effective?

Our findings

People received care from staff who had the knowledge and skills to carry out their roles and responsibilities effectively. People spoke highly of the service, the support staff and of the care they received. One person told us, "It's good here, I do lots of things, holiday in Spain, going on transport." Another person told us "I like it here and I make my own choices'. A relative told us "My daughter loves it there. She has a very good relationship with her keyworker, as I do. I feel fairly well informed and recently attended a review." Another relative told us "The staff are excellent, very cheerful and very welcoming. If my wife and I need to go into a care home in the future, we couldn't do any better than a place like Tinkers – and I can't really say more than that."

Staff spoke positively and enthusiastically about working at Tinkers Hatch. One member of staff told us "People here are treated as individuals - and it works. You see beyond the disability and they become your mates." Another member of staff told us "Everyone here is working off the same prayer sheet and going in the same direction."

Staff told us they were happy with the support and training they had received whilst they had been working at Tinkers Hatch. One member of staff said, "I have had so much training since I've been here. It's been really useful and I feel confident now doing what I'm doing." Staff also spoke very positively about the support they received from the manager and other colleagues. One member of staff member told us "The manager is very supportive and very approachable and it was really helpful, having a mentor when I started here." Another member of staff told us "We are a really good team here and support each other."

The training records demonstrated that staff had received or were booked to undertake training on the Mental Capacity Act 2005 (MCA) and the Deprivation of Liberty Safeguards (DoLS) The manager told us that there was currently one person who was subject to a DoLS authorisation and an application had been made for a second person. In care plans we found that the appropriate risk assessment, mental capacity assessment and best interest meetings had been completed as required.

Training records showed that staff had completed training in areas that helped them when supporting people living at Tinkers Hatch, including working with behaviour that challenges, working with people with learning disabilities, the principles of care and support and communication. All staff had completed induction training, compatible with the Skills for Care Common Induction Standards. The manager told us that in addition to essential training, staff received training specific to the needs of individual clients, including epilepsy, diabetes, peg feeding, dementia, pressure care, continence and nutrition. This was confirmed by staff we spoke with and supported by training records we were shown.

People who used the service were assigned a named key worker who coordinated their day to day healthcare needs. We saw evidence that people were involved in completing their health action plans which were person centred Health action plans included dates for medical appointments, medication reviews and annual health checks; people were weighed regularly and blood sugar tests were undertaken as necessary.

We looked at four individual are plans and found them to be comprehensive and person-centred. Initial assessments of needs and care plans included information about people's health, personal care, communication, relationships, finances, personal safety, and guidelines for care workers. The assessments were followed by more detailed care plans which contained guidelines relevant to people's specific needs, including mobility and transfers, epilepsy, bathing and showering. The manager confirmed that the plans ensured that care and support was provided in a structured and consistent manner.

People's nutritional needs were assessed and recorded and records were accurately maintained to ensure people were protected from risks associated with nutrition and hydration. We saw that people were consulted about their food preferences each day and were given options. During lunchtime we observed staff supporting people who required assistance. The chef confirmed that specialist diets, including diabetic and gluten free, were catered for as required. One person told us "I like the food here, if I don't like it I can sometimes have something else." A relative we spoke with told us "The standard and quality of the food is very good and they do get choices. They are also encouraged to have drinks and snacks during the day, which is good and there's always a bowl of fresh fruit in the cottage."

In people's individual health action plans, we saw risk assessments relating to dietary and hydration

Is the service effective?

requirements. People's weight was monitored and food and fluid charts were completed for people where there was an identified risk in relation to their food and fluid intake. Staff we spoke with were familiar with the nutrition requirements of these people. Some people had a prescribed food and fluid plan, following involvement by speech and language therapy team (SaLT) which provided advice and guidance related to the environment, position, equipment, food, drinks and assistance.

We received positive feedback from the Community Learning Disabilities Team about the service provision at Tinkers Hatch. They told us that staff supported people appropriately and provided good feedback when implementing the guidance that had been given in relation to people's needs. Staff we spoke with were knowledgeable about the individual needs of people and followed any guidance given appropriately.

People who used the service were assigned a named key worker who coordinated their day to day healthcare needs. We saw evidence that, as far as practicable, people were involved in completing their health action plans, which were person centred, reflecting their individual health care needs. Health action plans included dates for medical appointments, medication reviews and annual health checks; people were weighed regularly and blood sugar tests were undertaken as necessary.

The manager confirmed that people who used the service were registered with local GPs and had access to other healthcare professionals and services as required. We saw that they made timely and appropriate referrals, as required, for external advice and support Staff we spoke with confirmed the effective links and close working relationship with the community teams, including mental health consultants, occupational therapists (OTs), community nurses and dieticians. This was confirmed by healthcare professionals we contacted, as part of the inspection process, who spoke of "effective communication, good working relationships" and "positive interactions."

Is the service caring?

Our findings

People and their relatives spoke positively about the kindness and caring approach of the staff. They told us they were happy with the care and support provided at Tinkers Hatch. Staff routinely involved people in their individual care planning and treated them with compassion, kindness, dignity and respect. One person told us 'Staff are fine, thank you." Another person told us "I am very happy here, Staff are great, they help me." People also said they were offered choices and confirmed staff knew about their preferences and daily routines. Relatives and friends were able to visit at any time. One relative told us "I couldn't ask for better - it ticks all the boxes. The staff are always so kind and caring and it's the same familiar faces whenever I visit. Which is very important, because it means they know the clients - and the clients know them." Another relative told us "They (staff) are always very kind and compassionate and very cheerful. A little smile goes a long way!"

During our inspection we saw that positive caring relationships had developed between people who used the service and staff. The manager confirmed that everyone at Tinkers Hatch had their own key worker. On relative told us "He (brother) actually chose his key worker. There was a member of staff who he responded to and got on with particularly well and when he asked (the manager) it was all arranged – and he couldn't be happier."

Staff who we spoke with were aware of the personal life histories of people and were knowledgeable about their likes, dislikes and the type of activities they enjoyed. Staff told us that regular keyworker meetings were held, which helped to develop and maintain positive relationships. Staff said they got to know people through spending time with them and their relatives and reading their care plans, including their individual pen portraits, interests, goals and support needs. One member of staff told us "I've read everyone's care plan. I think it's important to get some background history." The manager had taken steps to ensure that individual care plans were not just task orientated but considered people's life history and helped ensure their identified care needs were met consistently.

Communication between staff and people was sensitive and respectful. We saw people being supported with consideration and gently encouraged by staff to express their views. We observed that staff, particularly in the day centre, enthusiastically involved people as far as possible in making decisions about their care, treatment and support, including which activities they wished to take part in. This level of energy and enthusiasm was evident throughout the service and we saw that people responded very positively. A member of staff told us "As you can see there's a really good atmosphere here and we all get on really well

People's wishes in respect of their religious and cultural needs were respected by staff who supported them. A member of staff told us that some people were vegetarian and we saw that their specific requirements were catered for..

People were supported to express their views and be actively involved in making decisions about their care treatment and support. We looked at four care plans and found them to be comprehensive, person centred and well maintained. People had the opportunity to make their views known about their care, treatment and support through key worker or group meetings, including the clients' forum and the ideas group. Relatives confirmed they were involved in their care planning and reviews. They said they were kept well-informed and had regular contact with the key worker and were encouraged to visit the home at any time. One relatives we spoke with told us they visited the service regularly and found that staff "very cheerful and very welcoming.". .

During our inspection we saw staff speaking sensitively with people and treating them with both dignity and respect. This was supported by one person who told us "Staff knock on my door and I have a key to my room." Staff we spoke with clearly understood what privacy and dignity meant in relation to supporting people with their personal care. One member of staff told us "Choice is so important what the individual wants - and so is respect. It's about asking someone and not 'just doing it." Staff also provided us with examples of how they maintained people's dignity and respected their wishes. One member of staff said, "We have to always remember it's their home, so we knock before entering people's rooms. And you don't chat with colleagues over the head of someone you're giving personal care to." "Another member of staff told us "People are treated as individuals. We should always ask them what they want - and mustn't assume we know."

Is the service responsive?

Our findings

People were involved in making decisions about their care wherever possible. We found that people had their individual care and support needs assessed before they moved to Tinkers Hatch and reviewed on a regular basis. People told us that they were involved in the assessments and reviews and felt that their voices were heard. One person told us "I talk to my key worker, she knows what I like". We were told by another person that they felt "involved" and that the staff listened to them. One relative told us "We have a very good relationship, particularly with the key worker, so I feel very much involved and definitely listened to. We attended a review quite recently, in September, and they were keen to hear what we had to say."

The manager told us that care and support was personalised and confirmed that, as far as possible, people were directly involved in their care planning. They said care plans were "individually created, with direct input from professionals as required." They also told us that plans were monitored daily by senior staff. This was confirmed by staff we spoke with and supported by care plans that we were shown. One member of staff told us "Care plans are updated as soon as someone's needs or condition changes." This helped to ensure that individual plans accurately reflected people's changing care and support needs.

We found that care plans were comprehensive and person-centred. Initial assessments of needs and care plans included information about people's health, personal care, communication, relationships, finances personal safety, and guidelines for care workers. We saw that plans were reviewed regularly and updated when changes were identified. We found that people who used the service or their representatives were involved, as far as practicable, in the care planning and reviewing process. and consulted regarding any necessary changes to the care plans. The manager told us "Day care is central to life at Tinkers Hatch." During our inspection, we spent time in the day centre, a very stimulating environment, where we saw people clearly enjoying a range of activities, supported by dedicated and enthusiastic staff. A senior member of staff told us that people were able to take part in individual activities based on their identified preferences and choices. One person told us "I like it here. There's classes in the week, I go swimming and we have plays." Another person told us "I go to day centre, it is enjoyable but not challenging but I like to have people around me." Another member of staff told us, "We try and meet people's needs, what they enjoy doing and what activities they are interested in." A relative told us "They certainly have a better social life than we do."

People were made aware of the complaints system. A brochure was provided to people and their family before admission to the service. We saw that the brochure included information on the complaints policy and procedure. People were also provided with a comprehensive 'Client Guide' which contained clear illustrations, symbols and pictures to help them understand. Advice included 'What can I do if I am not happy living at Tinkers Hatch?' and we saw that people were also encouraged to talk with their keyworker or at the client's forum.

People told us they knew how to make a complaint but this had not been necessary. The manager confirmed that they welcomed people's views about the service. They said that any concerns or complaints would be taken seriously and dealt with quickly and efficiently, ensuring wherever possible a satisfactory outcome for the complainant. People told us if they had any issues or concerns they would speak to the manager or deputy manager and "something would always be done." One relative told us "I'm very happy but wouldn't hesitate in raising a concern, if necessary and I'm confident that I would be listened to."

Is the service well-led?

Our findings

People and their relatives were aware of the management arrangements at Tinkers Hatch and felt there was effective leadership within the service. Relatives told us "I think the manager is excellent, very approachable and very professional. He's also totally committed to the welfare of the clients." Another relative told us "I know he's a very busy man but he always makes time to speak with us. He seems to be very involved with what's going on and knows all the clients very well. He's also very visible around the place, not at all remote." During our inspection we saw that the manager maintained a high profile and communication throughout the service was open, considerate and friendly.

The manager and deputy manager assured the delivery of good quality, personalised care and promoted an open and inclusive culture. People and their relatives confirmed they were asked for their views about the service. They told us they felt "informed." and also said they were involved in care plan reviews. Staff had confidence in the way the service was managed and described the manager and deputy manager as "approachable" and "very supportive." One member of staff told us the manager was "brilliant" and said "He's here for the clients – big time!"

The service had clear principles of care in place, as set out in their client guide: 'We aim to provide a homely environment which respects independence and encourages individuality, development and personal growth.' The manager told us that the ethos and values of the service were regularly discussed and reinforced during one-to-one supervision sessions and staff meetings. We saw examples of staff displaying these values during our inspection. Staff told us the people at Tinkers Hatch were central to their work. One member of staff said "They are the reason we're here, doing what we do: supporting them to be as independent as they can be, respecting their choices and treating them with dignity."

The service had a whistleblowing policy in place. Staff told us they would not hesitate to raise concerns about poor practices and were confident their concerns would be listened to and acted upon They said they were happy and motivated working at the service and described the morale amongst staff as "very good." One member of staff told us, "It's good here and I love it. We look out for each other and the manager is just so supportive and very approachable."

Effective systems were in place to monitor incidents and accidents at the service and implement learning from them. We saw that the incidents were recorded accurately and people's care records had been updated following these incidents to ensure that up to date information was available to staff. People and their relatives confirmed they were aware how to make a complaint if necessary. However there had been no complaints about the service since the last inspection.

Clients' meetings, including forums and ideas meetings were held every two weeks and were accessible to all people who used the service. Staff meetings were held every month and we saw that, where required, actions resulting from these were assigned to a named member of staff to follow up. Staff told us they found staff meetings were useful for discussing issues, sharing information and providing feedback.

The manager told us they were responsible for undertaking regular audits throughout the service. Records showed that such audits included health and safety, which incorporated fire safety, electrical checks and updating environmental risk assessments. Other audits included medication and care plan reviews. Where shortfalls had been identified, actions were put in place including an accountable member of staff and agreed timescales, ensuring that any necessary improvements could be monitored effectively.

In addition to the audits undertaken, the service worked closely with other healthcare professionals and social workers to improve service delivery and help ensure consistent care provision. As previously documented, we found that feedback from key organisations and other stakeholders was very positive.