

MGB Care Services Limited

Sutton House

Inspection report

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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

About the service: Sutton House is a residential care home providing care and support to seven men living with a learning disability.

People's experience of using this service: Sutton House provided an excellent service. People led full lives and were happy. People's experience was summed up by one person who told us, "I think it is outstanding here, the staff are brilliant. It has changed me, it has made me feel good."

The outcomes for people living at Sutton House reflected the principles and values of Registering the Right Support in the following ways; promotion of choice and control, independence and inclusion. People's support focused on them having as full a life as possible, gaining new skills and growing in confidence and independence.

People were safe and protected from avoidable harm and abuse. Risks were managed safely whilst respecting people's choices. People were supported to develop the skills and confidence they needed to maintain their own safety. People received their medicines as prescribed. There were enough staff meet people's need and preferences and ensure their safety.

The team at Sutton House were passionate about maximising people's capacity to make decisions. People were supported by a team of staff who were skilled in meeting people's needs and received on-going training and development to enable them to deliver the most effective service. People received healthcare support from a range of internal and external healthcare professionals and staff empowered people to understand and maintain their own health. People had enough to eat and drink, they were encouraged to make choices about food and drink and provide feedback.

The service had a person-centred culture focussed on the promotion of people's rights to make choices, this resulted in people being valued and treated as individuals. Respect for privacy and dignity was at the heart of the service. People were supported by exceptionally caring staff that knew them well and understood how to maximise their potential. People were supported to maintain relationships with their families and friends and the value of relationships was central to the success of the service. People's independence was promoted and they received support to achieve their dreams, wishes and aspirations.

People received a personalised service which was responsive to their individual needs. People had active social lives and were a part of their local community. People directed their own support and staff were committed to supporting people to experience a good life. People were encouraged to provide feedback on the service and felt they could raise concerns.

Since our last inspection the provider and registered manager had sustained a high-quality service, resulting continued in positive outcomes for people. The registered manager promoted a culture of equality and person-centred support. They had a vision for the home which was based upon ensuring people's happiness

and upholding their human rights. People and their families were unanimously positive about Sutton House and impact it had on their lives. Suggestions from people, families and staff were used to drive improvements. Robust quality assurance processes ensured the safety and quality of the service.

The service met the characteristics of outstanding in most areas. For more details, please see the full report which is on the CQC website at www.cqc.org.uk.

Rating at last inspection: Outstanding, report published 16 June 2016.

Why we inspected: This was a scheduled inspection based upon the previous rating.

Follow up: We will continue to monitor this service and plan to inspect in line with our inspection schedule for those services rated Outstanding.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

The service was safe

Details are in our Safe findings below.

Good ●

Is the service effective?

The service was effective

Details are in our Effective findings below.

Good ●

Is the service caring?

The service was exceptionally caring

Details are in our Caring findings below.

Outstanding ☆

Is the service responsive?

The service was exceptionally responsive

Details are in our Responsive findings below.

Outstanding ☆

Is the service well-led?

The service was exceptionally well-led

Details are in our Well-Led findings below.

Outstanding ☆

Sutton House

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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Inspection team: The inspection was conducted by one inspector.

Service and service type: Sutton House is a care home. People in care homes receive accommodation and nursing or personal care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

The service had a manager registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection: The inspection was unannounced.

What we did: Prior to the inspection we reviewed any notifications we had received from the service and information received from external agencies such as the local authority. The Provider completed a Provider Information Return (PIR). This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We used this information to plan our inspection.

During our inspection we spoke with four people, three relatives, two staff, the deputy manager and the registered manager. We reviewed records related to the care of three people. We looked at records of accidents and incidents, audits and quality assurance reports and two staff files. We also looked at documentation related to the safety and suitability of the service. We spent time observing interactions between staff and people within the communal areas of the home.

Is the service safe?

Our findings

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

Sutton House remained good in this area. People were safe and protected from avoidable harm. Legal requirements were met.

Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe. One person told us, "I am safe. The doors are locked, no one can come in. The staff are nice to me." This view was shared by people's relatives. People's safety was a priority for staff. People were kept safe from the potential risk of abuse because staff had the appropriate knowledge and understanding of safeguarding policies and procedures.
- People were supported to develop the skills and confidence they needed to grow in independence and maintain their own safety. Safeguarding and abuse was discussed at every 'residents meeting' and images and symbols were used to ensure people understood. There was also easy read safeguarding information on display in the home.

Assessing risk, safety monitoring and management

- Staff were passionate about enabling people to achieve a fulfilling life whilst keeping them as safe as possible. Risks had been thoroughly assessed and actions had been taken to reduce them whilst minimising the restrictions placed on people, so that they could do things that they enjoyed.
- Risks arising from people's behaviours were managed safely. One person sometimes behaved in a way that placed others at risk of harm. Technology had been used to enable the person to express themselves and minimise the risk. This balanced approach respected the person's rights and promoted their independence whilst ensuring the safety of them and others.
- The use of restrictive physical interventions was minimised. Staff knew people well and understood how to support and reassure people, effectively reducing their anxiety and frustrations without the need for physical intervention. A relative told us, "It just shows you don't need big burly men to work with people with challenging needs. Some of the staff are tiny and they know just what to do and say without the need for getting heavy handed."

Staffing and recruitment

- There were enough staff available to meet people's needs, respond to requests for support and keep people safe.
- People were supported by a consistent staff team. Staff told us this had a positive impact on people's wellbeing and reduced the number of behavioural incidents. Staff were used from the provider's other local services to cover short notice absences when needed.
- There were effective recruitment practices in place and the registered manager was passionate about ensuring that staff with the right skills, attitude and values were employed.
- Safe recruitment practices were followed. The necessary steps had been taken to ensure people were protected from staff that may not be fit and safe to support them.

Using medicines safely

- Medicines systems were organised and people were receiving their medicines when they should. The provider was following safe protocols for the receipt, storage, administration and disposal of medicines.
- The team at Sutton House were committed to managing people's behaviours without the overuse of medicines. Records showed that staff were effective in supporting, reassuring and managing people's behaviour, reducing the need for medicines.

Preventing and controlling infection

- The home was clean and effective infection control and prevention procedures were followed. Staff had training in infection control and there were signs displayed around the home to encourage effective hand washing.

Learning lessons when things go wrong

- There were systems in place to monitor and learn from incidents and accidents. Records of incidents were detailed and reviewed by the registered manager on a monthly basis. Changes were made to people's support plans to reduce the risk of repeat incidents.

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

Sutton House remained good in this area. People's outcomes were consistently good, and people's feedback confirmed this.

Ensuring consent to care and treatment in line with law and guidance

- People were supported to make decisions and direct their own lives. People told us they were supported to make informed choices and staff respected people's decisions. One person told us, "I make most of my own decisions, staff sometimes help me make decisions, they are good decisions and I am happy with this."
- The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The Act requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible. People can only be deprived of their liberty to receive care and treatment with appropriate legal authority. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS). We checked whether the service was working within the principles of the MCA, whether any restrictions on people's liberty had been authorised and whether any conditions on such authorisations were being met.
- The team at Sutton House were passionate about maximising people's capacity to make decisions and had a good knowledge of the MCA. Mental capacity assessments involved the person and others, as appropriate. For example, one person expressed a wish to take their family on holiday, but they lacked capacity to make decisions about money. The staff team worked closely with them and others, to reach a best interests decision which ensured their safety and upheld their rights. They told us proudly about how they had treated their family member to a holiday, it was clear this had had a positive impact on their wellbeing.
- The staff team had a very good understanding of DoLS and had made applications where appropriate to ensure that people were not being deprived of their liberty unlawfully. The management team were committed to ensuring people were supported in the least restrictive way. One person who had a DoLS in place, had, with the support of the staff team, grown in skill and independence since being at the service. This had resulted in the person being able to travel on a long-haul flight independently. This flexible and enabling approach supported the person to develop new skills and grow in confidence.

Staff support: induction, training, skills and experience

- People were supported by staff who were trained and given opportunities to develop and achieve qualifications. Records showed staff were provided with a wide range of training specific to people's needs. Staff received training on how to safely support people whose behaviour could place them or others at risk. People's families told us staff provided exceptional support in this area. A relative commented, "They seem to deal with [Name's] behaviour with ease." A consistent, calm and reassuring approach from staff had reduced the severity and intensity of behavioural incidents and had a positive impact upon people's

wellbeing.

- All new staff were provided with an effective induction period when starting work at the home. New staff had completed or were in the process of completing the Care Certificate. This is a nationally recognised set of standards to equip staff with the knowledge and skills to provide safe and compassionate support.
- Staff were given opportunities to review their work and development needs. The registered manager told us staff were encouraged to come to the management team with issues, queries and suggestions on an informal basis. This meant formal supervisions could be used to ensure staff competency and discuss their development needs. Records showed, and staff told us, they received regular supervision.

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

- Mealtimes were positive, sociable experiences. People living at Sutton House and staff ate their meals together which created a feeling of equality. People were provided with a choice of high quality, home cooked foods. Healthy choices were promoted and this was balanced with ensuring people's preferences were met.
- People were encouraged to make choices about food. One person told us, "We decide on the food and then we make a menu. The food is great." People's cultural needs were accommodated. One person was supported to shop for culturally specific food. Staff who shared the same cultural background supported them to cook the food.
- People's nutritional needs were assessed regularly. Where people had risks associated with eating and drinking there was clear guidance in their support plans. People visited their local pharmacy regularly to be weighed.

Supporting people to live healthier lives, access healthcare services and support; Staff working with other agencies to provide consistent, effective, timely care; Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- People and their relatives told us that they received effective support with their health. Staff worked with other healthcare services to monitor people's physical and mental health and sought advice from external professionals when their health needs changed.
- Where people had health conditions there were comprehensive care plans in place and staff had training from specialist health professionals in relation to these. Risks were managed safely.
- People were empowered to take ownership of their own health. One person explained their health condition to us and understood how to manage this. This had resulted in an improvement in their health. Another person had a fear of dentists, staff had built their confidence and they eventually overcame this fear.
- People's needs were assessed using nationally recognised tools. Assessments of people's needs were comprehensive and were reviewed regularly.

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

- People were involved in decisions about the design and decoration of the home. People had chosen their colour themes and helped to decorate and furnish their bedroom. People told us they had been out shopping to choose furnishings and showed us their rooms with pride. Risks in relation to premises and equipment were identified, assessed and well managed.

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

Sutton House remained outstanding in this area. People were truly respected and valued as individuals; and empowered as partners in their care in an exceptional service.

Ensuring people are well treated and supported; equality and diversity

- The service had a person-centred culture. This was focused on the promotion of people's rights to make choices and live a fulfilled life, as independently as possible. A relative told us, "[Name] is having a good experience of life." There was a happy, homely atmosphere at Sutton House. We saw how people were relaxed within the company of staff, friendly jokes and much laughter was shared. This showed mutual respect and how positive relationships had developed between people who used the service and staff.
- People were exceptionally well cared for and were consistently positive about the staff team. One person said, "The staff care about me," another person said, "The staff are all very kind and good." This was also reflected in comments from people's relatives. A relative told us, "The staff are brilliant – all of them. [Name] has a great relationship with them all. They just understand him. He is so happy there."
- Staff were highly motivated to provide people with excellent support and demonstrated person centred values throughout our visit. The deputy manager told us, "We treat people as we would treat anyone. We encourage staff to respect people and see them as people first."
- Staff knew people well and people were relaxed in their company. We observed kind and respectful interactions where people were given time to express themselves fully. Staff were responsive to requests for support and reassurance. For example, one person repeatedly sought reassurance from staff. Staff responded in a consistent and caring way, putting them at ease. The registered manager told us, "We don't even realise we are doing it. We just know how important it is to acknowledge them."
- People had a choice about who they were supported by. People were involved in the recruitment of new staff and where possible, had a choice about who provided their day to day support. The registered manager told us, "People choose who they want to go out with and when they avoid going out with particular staff we seek their feedback." Staff were matched with people based on their interests and, when required their cultural background.
- People's support plans contained clear information about what mattered to people and staff used photographs of people's families and their experiences to engage people in conversation.
- People's culture and religion was acknowledged as an important aspect of their care and people were empowered to maintain and develop this. For example, staff read religious texts to one person if they wished.

Respecting and promoting people's privacy, dignity and independence

- Respect for privacy and dignity was at the heart of the service. Throughout our visit we saw there was a sense of equality between people and staff. The registered manager was passionate about promoting people's human rights and proactively challenged any restrictive practices. There was information displayed about the 'dignity challenge' which described what people should expect from staff.

- People told us they had privacy when they needed it. Staff had overcome obstacles to ensuring people's privacy. One person required 24-hour support to manage risks posed by a health condition. Staff and the registered manager clearly explained how they enabled the person to have privacy whilst ensuring their safety.
- Staff anticipated people's needs and recognised distress and discomfort. One person talked about their late parents and said, "Got no parents to look after me," a member of staff responded compassionately and said, "You have got us now." This appeared to give the person comfort. They were supported to visit their late parents grave frequently.
- People were supported to be as independent as possible and this was central to the service provided at Sutton House. The service had successfully supported people to grow in confidence and independence. One person had flown to America on their own to visit family. Staff had worked with them to plan their route and ensure they were supported every step of the way. Another person was very shy and lacking in motivation when they moved into Sutton House. The staff team had worked with them and we saw they now enjoyed a full life.
- People were also encouraged and supported to get involved in the running of the home. Throughout our visit people prepared food and drink independently and told us about their role in keeping the home clean.
- People were supported to maintain relationships with their families and friends and the value of relationships was central to the success of the service. People were free to have visitors but were encouraged to spend time in the community with their families and friends. One person wanted to go to a music concert and staff supported them to ask their relative if they would like to go with them instead of staff. The person told us about this with excitement.
- Friendships had developed between people living at Sutton House. One person valued their personal space and did not like to get close to others. They had become friends with another person living at the home and the registered manager told us they let this person into their personal space. These people were enjoying a day out together on the day of our visit.
- People were supported to manage complex relationships. For example, tension had developed between two people, staff had recognised this and staggered their support reducing the amount of time they spent together. This had a positive impact on each person's wellbeing.

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

- People directed their own lives. People told us they were in control of what they wanted to do and staff respected this. One person told us, "I get to do things here for myself, it's about me."
- People were supported to express their views when needed. Staff championed people's right to be in control. The staff team had worked with people's families to help them support their relative's choices. For example, staff had worked with a person's family to help them see things from their relative's point of view. This had had a positive impact upon the person's wellbeing. Referrals were made to independent advocates when needed to help people express themselves. One person was using an advocate at the time of inspection.
- Staff had an exceptional understanding of how people communicated. Although everyone living at the home communicated verbally staff used creative approaches to maximise people's ability. For example, staff used technology such as tablets and phones to show people of examples of things they were discussing to help aid their understanding. One person sometimes communicated using signs, staff had received training on this. However, because the staff understood how to communicate well with the person they had stopped using sign and preferred to chat with people instead.

Is the service responsive?

Our findings

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

Sutton House remained outstanding in this area. Services were tailored to meet the needs of individuals and delivered to ensure flexibility, choice and continuity of care.

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

- The staff team were focused on enabling people to lead as full a life as possible. A relative commented, "We never hear from [Name] they are too busy, they have a life!" The service was flexible and responsive to people's individual needs. People's daily schedules were determined by their individual interests and routines were based upon their preferences.
- People told us, and we observed, that they chose how they spent their time. People enjoyed activities such as bowling and shopping in the local community, visiting places of interest and seeing their friends and family. People also spent time in the onsite games room, playing their favourite computer games.
- Resources had been used creatively to enable people to pursue their dreams. Two people wanted to go Paris. The staff team found a deal which enabled them to plan an affordable trip. They described how they had visited all the attractions. A staff member commented, "It was fantastic to see people like that, I have never seen them so excited."
- People were supported to save for, and go on, regular holidays and there had been several recent trips to the coast. Photos were displayed around the home and people recalled their memories fondly.
- Support plans were personalised and written around individual's needs, preferences, likes and dislikes. They were written in a positive way and focused on people's abilities and what mattered most to them. The registered manager told us support plans were always changing to reflect people's needs and this was confirmed by staff.
- People were involved in the development of their support plans. The registered manager had identified that people were not interested in contributing to their support plans. So, they started supporting people on day trips, taking them out for coffee and going on long walks with them. They used this as an opportunity to start conversations with them about their care, staff, support, likes and dislikes hobbies. The registered manager told us people engaged much more and were keen to answer any questions. They and staff then read the support plans to people one page a day to make sure they agreed with the content. Throughout our visit, people showed us their plans. It was clear they were very proud of these, they told us they were able to make changes to them if they wished.
- There were links with the community and people were encouraged to make a contribution. This was reflected in a relative's comments who said, "Life is about doing useful things and that's what [Name] does." One person sometimes carried shopping home for an older neighbour. Another person had a passion for buses and told us the bus drivers recognised them. Staff told us people were well known in the community with local people often stopping to say hello.
- People used local community facilities. One person told us they were a member of their local gym. Staff exercised with them at the gym which contributed to greater community inclusion.
- People were supported to pursue education and employment opportunities. Five of the seven people living at the home attended a local college and had completed several courses. Courses were based upon

people's interests and people utilised the skills they had learned. For example, one person had completed a furniture restoration course and had practiced this at home. Another person had a job at a local charity shop.

- Promoting equality and celebrating difference was central to the ethos of the service. There was a diverse staff team at the home, which meant people received support from staff who had personal experience of their culture. People's religious and cultural preferences were considered across all aspects of the service. One person was supported to go to a culturally specific barber, food was bought from local shops to ensure they were prepared in a culturally sensitive manner and people were supported to practice their faith.
- People's information and communication needs had been identified, recorded and accommodated. For example, easy read information was displayed around the home and people's support plans were presented in an accessible and engaging way.
- The service had an innovative approach to using technology. Most people living at the home had their own electronic tablet. The staff had worked with people to provide them with the skills to use their tablet and we saw people used this to pursue their interests. Some people used the tablets to express their individuality and we saw this had resulted in reduction in behaviours that placed others at risk of harm.

Improving care quality in response to complaints or concerns

- People were empowered to raise any concerns or complaints. Concerns and complaints were discussed at monthly meetings and people's knowledge was tested to make sure they understood their rights. People and staff told us they had confidence in the management team, to handle and resolve any concerns sensitively and effectively. We saw the complaints procedure displayed in an easy read format. The registered manager told us they had not received any complaints since we last inspected the service.

End of life care and support

- People were given the opportunity to discuss their wishes and preferences in relation to care at the end of their lives. A personalised approach was taken to this, considering the person's physical health. Where appropriate staff had supported people to think about their wishes for end of life care and this was compassionately recorded in people's support plans.

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

Sutton House improved from good to outstanding in this area. Service leadership was exceptional and distinctive. Leaders and the service culture they created drove and improved high-quality, person-centred care.

Planning and promoting person-centred, high-quality care and support; and how the provider understands and acts on duty of candour responsibility

- There was evidence of sustained high-quality care at Sutton House.
- People and their families were unanimously positive about Sutton House. One person told us, "I think it is outstanding here. It has changed me, it's has made me feel good." People's relatives told us that the team at Sutton House got the best out of people. A relative commented, "We have had really difficult times before. But [name] seems happier at Sutton House. It's ticking all the boxes."
- The outcomes for people living at Sutton House reflected the principles and values of Registering the Right Support in the following ways; promotion of choice and control, independence and inclusion. People's support focused on them having as full a life as possible, gaining new skills and growing in confidence and independence.
- The registered manager promoted a culture of equality and person-centred support. They had a vision for the home which was based upon ensuring people's happiness and enabling them to lead fulfilling lives. This vision was shared by the staff team, staff described the importance of seeing people as equals and told us that sharing experiences with people and seeing them grow made their jobs rewarding.
- The values of the home were based upon the social model of disability. The registered manager led the team to explore how they could remove barriers to inclusion. The registered manager told us in the PIR, 'We are all equal, we are not above, or in charge of, people because they have been diagnosed with learning disabilities.' This approach was evident in everything the home did. For example, when people expressed that they did not like staff the registered manager took time to understand why and then offered advice to staff to improve their approach. This had a positive impact on relationships between staff and people living at the home.
- Person centred values and leadership were also evident in the approach to understanding and managing behaviour. The registered manager led with a belief that 'behaviours' were a method of communication. Under her leadership the staff team had got to know each person really well. Consequently, there had been a huge reduction in the frequency and severity of incidents and people enjoyed life more. A member of staff spoke of one person and said, "I have seen a huge change in [name], they came here with six staff. We have got to know them and they are happier."
- People and relatives spoke very highly of the registered manager. People used words such as "amazing," "brilliant" and "exceptional" to describe her. The registered manager knew each person very well and communicated differently with everyone, taking in to account their abilities and personality. People living at Sutton House clearly had a lot of affection for the registered manager and there was a mutual respect.
- Staff were consistently positive about working at Sutton House. One member of staff commented, "I am

really proud of how we support people here. It's a great place for people to live and a great place for people to work."

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

- Staff had a clear understanding of their roles and their day to day work was directed by people living at the home.
- There was a culture of openness and transparency and the management team actively encouraged staff to whistle blow on poor practice. The registered manager told us in the PIR, 'If we observe staff appearing to be controlling, we challenge this immediately.' The registered manager discussed the safeguarding and whistleblowing policy with staff in every supervision and reminded what to do if they had concerns about management staff. There were several examples where staff had shared concerns about changes in people's behaviours or the conduct of staff. In each case swift action had been taken to ensure people's safety and make sure they remained in control of their lives.
- The registered manager had plans to further develop the staff team by assigning 'champion' roles in areas such as Human Rights and Mental Capacity. They hoped this would enhance the role of support staff and help empower them to stay up to date with new developments.
- It is a legal requirement that a provider's latest CQC inspection report is displayed at the service and online where a rating has been given. The provider had displayed their most recent rating in the home and on their website. We checked our records which showed the registered manager had notified us of events in the home as required. This helps us monitor the service.
- Information was stored in accordance with the General Data Protection Regulation (GDPR). The management team had training in this area and the provider had assigned a GDPR officer to ensure compliance.

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

- The service regularly sought people's views. People and staff were empowered to voice their opinions, and the management team always responded to comments put forward.
- The registered manager had an open-door policy and people came to her frequently with concerns and other matters. She regularly supported people in activities and outings to ensure she had good relationships with them and fully understood their needs and preferences.
- Feedback from recent surveys was very positive. Comments included, 'Care is 100% excellent, Sutton House is an amazing place,' and, 'I feel extremely fortunate to have [relative] at Sutton House.'
- People were invited to attend regular house meetings. Creative techniques were used to involve people and ensure their understanding. Key themes such as dignity, complaints and safeguarding were repeated at each meeting to refresh people's memories. People were consulted about things that affected them. For example, the registered manager brought her dog to visit people, she checked with them each meeting to ensure this was still okay.
- In addition to the surveys, meetings and formal ways of gathering feedback, the service learnt from each person's the day to day experiences to make improvements.
- The provider recognised and supported the diverse needs of the staff team. Some staff spoke English as a second language and the provider had invested in an English teacher to build staff skill. The course was focused on social care to ensure its relevance and staff were paid to attend.

Continuous learning and improving care

- There were organised, effective systems in place to monitor and improve the quality of the service. The management team conducted a comprehensive programme of regular audits covering areas such as support plans, the environment and medicines. These audits were effective in identifying areas for

improvement and where issues had been identified actions were recorded as having been completed. The management office was located just off the communal area which meant the registered manager could keep staff practice under constant review.

- The service was based upon best practice and the registered manager was passionate about continuing to develop and innovate. The registered manager attended local and national meetings and training courses and networked with other local managers to keep up to date.

Working in partnership with others

- The team at Sutton House worked in partnership with other organisations to support the provision of high quality care. Professionals were invited to give feedback on the home in regular surveys.