

Miss Laura Karen Dennett

Dennett's Support

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

Dennett's Support is a care home which provides accommodation and personal care for up to four people with mental health needs. At the time of our inspection three people were living at Dennett's Support.

This inspection took place on 24 April 2015 and was unannounced.

The registered provider is an individual and is in day to day charge of the service. The service does not have a condition of registration that they must have a registered manager.

People who use the service were positive about the care they received and praised the quality of the staff and management. Comments from people included, "I feel safe here, staff provide support if I need it" and "There is nothing I would change to make things better"

People told us they felt safe when receiving care and were involved in developing and reviewing their support plans. Systems were in place to protect people from abuse and harm and staff knew how to use them.

Staff understood the needs of the people they were supporting. People told us staff provided support with kindness and compassion.

Staff were appropriately trained and skilled. They received a thorough induction when they started working

Summary of findings

for the service. They demonstrated a good understanding of their roles and responsibilities, as well as the values and philosophy of the service. The staff had completed training to ensure the care and support provided to people was safe and effective to meet their needs.

The service was responsive to people's needs and wishes. People had regular group and individual meetings to

provide feedback and there were robust complaints procedures. One person told us "I am able to raise any concerns at the house meeting, they (staff) would sort out any problems "

The provider assessed and monitored the quality of care. The service encouraged feedback from people and their relatives, which they used to make improvements.

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?

The service was safe. People who use the service said they felt safe when receiving support.

There were sufficient staff to meet people's needs safely. People felt safe because staff treated them well and responded promptly when they requested support.

Systems were in place to ensure people were protected from abuse. People were supported to take risks and were involved in developing plans to manage the risks they faced.

Good



Is the service effective?

The service was effective. Staff had suitable skills and received training to ensure they could meet the needs of the people they supported.

People's health needs were assessed and staff supported people to stay healthy. People were supported to develop skills to plan and cook meals independently.

Staff recognised when people's needs were changing and worked with other health and social care professionals to make changes to their care package.

Good



Is the service caring?

The service was caring. People spoke positively about staff and the support they received. This was supported by what we observed.our observations.

Support was delivered in a way that took account of people's individual needs and in ways that maximised their independence.

Staff provided care in a way that maintained people's dignity and upheld their rights. People's privacy was protected and they were treated with respect.

Good



Is the service responsive?

The service was responsive. People and their relatives were supported to make their views known about their support. People were involved in planning and reviewing their support package.

Staff had a good understanding of how to put person-centred values into practice in their day to day work and provided examples of how they enabled people to maintain their skills.

People told us they knew how to raise any concerns or complaints and were confident that they would be taken seriously.

Good



Is the service well-led?

The service was well led, with strong leadership and values, which were person focused. There were clear reporting lines through to senior management level.

Systems were in place to review incidents and audit performance, to help identify any themes, trends or lessons to be learned. Quality assurance systems involved people who use the service, their representatives and staff and were used to improve the quality of the service.

Good



Dennett's Support

Detailed findings

Background to this inspection

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

This inspection took place on 24 April 2015 and was unannounced.

The inspection was completed by one inspector. Before the inspection, the provider completed a Provider Information Return (PIR). This is a form that asks the provider to give

some key information about the service, what the service does well and improvements they plan to make. We looked at the notifications sent to us by the provider. Notifications are information about specific important events the service is legally required to send to us. We also received feedback from a mental health nurse who had contact with the home and the manager of the mental health social work team.

During the visit we spoke with two people who use the service, three members of staff and the registered provider. We spent time observing the way staff interacted with people who use the service and looked at the records relating to support and decision making for three people. We also looked at records about the management of the service.

Is the service safe?

Our findings

At the last inspection on 12 May 2014 we identified that the service was not meeting Regulation 13 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010. This was because of the way medicines were stored was not always safe. The provider sent us an action plan and said they had taken action to address the issue. During this inspection we found that medicines were stored safely.

Medicines held by the home were securely stored and people were supported to take the medicines they had been prescribed. Since the last inspection the provider had installed a locked medicine cabinet in each of the bedrooms. This meant people had somewhere to store their medicines safely if they were managing them independently. At the time of the inspection no-one was managing their own medicines, although there were systems in place should they be needed. We saw a medicines administration record had been fully completed. This gave details of the medicines people had been supported to take, a record of any medicines people had refused and the reasons for this. There was a record of all medicines received into the home and returned to the pharmacist. The mental health nurse we spoke with following the inspection said medicines in the home were managed well. The home's supplying pharmacist completed periodic audits of the medicines systems. The most recent was in September 2014 and contained positive feedback, with no actions for improvement.

Both of the people we spoke with said they felt safe living at Dennett's Support. Comments included "I feel safe here, staff provide support if I need it" and "I feel very safe here".

Staff had the knowledge and confidence to identify safeguarding concerns and act on them to protect people. They had access to information and guidance about safeguarding to help them identify abuse and respond appropriately if it occurred. Staff told us they had received safeguarding training and we confirmed this from training records. Staff were aware of different types of abuse people may experience and the action they needed to take if they suspected abuse was happening. They said they would

report abuse if they were concerned and were confident the provider would act on their concerns. Staff were also aware of the whistle blowing policy and the option to take concerns to agencies outside the service if they felt they were not being dealt with.

Risk assessments were in place to support people to be as independent as possible, balancing protecting people with supporting people to maintain their freedom. We saw assessments about how to support people to budget for and prepare meals and to socialise independently. The assessments included details about who was involved in the decision making process and how any risks were going to be managed. We saw that people had been involved throughout this process and their views were recorded on the risk assessments. The staff we spoke with demonstrated a good understanding of these plans, and the actions they needed to take to keep people safe.

Effective recruitment procedures ensured people were supported by staff with the appropriate experience and character. This included completing Disclosure and Barring Service (DBS) checks and contacting previous employers about the applicant's past performance and behaviour. A DBS check allows employers to check whether the applicant has any convictions that may prevent them working with vulnerable people. We saw that these checks had been completed for the one person employed by the service over the last year.

Sufficient staff were available to support people. People told us there were enough staff available to provide support for them when they needed it. Comments included, "Staff are available if I need them". Staff told us they were able to provide the support people needed, with comments including, "The way the service is managed I am able to provide support that meets people's needs". Staff said they worked together to cover sickness to ensure people's needs were met. We observed the staffing rota being amended due to people's specific needs and preferences. Where only one female service user was going to be at home overnight, the rota was changed to ensure a female member of staff was working.

Is the service effective?

Our findings

People told us staff understood their needs and provided the support they needed, with comments including, “Staff provide support if I need it”; and “There is nothing I would change to make things better”. The mental health nurse we spoke with was positive about the support they had observed, commenting that staff had the skills and knowledge to meet people’s needs and help them with their recovery.

Staff told us they had regular meetings with their line manager to receive support and guidance about their work and to discuss training and development needs. We saw these supervision sessions were recorded and there were scheduled regular one to one meetings for all staff throughout the year. Staff said they received good support and were also able to raise concerns outside of the formal supervision process. Comments from staff included, “I receive good support and supervision. I am able to raise any issues and there is an open discussion”.

Staff told us they received regular training to give them the skills to meet people’s needs, including a thorough induction and training on meeting people’s specific needs. For example, additional training on personality disorders was being organised for staff due to people’s specific needs. This was confirmed in the training records we looked at. One member of staff told us, “Training is excellent, it is tailored to the specific needs of the service”.

Staff demonstrated a good understanding of the principles of the Mental Capacity Act 2005 (MCA) and how the Deprivation of Liberty Safeguards (DoLS) worked. The MCA provides the legal framework to assess people’s capacity to make certain decisions, at a certain time. When people are assessed as not having the capacity to make a decision, a

best interest decision is made involving people who know the person well and other professionals, where relevant. The Deprivation of Liberty Safeguards are part of the Act. The DoLS provides a process by which a person can be deprived of their liberty when they do not have the capacity to make certain decisions and there is no other way to look after the person safely. They aim to make sure that people in care homes are looked after in a way that does not inappropriately restrict or deprive them of their freedom.

At the time of the inspection there were no authorisations to restrict people’s liberty under DoLS. Staff understood the importance of assessing whether a person had capacity to make a specific decision and the process they would follow if the person lacked capacity.

People told us they enjoyed the food provided by the home and were able to choose meals they liked. People also said they were able to do some of their own cooking and shopping, which helped them to develop their skills to live independently. Comments included, “I get support to do some self catering and some food is provided. The food provided is excellent”. We saw that people were supported to prepare meals of their choice during the visit.

People told us they were able to see health professionals where necessary, such as their GP, mental health nurse or psychiatrist. People’s support plans described the support they needed to manage their health needs. There was clear information about monitoring for signs of a mental health crisis, details of support needed and health staff to be contacted. The mental health nurse we spoke with said the staff contacted them when necessary, for example if there were any changes in people’s mental health. The manager of the mental health social work team told us the service works well with the social workers who provide support to people.

Is the service caring?

Our findings

People told us they were treated well and staff were caring. Comments included, “I can talk to the staff at any time” and “I am happy here, I get on well with the staff”. We observed staff interacting with people in a friendly and respectful way. Staff respected people’s choices and privacy and responded to requests for support. For example, we observed staff talking to one person about their plans for the weekend and providing support and reassurance to one person who was concerned.

The mental health nurse we spoke with also told us people were treated well by staff. They told us they observed staff interacting with people in a respectful and friendly way and said staff had developed good relationships with people.

Staff had recorded important information about people, for example, personal history, plans for the future and important relationships. People’s preferences regarding their daily support were recorded. Staff demonstrated a good understanding of what was important to people and how they liked their support to be provided, for example people’s preferences for the way staff supported them with their mental health needs. This information was used to ensure people received support in their preferred way.

People were involved in all decisions about their support. People had been involved in developing their support plans, including information about the coping strategies they used and how they recognised signs that they were becoming unwell. People had regular individual meetings with staff to review how their support was going and whether any changes were needed. Details of these reviews and any actions were recorded in people’s support plans. The service had information about local advocacy services and had made sure advocacy was available to people. This ensured people were able to discuss issues or important decisions with people outside the service.

Staff received training to ensure they understood the values of the service and how to respect people’s privacy, dignity and rights. This formed part of the core skills expected from staff and was mandatory training for everyone working in the service. People told us staff put this training into practice and treated them with respect. Staff described how they would ensure people had privacy, for example ensuring personal discussions took place in private.

Is the service responsive?

Our findings

People told us they were able to keep in contact with friends and relatives and take part in activities they enjoyed. One person told us they were going to college to study motor mechanics and hoped to get an apprenticeship once the course was completed. Another person said they were hoping to register for a course to develop skills working with animals. We saw that staff had provided support for the person to gain qualifications necessary to enrol on the course and support to apply for work placements.

Each person had a support plan which was personal to them. The plans included information on maintaining people's health, their daily routines and goals to develop skills to live independently. The support plans set out what their needs were and how they wanted them to be met. The plans followed the recovery pathway model, which aims to support people to develop self-esteem and independent thinking skills to enable them to cope with their mental health needs. This gave staff access to information which enabled them to provide support in line with people's individual wishes and preferences. The plans were regularly reviewed with people and we saw changes had been made following people's feedback in these reviews.

People were confident any concerns or complaints they raised would be responded to and action would be taken to address their problem. People told us they knew how to complain and would speak to staff if there was anything they were not happy about. People told us, "I am able to raise any concerns at the house meeting, they would sort out any problems" and "I can talk to staff at any time. I'm able to raise any concerns and they help me to sort it out". The provider reported the service had a complaints procedure, which was provided to people when they moved in. Staff were aware of the complaints procedure and how they would address any issues people raised in line with them. We saw there had been one complaint in the last year. The issue had been discussed with everyone involved and action taken to resolve it.

The service had regular house meetings in which people could discuss any concerns or suggestions for the way the house was managed. We saw that the most recent meeting included discussions about restrictions of alcohol in the home, details about the home's refurbishment programme and suggestions for activities that people could take part in. The provider attended the meetings to answer any questions and take any concerns forward to be dealt with. We saw from the records action was taken in response to the concerns people raised, for example, support to register on the electoral roll and how daily activities were planned.

Is the service well-led?

Our findings

The registered provider was in day to day charge of the service and also employed a manager in the home. The provider had clear values about the way care and support should be provided and the service people should receive. These values were based on the recovery model and providing a person centred service in a way that maintained people's dignity and maximised independence. Staff valued the people they supported and were motivated to provide people with a high quality service. The provider told us she wanted to focus on the skills of the staff team, allowing them to take on leadership roles in particular areas to promote and enhance the service. Staff told us the provider had worked to create an open culture in the home that was respectful to people who use the service and staff.

Staff had clearly defined roles and understood their responsibilities in ensuring the service met people's needs. There was a clear leadership structure and staff told us managers gave them good support and direction. Comments from staff included, "The management team have excellent values and instil the ethos of the service in all that they do" and "Decisions are made based on what it will mean to people using the service".

The management team completed regular audits of the service. These reviews included assessments of incidents,

accidents, complaints, training, staff supervision and the environment. The audits were used to develop action plans to address any shortfalls and plan improvements to the service. We saw these action plans were regularly reviewed and updated, to ensure they had been implemented effectively. Details of these action plans were shared with people who use the service through their meetings.

Satisfaction questionnaires were sent out yearly asking people, their relatives, staff and professionals their views of the service. The results of the 2015 survey had been received and were going to be collated by the provider. No concerns had been raised about the support people received. Comments from professionals who had contact with the service included, "I have found Dennett's Support to be open, honest, fair and transparent" and "The staff at Dennett's Support follow recommended good practice for patient centred care, involving their clients in a holistic approach to develop confidence and self esteem to help in their recovery".

There were regular staff meetings, which were used to keep staff up to date and to reinforce the values of the organisation and how they expected staff to work. Staff also reported that they were encouraged to raise any difficulties and the provider worked with them to find solutions.