

Harrogate Skills 4 Living Centre Brackenley

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?	Outstanding ☆

Summary of findings

Overall summary

About the service: Brackenley provides support for younger adults and older people who may be living with a learning disability or autistic spectrum disorder, dementia, a physical disability, sensory impairment, mental health needs or an eating disorder.

The service was registered for the support of up to 13 people, and 13 people were using the service at the time of our inspection. This is larger than current best practice guidance for a service supporting people with a learning disability. However, the size of the service having a negative impact on people was mitigated. The service was in a residential neighbourhood, close to local amenities, and by the building design fitted into the local area.

People's experience of using this service:

People received kind, caring and effective support to meet their needs. The service applied the principles and values of Registering the Right Support and other best practice guidance. These ensure that people who use the service can live as full a life as possible and achieve the best possible outcomes that include control, choice and independence.

The provider and registered manager were exceptionally committed to continually improving and developing the service to meet people's individual needs and improve their quality of life. They promoted an open, transparent and very person-centred culture. People were at the heart of the service; management consistently recognised what was important to people and were very responsive and passionate about providing high-quality care to meet their needs. Staff praised the communication and strong leadership and were proud of the service they provided. There was high levels of engagement and a strong focus on staff development to continually improve the quality of care provided.

Staff provided effective care; they were confident in their knowledge and skills, understood people's needs and knew how best to support them. Staff worked closely with professionals; they sought advice and guidance to make sure they provided the most effective care they could to meet people's needs. If people were unwell, staff advocated on people's behalf to make sure they received the medical attention they needed.

Staff were caring; they were attentive to people's needs and provided dignified and respectful support. People told us they felt safe and praised the care and support that staff provided. Staff treated people with kindness, dignity and respect.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice. People routinely made choices about all aspects of their care. Staff supported people to express their wishes and views and were proactive in using accessible information to help people make

decisions.

People were supported to access a very wide range of meaningful activities and to pursue their hobbies and interests. People had access to a varied choice of meals and snacks were available. Staff monitored people's needs, promoted health choices and provided support if necessary to make sure people ate and drank enough.

Supervisions and appraisals provided an opportunity for staff to reflect on their performance and identify goals for the future.

For more details, please see the full report which is on the Care Quality Commission's (CQC) website at www.cqc.org.uk.

Rating at last inspection: At the last inspection service was rated Good (report published 24 October 2016).

Why we inspected: This was a planned inspection based on the previous rating.

Follow up: We will continue to monitor intelligence we receive about the service until we return to visit as per our re-inspection programme. If any concerning information is received, we may inspect sooner.

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 caring.

Details are in our Caring findings below.

Good ●

Is the service responsive?

The service was responsive.

Details are in our Responsive findings below.

Good ●

Is the service well-led?

The service was exceptionally well-led.

Details are in our Well-Led findings below.

Outstanding ☆

Brackenley

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 carried out by one inspector and an expert-by-experience. An expert-by-experience is a person who has personal experience of using or caring for someone who uses this type of service.

Service and service type: This service is a care home. People in care homes receive accommodation and nursing or personal care as single package under one contractual agreement. 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 CQC. 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 first day of our inspection was unannounced. We told the provider we would be visiting on the second day.

What we did: Before the inspection we checked information the provider had sent us about incidents that occurred and which affected their service or the people who used it. We sought feedback from the local authority and professionals who work with the service. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections.

During the inspection we spoke with five people who used the service, two people's relatives, and two healthcare professionals about their experience of the care provided. We spoke with the registered manager, chief executive officer, quality and compliance manager, and four members of staff.

We reviewed a range of records. This included four people's care records and medication records. We looked at three staff files in relation to recruitment, as well as induction, training and supervision records for the staff team. We looked at meeting minutes, quality assurance audits and a selection of other records relating to the management of the service.

Is the service safe?

Our findings

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

People were safe and protected from avoidable harm. Legal requirements were met.

Assessing risk, safety monitoring and management; Systems and processes to safeguard people from the risk of abuse.

- People were protected from avoidable harm; staff understood people's needs and provided safe support to promote people's independence whilst helping to minimise risks.
- People told us they felt safe and praised the care staff provided. A person explained, "I'm safe here, the staff all keep an eye on you."
- Staff identified and assessed risks; care plans contained guidance to support staff on how to safely meet people's needs. This included information on how to avoid restrictive practices and safely support people if they became anxious or upset.
- People were kept safe by staff who understood how to identify and respond to safeguarding concerns.

Using medicines safely.

- People were supported to take their prescribed medicines; staff had been trained and checked to make sure they knew how to safely administer medicines.
- Medicines were safely received, stored, and disposed of when no longer needed; regular audits helped management check medicines were managed safely.
- People's needs were regularly reviewed, and staff worked closely with their GPs to make sure medicines were not over used.

Learning lessons when things go wrong.

- Staff responded to accident and incidents to make sure people received the support they needed; management acted to change the way people were supported in response to new risks or concerns.
- The provider was in the process of reviewing how accidents and incidents were recorded to help them better monitor how they were handled.

Staffing and recruitment.

- Staff were safely recruited; recruitment checks and a strong focus on assessing values helped make sure suitable caring staff were employed.
- Enough staff were deployed to meet people's needs; a person told us, "The staffing levels are great, they come quickly when I use the call bell."
- Staff were available throughout the home and were patient and attentive supporting people. A member of staff said, "The staffing levels are good; we are always pretty busy, but we've got support if we need it."

Preventing and controlling infection.

- The service was clean and free from malodour.
- Staff followed good infection prevention and control practices; they used personal protective equipment,

such as gloves, to help prevent the spread of healthcare related infections.

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.

People's outcomes were consistently good, and people's feedback confirmed this.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law; Staff working with other agencies to provide consistent, effective, timely care.

- People received effective care; staff completed holistic assessments and regularly reviewed the support they provided to make sure it met people's needs.
- Staff worked closely with people's families and healthcare professionals to plan and deliver care in a way that met people's individual needs. A professional told us, "The staff are very engaged, interested and holistic in their outlook, and very keen to make the client's life better."

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

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The MCA requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

People can only be deprived of their liberty to receive care and treatment 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.

- People were routinely involved in decisions about their care; staff sought people's consent and supported them to have choice and control over all aspects of their support.
- People's rights were protected; staff assessed people's mental capacity and made best interest decisions when needed.
- Appropriate applications had been made to deprive people of their liberty.

Supporting people to live healthier lives, access healthcare services and support.

- People were supported and encouraged to live active healthy lives.
- Staff were proactive in monitoring people's health and wellbeing and sought medical support when needed; a person said, "If I'm not well, the staff give me my medicine; if it's serious they call the Doctor."
- Staff were strong personal advocates for the people they supported; they worked closely with professionals to make sure people received timely care, support and medical treatment when needed to maintain their health and wellbeing.

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

- People had been actively involved in the design and decoration of the service; a plan was in place to continue redecorating areas of the service to meet people's individual needs and preferences.
- People had been empowered to personalise their bedrooms; the provider supported people to redecorate and went the extra mile to make sure people had unique personal spaces to enjoy and which improved their sense of wellbeing.

Staff support: induction, training, skills and experience.

- People benefited from the very skilled and effective care staff provided. A person told us, "The staff are very experienced, they always know how to handle things."
- New staff completed an induction, training and shadowed more experienced members of the team.
- The provider had a strong commitment to ongoing training and staff development; they sourced additional tailored training to help staff meet people's individual needs.
- Staff were encouraged to continually learn and develop their practice; regular supervisions and annual appraisals helped staff identify learning objectives and was integral to ensuring people received high quality care and support.
- The provider was proactive supporting staff to complete additional learning and training courses; one member of staff had completed training in holistic therapies and people benefited from the sessions they delivered within the service.

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

- People had access to a varied and balanced diet; people told us, "The food is delicious" and "They encourage us to eat fruit and vegetables, but I still decide myself what I'll have."
- Staff recorded what people had eaten and regularly weighed people to help monitor and make sure they had a varied and balanced diet which met their nutritional needs.

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.

People were supported and treated with dignity and respect; and involved as partners in their care.

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

- Staff were kind and caring. A person told, "It's my home; I love it here and I get on with all the staff."
- People benefited from the support of a consistent and caring team; a number of staff had worked at the service for a long time and were very experienced.
- People had a good rapport and shared positive caring relationships with staff; they were at ease in staff's company and spoke confidently, laughed and joked with them.
- Staff were sensitive and respectful in recognising and supporting people to meet their diverse needs.
- People were supported to maintain their dignity; staff helped people meet their personal care needs and dress according to their personal preferences.

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

- People felt empowered to express their views and make decisions; a person explained, "The best thing with living here is the freedom of choice."
- Staff listened to people and responded to their requests; they worked hard to understand what was important to people and planned their care accordingly.
- People were supported to communicate their wishes and views; their care plans included detailed information about how they communicated.
- Staff used picture cards, and a wide range of other accessible information to help people understand and be involved in decisions to maintain their independence.

Respecting and promoting people's privacy, dignity and independence.

- Staff were respectful, kind and caring; they treated people with dignity and were respectful in how they spoke with and supported people.
- People had privacy and staff respected their personal space; they knocked on people's doors before entering their bedrooms.
- People were free to live how they chose, and staff were not restrictive in the way they approached and supported people.
- People benefited from specialist equipment and adaptations, which helped them to maintain their independence. A professional told us, "I have always found the management very accommodating; they have offered to make larger scale adaptations if necessary to meet people's needs."

Is the service responsive?

Our findings

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

People's needs were met through good organisation and delivery.

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

- People received very person-centred care; staff had a detailed understanding of people's needs and what was important to them. A professional told us, "The staff really know the people and are really caring; they know their history and what is important to that person."
- People's holistic needs were assessed and regularly reviewed; people were actively involved in this process and were encouraged to identify goals, which staff supported them to achieve.
- Staff worked closely with professionals to review people's individual needs, and advocate on their behalf to ensure these were met.
- People enjoyed taking part in a very wide range of person-centred activities; staff supported and encouraged people to pursue their hobbies and interests. A member of staff explained, "If anyone wants to go on a trip or a day out then their keyworkers organise it. If people want to do something, we try to the best of our ability to make that happen."
- Staffing levels changed to support people with their varied and busy activities; management encouraged staff to go the extra mile to support people to do the things they enjoyed.
- People had free access to an accredited education and training centre run by the provider. They benefited from support to complete a wide range of classes, which focussed on promoting independence, reducing social isolation, supporting people to access their community and to find meaningful employment. Other people exercised in a gym the provider had created to promote healthy lifestyles and improve people's wellbeing.

Improving care quality in response to complaints or concerns.

- People felt comfortable and were confident speaking with staff if they were unhappy or needed to complain. A person told us, "If I have any problems, the staff listen." A relative said, "We feel happy that any issues or concerns are taken on board."
- Management were proactive in responding to issues or concerns; they investigated complaints and acted to resolve these to improve the service.

End of life care and support.

- Staff explored and recorded people's end of life wishes.
- Although people did not require support with end of life care at the time of our inspection; the provider offered training for staff to develop their knowledge, skills and confidence should they need to support people approaching the end of their life in future.

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.

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 with openness; and how the provider understands and acts on their duty of candour responsibility.

- People were at the heart of the service. Management promoted a very strong and positive person-centred culture; they consistently recognised the things that were important to people and were passionate about providing high-quality care to meet their needs and improve their quality of life.
- These values were understood and clearly reflected at all levels within the service; the staff worked collaboratively to deliver this high-quality care. A member of staff explained, "It's all about the people and making their lives better."
- There was an exceptionally strong culture of learning and focus on nurturing and developing staff; staff had been encouraged to identify and complete additional training to improve the service. For example, one member of staff had completed extra training to develop the menus and work towards incorporating more fresh fruit and vegetables from the home's allotment.
- Staff felt valued; they were motivated to continually learn, develop and improve their practice and were proud of the service. A member of staff told us, "It's really rewarding, I love this job. I love that we can come in and make people's day a little bit brighter."
- Staff were continually encouraged to identify what was important to people and support them to achieve their goals; management consistently provided time and resources to enable staff to work in this very person-centred way. This included supporting staff to develop a sensory space for people to use and enjoy, as well as training for a member of staff to deliver holistic therapies to help people relax.
- A strong and effective keyworker system helped ensure people received person-centred care and supported close working relationships between staff, families and other professionals.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care.

- Management were committed to ongoing learning; there was a distinctive aspirational approach to how the service was run. The provider and registered manager continually strived to provide an excellent service.
 - The provider understood Registering the Right Support and other best practice guidance; they had been proactive in making sure people had choice and control in customising the service and designing unique personal spaces. Staff understood it was people's home and empowered them to be involved in decisions and live as independently as possible.
 - People received high-quality person-centred care, because of the strong focus on ongoing learning and continuous improvement; the provider monitored research and best practice guidance and delivered additional training to make sure staff kept up-to-date with new developments in adult social care.
 - The registered manager and provider regularly assessed the quality of service; they identified where

improvements could be made, set themselves stretching and challenging goals and worked hard to make changes which benefited people who used the service.

- The provider and registered manager welcomed feedback and were proactive in seeking and implementing advice and guidance from external auditors; this helped make sure the service met legal requirements and continued to follow best practice guidance.

Working in partnership with others; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics.

- Management were approachable and very supportive of staff; a member of staff explained, "It's so much fun working here, we have got such good teamwork, we are like a big family and we help each other. The manager is incredible if you have got a problem they will sort it, they are absolutely fantastic."
- The provider and registered manager continually worked to engage people, seek feedback, explore issues and concerns, and to find ways the service could be improved. There was a high level of engagement in the staff team. A member of staff said, "Management are really supportive, any ideas we come up with they try and find a way to make it work."
- The provider worked with other professionals and organisations to seek out new ideas and develop opportunities for people. This included developing work placements for people with local organisations.
- People's views and experience were central in how management monitored the quality of the service; there were high levels of engagement and people were actively encouraged to make suggestions and voice any issues or concerns; for example, 'Client meetings' and regular surveys provided an opportunity to feedback about meals and activities. Staff listened and responded to requests empowering people to be in control of the support they received.
- People, relatives and visitors completed surveys; management used these to gather feedback about how they could improve the service. Newsletters, regular dialogue and an annual barbeque provided further opportunities to share information, network with relatives, professionals and friends and build effective working relationships.
- Professionals told us staff were proactive in seeking advice, working with them and responding to their recommendations; they praised staff's commitment to better understanding people's needs and to develop their practice.