Yunicorn Limited

Brooklands

Inspection report

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Ratings

Overall rating for this service	Good

Is the service safe?	Good
Is the service effective?	Good
Is the service caring?	Good
Is the service responsive?	Good
Is the service well-led?	Good

Summary of findings

Overall summary

We undertook an inspection on 7 February 2017. This was an unannounced inspection. Brooklands provides accommodation and personal care for up to nine people with a learning disability. On the day of our inspection there were six people living at the home.

At the last inspection on December 2015, we asked the provider to take action to make improvements to ensure DoI applications were made when required, at this inspection we found this action has been completed.

There was a registered manager for this service. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered providers and registered managers 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.

People we spoke with said they had support from regular staff who knew them well, and they felt safe at the home. Relatives told us their family members were cared for in a safe way. Staff we spoke with recognised the different types of abuse. There were systems in place to guide staff in reporting any concerns. Staff were knowledgeable about how to manage people's individual risks, while remaining focussed on supporting people to be as independent as possible. People were supported to receive their medicines by staff who were trained to do so and knew about the potential risks associated with people's medicines.

Staff had up to date knowledge and training to support people living at the home. Staff always ensured people agreed to the support they received. The registered manager ensured people were supported in the least restrictive way and were supported to make their own decisions where possible. People told us they enjoyed the food at the home and were encouraged to make their own meal choices. They explained that they were supported to make their own decisions and be as independent as they could. People and their relatives told us staff would access health professionals as soon as they were needed.

People said the staff and the registered manager were caring and always treated them with dignity and respect. Relatives told us they were involved as part of the team to support their family member. Staff understood people's human rights and adapted their communication skills to ensure people understood them. People had access to the wider community and said their cultural needs were met.

The staff team were adaptable to changes in peoples' needs and knew people well to recognise when additional support was needed. All the people we spoke with and the feedback collected by the registered manager and provider said how happy people were to be living at the home. People and their relatives knew how to raise complaints and the registered manager had arrangements in place to ensure people were listened to and appropriate action taken. Staff were involved in regular meetings and one to one time with the registered manager to share their views and concerns about the quality of the service.

The registered manager and the provider had systems in place to monitor the quality of care provided. The registered manager ensured there was a culture of openness and inclusion for people using the service and staff.

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

People were supported by staff who knew how to provide care in a safe way. People benefitted from regular staff that knew them well and managed their identified risks. People were supported with their medicines in a safe way.

Is the service effective?

Good

The service was effective

People were supported by staff with up to date training and who were knowledgeable about how to support them. Staff respected people's right to make their own decisions. People made their own choices about what they wanted to eat. People were supported to access health care when they needed to.

Is the service caring?

Good

The service was caring

People received caring and compassionate support from staff and the registered manager. Staff adapted their communication techniques to ensure people understood them. People were respected and their dignity maintained by staff while supported to be as much independence as possible.

Is the service responsive?

Good

The service was responsive

People were supported by staff who listened and were adaptable to their needs. People were regularly asked for their opinions on the care they received. People and their relatives were confident any concerns they raised would be responded to appropriately.

Is the service well-led?

Good

The service was well-led.

People, relatives and staff were supported by the management team. The culture of the service was focussed on each person as

an individual and involved them with all aspects of their care. The provider and registered manager regularly completed checks to monitor the quality of the care provided.

Brooklands

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 was planned to check 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 was an unannounced inspection which took place on 7 February 2017. The inspection team consisted of one inspector.

We asked the local authority if they had any information to share with us about the services provided at the home. The local authorities are responsible for monitoring the quality and funding for people who use the service. Additionally, we asked Healthwatch if they had any information to share with us. Healthwatch are an independent consumer champion, who promotes the views and experiences of people who use health and social care.

We looked at the information we held about the provider and this service, such as incidents, unexpected deaths or injuries to people receiving care, this also included any safeguarding matters. We refer to these as notifications and providers are required to notify the Care Quality Commission about these events.

We spoke with five people and two relatives. We looked at how staff supported people throughout the day. We observed how staff supported people throughout the day. As part of our observations we used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us.

We spoke with two staff and the registered manager. We looked at the care records for three people including their medicine records, and other records relevant to the quality monitoring of the service such as visits from the provider.

Good

Is the service safe?

Our findings

People we spoke with told us they felt safe because they were happy where they lived and knew staff well. One person said, "I have a mobile phone with me always, so I am safe when I go out by myself." Another person told us, "I'm safe here; they [staff] are always around." We saw positive interactions between staff and people living at the home. People appeared relaxed and confident with staff throughout the inspection. Relatives told us their family member received support to remain safe. A relative said, "They encourage [family member] to be independent safely." Another relative explained how they would know from their family member's body language if they were unhappy at the home, and said they always appeared happy.

The registered manager and staff explained their responsibilities to identify and report potential abuse under the local safeguarding procedures. All the staff we spoke with had a clear understanding of their responsibility to report any potential abuse and who they could report it to. They had a good knowledge of the people they supported and said they would know if people living at the home had any concerns. They told us they completed regular training on potential abuse and safeguarding concerns. This was also reviewed in team meetings and one to one meetings with the registered manager to support staff knowledge.

One person told us they had discussed their support needs with staff at the home. They said, "We always work out how to keep me safe and they [staff] help me." We saw people's risks to their health and welfare were identified and plans were in place to mitigate these risks. For example, the support people required with administering medicines and going out into the community. Staff explained how they managed risks to people while maintaining people's independence as much as possible. One relative explained how staff had put equipment in place for one person to support their independence in a safe way. They went onto to say how their family member enjoyed their independence.

People told us they were consistently supported by staff who knew them well. Staff we spoke with said they were an established team that knew people well. Any concerns during their shift would be acted on and passed onto staff during the end of shift handover. One member of staff said, "We always know what's been happening before we start." Staff were aware of how to manage people's risks and these were reflected in the risk assessments for each person. For example, one person had needed specialist equipment and we saw this had been purchased to ensure the person could be supported safely.

People we spoke with said there were always staff available when they needed them. Relatives told us there were sufficient staff on duty to meet their family member's needs. One relative explained how their family member was always well supported. They went onto say they popped in regularly at different times and there was always staff about and people's needs were met. Another relative confirmed their family member was able to do things they enjoyed with staff support. We saw and staff told us there were staff on duty to meet the needs of people living at the home. One staff member said, "We are all part of a family and work together to help everyone."

The registered manager told us staffing levels were determined by the level of support needed by people.

This was provided in a flexible way depending on what people living at the home wanted to do. The registered manager ensured there were sufficient, appropriately skilled staff to meet the needs of the people living at the home. Staff confirmed staffing levels were arranged around the interests of people living at the home and what people wanted to do. For example, staff told us additional staff would be arranged if needed to facilitate people to attend an event they were interested in.

Staff told us they completed application forms and were interviewed to check their suitability before they were employed. We saw and the registered manager said they checked with staff members' previous employers and with the Disclosure and Barring Service (DBS). The DBS is a national service that keeps records of criminal convictions. This information supported the registered manager to ensure suitable people were employed, so people using the service were not placed at risk through recruitment practices.

Some people needed support with their medicines. The registered manager said this was discussed with people living at the home and they were included in decisions about how they were supported where possible. One person we spoke with was aware of their medicines and knew what they needed support with if they were out for the day. Relatives we spoke with said their family member was supported with their medicines in a safe way. One relative explained how staff managed their family member's medical condition effectively which had improved their well-being as a result of this.

We saw people's care plans guided staff in how to support people with their medicines. Staff told us that these plans were updated when needed and they were aware of any changes. Staff had received training about administering medicines and their competency was assessed. They explained they felt confident when administering medicines to people. The registered manager ensured two members of staff always administered medicines; she regularly supported staff to monitor their practice. Where additional training was needed to administer some emergency medicines staff told us this had been completed and they were confident in the administration of these medicines. We saw medicines were kept and disposed of in a safe way.

Good

Is the service effective?

Our findings

People we spoke with told us staff knew how to support them. One person said about staff, "They are all brilliant and know how to help me." Relatives we spoke with told us staff were very knowledgeable about how to support people living at the home. One relative said, "I can't fault them, all the staff are so knowledgeable about what they are doing."

All the staff we spoke with had worked at the home for a number of years. The registered manager explained how any new staff would receive an induction before working independently with people. This included training, reading people's care plans, as well as shadowing a more experienced member of staff. The registered manager explained how she assessed and monitored staff practice to ensure people living at the home were effectively supported. Staff confirmed they received additional training specific to the people they supported, for example, epilepsy. One member of staff said this training ensured they had a good understanding of how to support people.

Staff told us they felt well supported and had regular supervisions and opportunities to review their training needs. They were encouraged by the registered manager to complete regular training to improve and update their skills. This training included the Mental Capacity Act 2005 (MCA); staff we spoke with explained what this meant for people they supported and had an understanding of the legislation.

The 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 we spoke with told us staff always asked before they supported them. Staff we spoke with told us they were aware of a person's right to refuse their support and explained how they manage this to ensure people's rights were respected. Staff told us they always ensured people consented to their care and we saw examples of this throughout our inspection. For example, we saw staff checked with people living at the home that they were ready to have their meal. Staff were aware of who needed support with decision making and who should be included in any best interests decision for people.

The registered manager had an understanding of the MCA and was aware of their responsibility to ensure decisions were made within this legislation. For example, one relative explained about how a best interests meeting had been arranged for their family member when they needed support with a particular piece of equipment which increased their independence. We also saw the registered manager had completed documentation which clearly showed how people needed to be supported with decisions. This supported staff and people living at the home to understand the process.

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA. The application procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS). We checked whether the service was working within the

principles of the MCA.

At our last inspection in December 2015 we found improvement was needed with ensuring DoI applications were made when required. At this inspection we found the registered manager had taken action and updated her training and completed applications to the local authority when they needed to. Staff and the registered manager understood the legal requirements for restricting people's freedom and ensuring people had as few restrictions as possible. We saw staff practice showed their understanding of least restrictive practice. For example, we saw people were able to move freely about the home with staff support for people when they needed this.

People said they had a range of choice about the food they ate and they enjoyed the food. One person said, "The food here is great, I really enjoy my meals." We saw people were offered choice and had prompts available to guide them with their menu choices. Staff told us they promoted people's independence as much as possible. Staff we spoke with said they encouraged people to make healthy choices to ensure they were maintaining a healthy diet with both food and drink.

People told us they received support with their all aspects of their health care when they needed it. One person said, "I see the doctor if I am not well." Relatives explained how staff were quick to act if their family member was unwell, and they were confident the appropriate action was taken. Staff had involved other health agencies as they were needed in response to the person's needs. For example, one relative told us their family member's medicines and well-being was regularly reviewed by a specialist nurse.

Good

Is the service caring?

Our findings

People we spoke with said all the staff were caring and kind. One person told us about staff, "They are all absolutely amazing; they are all really brilliant to me." Another person said they were happier living at the home than they had ever been, "We are all family." People we spoke with said they enjoyed spending time with staff and the registered manager.

Relatives told us all the staff were caring and knew their family members needs and preferences well. One relative said, "They are like a family, they all look out for each other." Another relative told us about their family member, "They are always happy to return home, if we have taken them out."

People we spoke with told us staff treated them as individuals and took into account their needs and preferences. One person we spoke with said about staff, "They really know me, and we all get on really well. They know what I like to do, and I can go out and do what I want." They went on to say how this helped with their well-being. A relative told us how their family member preferred to have times when they were on their own. They explained how staff supported their family member to do this safely. The relative said their family member was happy at the home, and they, "Can't fault the care here."

Staff we spoke with explained how they adapted their communication techniques with people according to their needs. We saw staff spent time ensuring people understood their conversation, making eye contact so they could look for visual clues about the person's well-being when they needed to. For example we saw one member of staff supporting one person to complete a puzzle, they let the person lead and went at their pace. The person reacted with smiles and enjoyment of the time spent with the member of staff.

People we spoke with told us staff supported them to maintain their independence. One person explained how staff only supported them when they wanted help which helped them feel more independent. Another person said they were able to be involved in everyday tasks, such as going to the shops for items needed at the home. The registered manager explained how she had visited the local shop and had risk assessed to ensure the person remained safe. Staff told us they adapted their support according to the persons needs at that time. For example, one person had fluctuating mobility so they would adapt their support depending on the persons needs at the time.

People we spoke with said they were treated with dignity and respect. One person explained how staff always listened to them and they worked together to achieve their goals. Relatives we spoke with said staff always maintained their family member's dignity and treated them with respect. Staff we spoke with showed a good awareness of people's human rights, explaining how they treated people as individuals and always listened to people's views. For example, we saw one person enjoyed the company of a particular member of staff. This staff member explained how they kept the continuity of support and they spent as much time as possible with the person, because this person responded positively to the member of staff.

People and their relatives told us they were supported to maintain important relationships. Staff had a good knowledge of people's preferences and life history. For example, we saw examples throughout the day of

staff using their knowledge of people's histories to communicate and improve people's well-being.

People were support by staff to maintain their links with the community. For example, one person told us they regularly attended events in the community such as clubs and charity events. Another person explained how they had done some work in a charity shop and how they valued this independence.

Good

Is the service responsive?

Our findings

People we spoke with said they were involved in decisions about their care. They told us they were consulted and involved with all aspects of how they were supported. One person said, "We talk about what I want help with, they [staff] always listen to me." People told us they knew staff well, and staff knew how they liked to be supported. Staff said they knew people's support needs could change from day to day, and knew people well enough to recognise when they required additional help. People we spoke with said when they needed extra help staff always supported them. Relatives told us staff were adaptable to meet the needs of their family member. One relative explained how their family member enjoyed helping others, and how the staff team supported their family member to achieve this.

People we spoke with said they were involved in sharing their needs and preferences. Relatives told us they had been involved with how their family member was supported from the start of them arriving at the home. They also said staff kept them involved and up to date. One relative said how reassuring their relationship with staff was, they told us, "They are all great with [family member], I am more than pleased."

Two people told us they regularly discussed their needs with their key worker and reviewed how they were supported and what they wanted to do next. They said they would say if they were not happy with something. One person said, "I can say if I am not happy, [registered manager] is wonderful and will always listen." All the people we spoke with said they were happy living at the home.

People told us they could choose what they wanted to do with their time. Some people did activities together and others chose things to do on their own. People told us they were never bored and always had interesting things they enjoyed to do. One person explained how they enjoyed attending events in the community. People we spoke with said there were organised activities such as trips out and regular meetings with local groups, which they enjoyed attending. They also told us they had regular holidays where they wanted to go. There were also pastimes that were specific to each person such as attending a religious meeting and church services.

Relatives told us that their family members had interesting things to do with their time which were individual to them. They told us how some people went out regularly to events in the community which their family members always enjoyed. One relative said, "They're always busy, there is brilliant entertainment, always something going on." Another explained how staff adapted the activities available to support the different levels of need for people living at the home. They went on to explain how their family member was never excluded from anything despite their higher level of need. They said, "Staff always include everyone if they want to participate."

People said they were regularly asked if they were happy with everything during their regular meetings with staff at the home. One person told us they were confident that if they were not happy with something the registered manager and staff would listen and help them resolve the issue.

Relatives said they were confident to speak to staff, the registered manager or the provider if they had any

concerns. Both relatives we spoke with said they had not had cause to complain and were happy with the service. We saw there had been no complaints made for the last year. There were clear arrangements in place for recording complaints and any actions taken, including lessons learnt to prevent re occurrences.

Good

Is the service well-led?

Our findings

People we spoke with said the home was well managed. One person told us, "[Registered manager] is absolutely 100 percent fantastic, a first class manager." They said they could always speak with staff or the registered manager at any time, and they would always take the appropriate action. People told us they were listened to by the registered manager and the staff supporting them.

The registered manager knew all of the people who used the service and their relatives well. They were able to tell us about each individual and what their needs were. The registered manager told us it was important that each person was seen as an individual and looked at how they could support people holistically. For example, people attended different clubs in the community which reflected their interests. One group which some people living at the home attended was the self-advocacy group which held regular meetings. One person we spoke with said they enjoyed attending.

Relatives said they were asked to share their views about the service and the quality of care through satisfaction questionnaires. We saw the results of these questionnaires for 2016 were positive. We also saw that professionals who supported people living at the home were regularly asked for feedback. These comments were positive, for example one comment noted was, "There is positive engagement for people living at the home."

Staff told us the culture of the service was all about the importance of each person living at the home. All the staff we spoke with were passionate about supporting people focussing on their abilities, and being responsive and adaptable in how this was achieved. One member of staff said, "We always listen to people and encourage them to be as independent as possible." Staff said they communicated well as a team and worked together to support people living at the home.

Staff said they were supported by the registered manager and the provider. They told us they could always speak to someone if they had any concerns. One member of staff said about the registered manager, "She listens to us and we discuss things as a team." Another member of staff explained how the registered manager worked with the staff team to support people living at the home. They felt this led to a good understanding of people's needs and effective support for the staff team.

Staff told us they had regular one to one time with the registered manager, when they were able to share information and ideas. They said they felt well supported and listened to as a result of this. Staff told us how any compliments were always passed on so they felt valued and appreciated.

The registered manager completed regular checks to ensure they provided quality care. They told us they had worked with the local authority to ensure any improvements necessary were made.

Staff told us they always reported accidents and incidents. We saw documentation available for staff which was completed when needed. The management team investigated the incidents to ensure any actions that were needed were made in a timely way. The registered manager explained how they would review through

a practice discussion with staff and resolve any on- going actions when needed.

We saw the provider regularly completed checks to ensure people living at the home received quality care. They regularly spoke with people living at the home to ensure they were happy with the support provided.