

Sutton Court Nursing Homes Limited

Sutton Court

Inspection report

69 Chesswood Road
Worthing
West Sussex
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Tel: 01903234457

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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

About the service: Sutton Court is a residential care home for people living with a learning disability and/or autism and other complex needs. It is registered to provide personal and nursing care for up to 10 people; at the time of inspection the home was full. Sutton Court is a large, detached building close to the centre of Worthing. Accommodation is provided over two floors and communal areas include a sitting room, dining room and kitchen. People have their own rooms and access to gardens at the rear of the home.

People's experience of using this service: We observed people were comfortable in their surroundings and felt safe and happy. One person spoke with us at length about their life at the home and how they spent their time. The person was relaxed and confident to have a conversation with us and took pleasure in showing us their room. Throughout the inspection, we observed positive interactions between people and staff, underpinned with banter and laughter. Staff spent time with people and listened patiently to any concerns they might have. People were treated with dignity and respect and had the privacy they required.

People were safe and were supported by staff who were trained to recognise the signs of any potential abuse. Staff had been trained in safeguarding and knew what action to take if they had any concerns about people's safety. People's risks were identified and assessed appropriately. Any accidents or incidents were recorded and lessons learned to prevent any reoccurrence. There were sufficient staff to meet people's needs, to enable them to engage with activities outside the home and to attend health appointments. People were supported by staff whose suitability was checked at recruitment. People's medicines were managed safely.

Before they came to live at the home, people's needs were fully assessed to ensure that staff could meet their needs appropriately. Staff completed training and were experienced in their roles to provide effective care to people. Staff received regular supervisions and an annual appraisal. People were encouraged with a healthy diet and contributed to the planning of menus. People had access to a range of healthcare professionals and services. People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice.

People received personalised care that was tailored to meet their individual needs, preferences and choices. Care plans were detailed in the information and guidance provided to staff. Staff encouraged people in decisions relating to their care and in planning long and short-term goals. People chose their keyworker who supported them to make choices and to plan the activities they wanted to do. The provider had an accessible complaints policy so people understood how to make a complaint. No complaints had been received. No-one living at the home required end of life care at the time of the inspection.

People at the home knew the registered manager and the home manager well. People were comfortable in the company of the managers and support staff. Staff felt supported by the provider and the managers and felt that any suggestions would be listened to. People, relatives and staff felt the home was well run. They

were asked for their feedback about the home through surveys and at meetings. Suggestions were welcomed and used to drive improvement as needed. A range of quality assurance systems measured and monitored the quality of care and the service overall, which was of a good standard.

This service met the characteristics of Good in all areas. More information is in the 'Detailed Findings' below.

Rating at the last inspection: Good. The last inspection report was published on 5 July 2016.

Why we inspected: This was a planned comprehensive inspection that was scheduled to take place in line with CQC scheduling guidelines for adult social care services.

Follow up: We will review the service in line with our methodology for 'Good' services.

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 well-led

Details are in our Well-Led findings below.

Good ●

Sutton Court

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.

Inspection team: There was one inspector.

Service and service type: Sutton Court 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.

Sutton Court was registered before the guidance 'Registering the Right Support' was published. However, the care service has been developed and designed in line with the values that underpin Registering the Right Support and other best practice guidance. These values include choice, promotion of independence and inclusion. 'People with learning disabilities and autism using the service can live as ordinary a life as any citizen' – Registering the Right Support Policy.

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. The registered manager had overall responsibility for the management of the service. The day-to-day running of the home was overseen by the home manager.

Notice of inspection: This was an unannounced, comprehensive inspection.

What we did: We reviewed the information we held about the service. This included information from other agencies and statutory notifications sent to us by the registered manager about events that had occurred at the service. A notification is information about important events which the provider is required to tell us about by law. We used all this information to decide which areas to focus on during our inspection. The provider completed a Provider Information Return. Providers are required to send us key information once annually about their service, what they do well and improvements they plan to make. This information

helps support our inspections.

Before the inspection, we contacted a social care professional to ask them for their views about the service. They have given their permission for their feedback to be included in this report.

During the inspection we spoke with one person who lived at the service. Due to the nature of people's complex needs, we were not always able to ask people direct questions. Some people chose not to talk with us and we respected this. We spoke with the provider, the registered manager, the home manager and a support worker. We reviewed a range of records. These included three people's care records and medicines records. We also looked at two staff files and records relating to the management of the home. We spent time observing the care and support people received and interactions between people and staff.

Is the service safe?

Our findings

Safe – this means people were protected from abuse and avoidable harm

At our last inspection we found that people received a 'safe' service. At this inspection the service continued to be 'Good'.

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

Systems and processes

- Sutton Court provided a safe environment for people. People were supported to understand how to keep safe and to raise concerns.
- Staff had completed training in safeguarding and knew how to recognise the signs of potential abuse. The provider had a safeguarding policy for staff to follow. Staff knew what actions to take and said they would report any concerns to the home manager.
- The registered manager understood how to notify the local authority and CQC about any safeguarding concerns. Notifications were completed as required.

Assessing risk, safety monitoring and management

- People's risks had been identified and assessed. Risk assessments were written in a person-centred way.
- Detailed risk assessments had been completed. We looked at a range of risk assessments. Toiletries were kept in secure storage where it had been identified there was a risk some people might consume these. Some people smoked cigarettes and the related risks had been assessed. Staff explained to people the health risks relating to smoking. People understood these and chose to smoke.
- A risk assessment in relation to managing one person's epilepsy was detailed. A support worker explained the actions they would take when the person experienced a seizure and had a good understanding about the person's health condition.
- Accidents and incidents were reported and recorded; any emerging trends were identified.
- Premises were managed safely. Internal environmental checks were completed. External contractors serviced and reported on fire, electric, gas and health and safety as needed.

Staffing levels

- Staffing levels were satisfactory. The number of staff required was assessed based on people's support needs and included providing staff to accompany people on activities and outings or health appointments.
- During the day there were four support staff on duty as well as the home manager and registered manager. At night, one waking member of staff was on duty.
- Staff could also assist from one of the provider's other locations over the road, if required in an emergency.
- Robust recruitment systems ensured that new staff were safe to work in a social care setting. Staff files showed that checks had been made with the Disclosure and Barring Service which considered the person's character to provide care, two references were obtained and employment histories verified.

Using medicines safely

- Medicines were managed safely.
- Medicines were ordered, stored, administered and disposed of as required.
- Medication Administration Records (MAR) showed that people received their medicines as prescribed. The MARs were accurate and completed correctly by staff.
- A pharmacy audit completed in March 2018 identified no concerns.

Preventing and controlling infection

- The home was clean.
- Staff completed training in infection control and food hygiene.
- People's laundry, including soiled linen, was washed and dried in a hygienic manner. The laundry room was clean and in good order.

Learning lessons when things go wrong

- Lessons were learned when things went wrong. One person had burned their fingers when they smoked a cigarette down to the butt. Following the incident, the person was accompanied by staff when they went to have a cigarette. In addition, before the person smoked a cigarette, staff drew a green line on the cigarette paper, so the person could see how far down the cigarette it was safe to smoke. This had prevented the person from experiencing any further burns injury.
- Another person had a choking incident whilst attending a day centre. Advice was sought from a healthcare professional following this. The person's guidance around choking had been updated and the risks minimised.

Is the service effective?

Our findings

Effective – this means that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence

At our last inspection we found that people received an 'effective' service. At this inspection the service continued to be 'Good'.

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

- People's needs were assessed before they came to live at Sutton Court. The registered manager ensured that people's needs could be supported by staff. They also looked at the 'mix' of people at the home before accepting any referrals from the local authority. The registered manager explained how important it was for people to live together as amicably as was possible.
- Assessment of people's care and support needs was ongoing after people moved into the home.

Staff skills, knowledge and experience

- Staff had the knowledge, skills and experience to support people effectively.
- Training had been identified that was considered essential for staff and this had been completed. This included learning disability, health and safety, moving and handling, medication, safeguarding, infection control, first aid, food hygiene and nutrition.
- Additional training was on offer including equality and diversity, mental capacity and challenging behaviour. The home manager told us about the training they had completed in autism, learning disability and challenging behaviour through the West Sussex Learning Gateway.
- Staff were encouraged to study for vocational qualifications in health and social care. New staff followed the Care Certificate, a work-based, vocational qualification for staff who had no previous experience in the care sector. New staff shadowed experienced staff.
- Staff received six supervisions a year and an annual appraisal and records confirmed these took place. Staff told us they felt supported in their roles.

Supporting people to eat and drink enough with choice in a balanced diet

- Healthy eating was promoted and people's weights were monitored with their permission.
- Menus were planned weekly and people were involved in this process. Pictures were used to aid people to understand what they would like to eat.
- People were encouraged to assist with food preparation and were supported by staff. People helped to clear plates at the end of each meal and with the washing and drying up.

Staff providing consistent, effective, timely care within and across organisations

- Links had been established with health and social care professionals.
- The registered manager and home manager had good relationships with two local medical practices and

with the pharmacy. Issues were addressed as needed.

- The registered manager and the home manager worked closely with the local authority community learning disability team, who regularly reviewed people's care at the home.

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

- People were supported to live healthier lives and had access to a range of healthcare professionals and services.
- People attended appointments with professionals such as their GP, psychiatrist, dentist and optician. As needed, referrals were made to specialists, such as speech and language therapists where people had difficulties with swallowing.
- Care records included a 'My Care Passport' which provided information in an accessible format about people's care needs, likes, dislikes and preferences. The passport went with people if they had to be admitted to hospital, to provide guidance for healthcare staff.
- People received annual health checks and had consented to receive the 'flu jab recently.

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

- People's needs were met by the design and decoration of the home.
- People chose how they wanted their bedrooms to be arranged, including furnishings and decoration. Rooms were personalised.
- People had access to outside space, including large gardens at the rear of the home.

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 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 so that they can receive care and treatment when this is in their best interests and legally authorised under the MCA. The authorisation 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 and whether any conditions on authorisations to deprive a person of their liberty were being met; we found the service was compliant.

- People's capacity to make specific decisions had been assessed and everyone living at the home was subject to DoLS. Applications for DoLS had been completed as required and sent to the local authority.
- Some DoLS had been authorised and others were awaiting attention from the local authority. One person had their DoLS authorised with conditions, which were being met by staff at the home.
- Where people were prescribed anti-psychotic medicines, these were being reviewed by their GP. This was because anti-psychotic medicines could be seen as a form of restraint. People's anti-psychotic medicines were used appropriately by staff at the home.
- Information about consent was provided to people in an accessible format to enable them to understand what this meant and about any restrictions placed upon them.

Is the service caring?

Our findings

Caring – this means that the service involved people and treated them with compassion, kindness, dignity and respect

At our last inspection we found that people received a 'caring' service. At this inspection the service continued to be 'Good'.

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

Ensuring people are well treated and supported

- We observed staff were kind and caring with people and responsive to their needs. Staff supported people in a patient, warm and friendly manner.
- People were welcomed into the office by the managers who made time to sit with people and listen to them. When people became anxious or upset, we saw they were reassured in a calm and soothing way.
- One person became upset because their relative had been unable to visit. Staff spent time with the person, talking with them in an empathic way.
- Staff displayed a compassionate approach with people and it was clear that positive, caring relationships had been developed between people and staff.

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

- We observed people were encouraged and supported to express their views and to be involved in decisions relating to their care.
- A support worker explained the importance of consulting with people. They said, "We need to know everything about people, what people want, their likes and dislikes. Every day I ask people what they would like to do".
- People made day-to-day choices about what they would like to eat and drink, what they wanted to do and when they wanted to get up or go to bed.
- Staff communicated with people in a way that suited them and in line with their care plans.

Respecting and promoting people's privacy, dignity and independence

- People had their own rooms and their privacy was respected.
- Staff understood how to treat people with dignity whilst encouraging their independence. A support worker described how they supported one person to take their shower, brush their teeth and to get dressed and helped only when needed.
- We observed staff knocking on people's bedroom doors and seeking their permission before entering.
- The service followed data protection law. The information we saw about people was kept confidentially. This meant that people's private information was kept securely.

Is the service responsive?

Our findings

Responsive – this means that services met people's needs

At our last inspection we found that people received a 'responsive' service. At this inspection the service continued to be 'Good'.

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

Personalised care

- People received personalised care that was responsive to their needs. Each person had a care plan which provided information for staff about their care and support needs in a person-centred way. Care plans described the support each person needed throughout the day in relation to their day and night-time routines. For example, there was information about people's continence, behaviours, medicines, accessing the community, physical and mental health. Care plans were reviewed every three months to ensure information about people was current and accurate.
- The registered manager was aware of the Accessible Information Standard (AIS). All organisations that provide adult social care are legally required to follow the Accessible Information Standard. The standard sets out a specific, consistent approach to identifying, recording, flagging, sharing and meeting the information and communication support needs of people who use services. The standard applies to people with a disability, impairment or sensory loss. People's communication needs were assessed and met in a way that met the criteria of the standard. This included recording people's communication needs in their care plans. Information within care plans was written in an accessible format with pictures and symbols used to good effect to aid people's understanding.
- Where people displayed behaviour that could be perceived as challenging, there was guidance for staff on the triggers to look for and how to de-escalate difficult situations. Positive behaviour support was used and staff understood why people might become upset or anxious. Staff used techniques they had learned and were positive and proactive in managing any behavioural issues.
- People's rights were protected and staff treated people equally and with respect. Staff completed equality and diversity training and understood how to treat people as individuals regardless of their disability.
- Support workers consulted with people about their care plans. People helped to set long and short-term goals which they were supported by staff to achieve. One person's long-term goals included attending health appointments, to maintain a healthy diet and to access the community daily.
- People had their own keyworker who was involved in all aspects of their care. People chose which staff member they would like to be their keyworker. People met with their keyworker to review their care.
- Relatives and friends could visit the home at any time. Staff helped people to stay in touch with relatives through phone calls and Skype. Relatives were involved in the reviewing of people's care plans.
- Each person had a weekly activity planner which they contributed to. People chose what they would like to do, whether to stay in or go out. One person chose to go to a day centre. Others enjoyed activities such as horse riding, swimming or lunch out; it was their choice. Friendships were formed and people went out together on social outings.

Improving care quality in response to complaints or concerns

- The provider's complaints policy was available in an accessible format for people to understand.
- At the time of this inspection, no formal complaints had been received.
- No-one living at the home needed end of life care.

Is the service well-led?

Our findings

Well-Led – this means that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

At our last inspection we found that people received a 'well-led' service. At this inspection the service continued to be 'Good'.

The service was consistently managed and well-led. Leaders and the culture they created promoted 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 duty of candour responsibility

- The provider's Statement of Purpose outlined the aims and objectives of the home. It described the aim of Sutton Court was to provide a home for people which reflected the values and aspirations of society. People were supported to develop independent living skills and to receive emotional support and opportunities to live a meaningful life.
- The registered manager told us, "We are a family home. It's people's home and we're here to support them. We all look out for each other here".
- The care and support people received was designed in a person-centred way and delivered to a high standard.
- The management team understood the need to be honest and open with people and their relatives and the importance of clear and effective communication. The managers kept relatives and families updated about people through emails and by phone.

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

- The home was well run. The registered manager and home manager spent time with people and staff to ensure a high standard of care was delivered. The managers had a good oversight of the home and on all aspects of the service delivery. The provider visited the home regularly and played an active role in the management of the service.
- All staff understood the requirements of the CQC regulations and how to meet these. The rating achieved at the last inspection was on display at the home. Notifications that the registered manager was required to send to CQC by law had been completed.
- Managers were supported with their continual, professional development by the provider to develop their skills and experience in the running of the home.

Engaging and involving people using the service, the public and staff

- People and their relatives were asked for their views about the home through annual surveys. The survey for people was presented in an accessible format and completed in November 2018. People were happy living at Sutton Court and were positive about their rooms, activities, safety, cleanliness, staff and food. Residents' meetings took place and information was recorded from these meetings in an accessible format,

for example, with the use of symbols, to help people understand what had been discussed.

- Relatives were asked for their feedback and the latest survey had just been completed. Comments were positive.
- Staff felt involved in developing the service and that any suggestions would be listened to. A support worker said, "I've known people for a long time and the managers always listen to what we think". The Provider Information Return (PIR) told us that a new staff appraisal form had been developed. This had helped to encourage staff to take a more active role in developing the service and to voice their opinions.
- Staff meetings took place and records confirmed this. Topics discussed included household duties, people's requirements and any upcoming changes. Staff were involved in discussions relating to the management of the home and felt supported by management.

Continuous learning and improving care

- A range of audits had been developed to measure and monitor the service overall. There were audits in relation to care plans, incidents and accidents, safeguarding, kitchen/household, medicines, health and safety, staff records, money management [on behalf of people] and communication. Audits were effective in identifying any issues or underlying themes to drive improvement.
- Since the last inspection, all policies and procedures had been reviewed and updated as required. This enabled practices to be reviewed and adapted to meet the changing needs of people at the home and the environment.
- Relatives were complimentary about the home.

Working in partnership with others

- Advice and guidance about people's specific needs were obtained from speech and language therapists and from a podiatrist.
- People were referred by a local authority before they were admitted to the home. The provider and registered manager liaised with local authority social care professionals when considering whether people's needs could be met at the home.
- A social care professional provided positive feedback about the home. They stated, 'In my experience, the service is effective at meeting the needs of the people who live there. I have had positive reassessments, support plans and reviews with people'. The social care professional added, 'There is a clear management structure with consistent managers which is good for the service, the social work team and the people who live at Sutton Court. In my view the service is well led'.