

# Learning Disability Network London

## Flat A 291 Harrow Road

### Inspection report

291 Harrow Road  
London  
W9 3RN

Tel: 02072862593

Date of inspection visit:  
10 June 2021  
14 June 2021  
24 June 2021

Date of publication:  
26 August 2021

### Ratings

Overall rating for this service	Inspected but not rated
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Is the service safe?	<b>Inspected but not rated</b>
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# Summary of findings

## Overall summary

Flat A 291 Harrow Road is a care home for people with learning disabilities. It provides accommodation and support for up to four people. The building is a four bedroom level access flat with a shared open plan lounge/dining area and separate kitchen. At the time of our inspection there were three people living at the service.

People's experience of using this service

We expect health and social care providers to guarantee autistic people and people with a learning disability the choices, dignity, independence and good access to local communities that most people take for granted. Right Support, right care, right culture is the statutory guidance which supports CQC to make assessments and judgements about services providing support to people with a learning disability and/or autistic people.

This was a targeted inspection that considered aspects of the safety of the service. Based on our inspection of these areas we did not identify any areas of risk to people's safety.

People were safeguarded from abuse and poor care. Care workers were confident recognising abuse and reporting concerns to managers. Staffing levels had been reviewed to ensure there were sufficient staff to meet people's needs, and the provider continued to review staffing levels with commissioning bodies.

There were suitable measures for assessing and managing risk to people's health and safety. The provider worked with specialist teams such as occupational therapy to ensure appropriate risk management plans were in place for people.

Medicines were safely managed and the registered manager carried out frequent audits to ensure errors were identified and addressed promptly.

People were protected from the risk of contracting COVID-19 in the service. Staff had access to suitable personal protective equipment and handwashing facilities. People using the service and staff were regularly tested and supported to access the vaccination programme. The registered manager continued to review how people's needs were met in response to changing guidance during the COVID-19 pandemic.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

Rating at last inspection:

The last rating for this service was good (published 13 April 2021).

Why we inspected

The inspection was prompted in part by notification of a specific incident. Following which a person using the service died. This incident is subject to a criminal investigation. As a result, this inspection did not

examine the circumstances of the incident.

We also received information concerning a neighbouring service managed by the same provider.

The information CQC received about the incident indicated concerns about the management of staffing levels and safeguarding issues. This inspection examined those risks.

We undertook this targeted inspection to check on a specific concern we had about staffing levels and safeguarding. The overall rating for the service has not changed following this targeted inspection and remains good.

CQC have introduced targeted inspections to follow up on Warning Notices or to check specific concerns. They do not look at an entire key question, only the part of the key question we are specifically concerned about. Targeted inspections do not change the rating from the previous inspection. This is because they do not assess all areas of a key question.

We found no evidence during this inspection that people were at risk of harm from this concern.

We looked at infection prevention and control measures under the Safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to COVID-19 and other infection outbreaks effectively

#### Follow up

We will continue to monitor information we receive about the service. If we receive any concerning information 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?**

At our last inspection we rated this key question good. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.

**Inspected but not rated**

# Flat A 291 Harrow Road

## Detailed findings

### Background to this inspection

#### The inspection

This was a targeted inspection to check on a specific concern we had about staffing levels and safeguarding issues.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

#### Inspection team

The inspection was carried out by three inspectors.

#### Service and service type

Flat A 291 Harrow Road 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 Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

#### Notice of inspection

This inspection was unannounced.

#### What we did before the inspection

We had received information of concern relating to this location and another location based on the same site managed by the same provider. We met with the local authority to discuss the concerns raised about this service and the provider's systems for managing risks to people. Due to the nature of the concerns raised, we made a decision to inspect all three locations the provider operates on this site. We used all of this information to plan our inspection.

#### During the inspection

Inspection site visits took place on 10 and 14 June 2021. 'We met and had introductions with the three people who used the service and made observations of their care as they were not able to fully communicate with us. We looked at records of care, risk and medicines management for the three people who used the service. We checked the provider's infection control procedures and spoke with the registered manager and a service director.

After the inspection

We visited the provider's head office and reviewed records of recruitment for five staff members. We continued to seek clarification from the provider to validate evidence found related to risk management plans, records of infection control and staff testing for COVID-19.

We spoke with two relatives of people who used the service and three staff members.

# Is the service safe?

## Our findings

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

At the last inspection this key question was rated as good. We have not changed the rating of this key question, as we have only looked at the part of the key question we had specific concerns about.

Systems and processes to safeguard people from the risk of abuse

- People were safeguarded from abuse. Care workers told us they received suitable training in safeguarding adults and were confident recognising the signs of possible abuse. There were suitable processes for reporting and responding to possible abuse.
- Care workers knew how to raise concerns. Staff told us they were confident reporting concerns to managers and felt that these were taken seriously. The provider had suitable whistleblowing procedures to support staff to raise concerns if they felt these were not addressed by their line managers.

Assessing risk, safety monitoring and management

- Risks to people's safety and wellbeing were managed safely. The provider had carried out comprehensive risk assessments which included measures to ensure people ate and drank safely and were protected from the risks of falling. A family member told us "I have not got any problems at all with the care of my [family member]."
- The provider worked with other health and social care professionals to manage risks effectively. This included assessments from occupational therapists and speech language therapists around specialist risks such as moving and handling and choking. Guidance from health and social care professionals was incorporated into people's risk assessments and there was clear information for staff to follow on people's support plans.

Staffing and recruitment

- There were enough staff to meet people's needs safely. Staffing levels had been reviewed to ensure that people received safe care, including three staff during the day. Care workers told us that prior to this time staffing levels had been lower for a short period, and that they sometimes struggled to respond promptly to people's needs.
- The provider worked with commissioning authorities to ensure staffing levels were suitable. There had been significant changes in people's needs, and the provider had met with the local authority to review commissioned hours and increase staffing as required. A family member told us "They had to change everything [when a person's needs changed]. They are doing very well."
- Staff were recruited safely. The provider carried out appropriate pre-employment checks to ensure staff were suitable for their roles. This included obtaining proof of identity and the candidate's right to work in the UK, obtaining evidence from previous employers and carrying out a check with the Disclosure and Barring Service (DBS). The DBS provides information on people's backgrounds, including convictions, to help employers make safer recruitment decisions.

Using medicines safely

- People's medicines needs were met. The provider assessed the support people required with medicines and reviewed this regularly. People's care plans were clear about the levels of support they required.
- Medicines were managed safely. People's medicines were recorded on medicines administration recording (MAR) charts which were completed accurately. Medicines were safely stored with regular stock checks carried out by a senior member of staff.
- Medicines were checked by the registered manager to ensure these were given safely. The registered manager routinely audited MAR charts and stock checks. When errors in recording had occurred the registered manager ensured appropriate action was taken, including additional training and supervision for staff.

#### Preventing and controlling infection

- The provider took suitable steps to protect people from infection, including the risk of COVID-19. Staff received training in infection control and received up to date advice from the registered manager on how to keep safe. Care workers had access to personal protective equipment (PPE) and were observed to be using this safely.
- The provider ensured a safe environment. There were systems in place to ensure enhanced cleaning within the premises and hand sanitising provision and regular audits were carried out by the registered manager. Arrangements were in place to ensure people could maintain contact with their families, including through video calling and outdoor visiting where appropriate. There were suitable risk assessments to allow people to access the community without the need to self-isolate, in line with current guidance.
- People were protected from COVID-19 by vaccination and testing. People using the service had been supported to receive a vaccination against COVID-19 by staff, who were also supported and encouraged to receive the vaccination. There was a clear schedule in place for COVID-19 testing, including testing people and staff using polymerase chain reaction (PCR) and lateral flow device (LFD) tests. The registered manager ensured that there were up to date records showing how the service had met government guidance on testing.