

Choice Support

Choice Support - 5 Bowley Close

Inspection report

5 Bowley Close
London
SE19 1SZ

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Choice Support - 5 Bowley Close is a residential care home providing personal care and accommodation for up to four people. The service specialises in supporting people with learning disabilities and those with autistic spectrum disorders. At the time of our inspection there were four people receiving care and support.

Choice Support - 5 Bowley Close accommodates people in one building with each person having their own bedroom. There are two communal bathrooms, a communal living and dining area, a kitchen and access to a secure garden.

People's experience of using this service and what we found

People's relatives were positive about the supportive and caring attitude of the staff team and were confident staff knew their family members well and how they liked to be supported. Relatives were reassured their family members were kept safe.

We observed positive interactions between people and staff throughout the inspection. Staff responded appropriately to changes in people's needs and were aware if they needed any further support.

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.

Staff supported people to be active and involved in every day choices, including communicating as best as possible with them to help explain information about COVID-19 and how they were working to minimise any infection control risks.

People were kept safe as there were robust systems in place to ensure safe infection control procedures were followed. These practices were regularly discussed, with updates and reminders being shared across the staff team.

The staff team were very proud of how they had worked together during challenging periods during the peak of the COVID-19 pandemic. Staff praised the work environment and how they had all looked out for each other to ensure they had not had any COVID-19 cases within the home.

Relatives were confident about the management of the service and told us they had been kept updated with what had been happening in the home when they had been unable to visit. The new manager had contacted people's relatives to introduce themselves and we received positive comments about how the staff team had managed the service without a manager in place.

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

Rating at last inspection and update

The last rating for this service was requires improvement (published 20 August 2019).

Why we inspected

We carried out this inspection to follow up on concerns found at our last inspection in relation to recruitment, safeguarding investigations, quality monitoring checks and how the provider sought people's views about the service. As a result, we undertook a focused inspection to review the Key questions of Safe and Well-led only.

This report only covers our findings in relation to the Key Questions Safe and Well-led. Ratings from the previous comprehensive inspection for those key questions not looked at on this occasion were used in calculating the overall rating at this inspection. The overall rating for the service has changed from Requires Improvement to Good. This is based on the findings at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Choice Support - 5 Bowley Close on our website at www.cqc.org.uk.

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 coronavirus 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 return to inspect.

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.

Details are in our safe findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Choice Support - 5 Bowley Close

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. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Care Act 2014.

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 one inspector.

Service and service type

Choice Support - 5 Bowley Close is a 'care home'. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

At the time of the inspection the service did not have a manager registered with the Care Quality Commission. A registered manager is a person who is legally responsible for how the service is run and for the quality and safety of the care provided. A new manager started on 1 September 2020 and was in the process of submitting their application.

Notice of inspection

We gave the service 72 hours' notice of the inspection. This was because there was no registered manager in post, and we wanted to be sure the new manager, the provider or a senior member of the staff team would

be available to support the inspection. We also requested records to review before the site visit.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. This included any significant incidents that occurred at the service. The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report. We contacted the local authority commissioning team and social work team and reviewed the previous inspection report.

We requested a range of documents related to the management of the service that were sent to us by the provider on 1 October 2020. We used all of this information to plan our inspection.

During the inspection

We met and had introductions with all the people who lived in the home but due to their conditions and disabilities they were not fully able to give an account of their experiences of care. We carried out observations of people's support and interactions with support workers to help us understand their experience.

We reviewed a range of records related to four people's care and support. This included people's care plans, risk assessments, medicines records and two staff files in relation to recruitment. We also looked at policies and procedures and records related to the management of the service.

This included incidents and accidents, quality assurance checks, infection control protocols and minutes of team meetings.

We spoke with the newly appointed manager, the regional manager, a senior support worker and two support workers.

After the inspection

We continued to seek clarification from the provider to validate evidence found related to the provider's previous action plan, health and safety checks and access for staff COVID-19 testing. We also spoke with two relatives of people who used the service for their feedback. We had a teleconference call with the manager on 7 October and a further call with the manager and regional manager on 16 October 2020 to provide formal feedback.

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 requires improvement. At this inspection this key question has now improved to good. This meant people were safe and protected from avoidable harm.

Learning lessons when things go wrong; Systems and processes to safeguard people from the risk of abuse

At our last inspection we recommended the provider reviews the way they investigate serious incidents and complete actions from investigations reports. The provider had made improvements.

- Action had been taken since the last inspection and the provider's safeguarding policy had been discussed across the service and updated to ensure safeguarding procedures for staff to follow were clearer with timeframes for investigations put in place.
- There had only been one safeguarding investigation since the last inspection and it had been investigated thoroughly, with the eventual outcome being unsubstantiated. Health and social care professionals confirmed this and we saw correspondence they were happy with the action taken.
- There were procedures in place for the reporting of any incidents and accidents across the service. Incident forms were completed and staff told us they discussed any issues during handovers or team meetings and what action would need to be taken.
- Staff completed safeguarding training and any safeguarding issues or concerns were discussed during daily handovers. Staff were aware of their safeguarding responsibilities and were confident any concerns raised would be acted upon appropriately and in a timely manner. One support worker added, "I'm very confident with this. [Manager] is very easy to speak to and I feel safe raising any concerns."
- People were observed to be relaxed and comfortable in the presence of the staff team and relatives told us they were confident their family members were safe and had no concerns. One relative added, "We are very happy with how they are looked after and know they are in a safe place. It is reassuring for us, especially during this time."

Preventing and controlling infection

- The provider had regularly reviewed their infection and prevention control (IPC) policy during the COVID-19 pandemic and staff were kept updated with changes to government guidance and procedures to follow to keep people, staff and visitors safe and reduce the risk of infection.
- The provider had been proactive and had implemented a new IPC audit checklist in line with the CQC IPC audit checklist. The manager had completed this for the first time on 25 September 2020 to ensure the service was following best practice.
- We were assured the provider was preventing visitors from catching and spreading infections as visits were currently restricted with detailed visiting protocols in place. This included temperature checks, a questionnaire to complete and the provision of hand sanitiser and personal protective equipment (PPE) for visitors upon entry. Staff also confirmed they had their temperature taken at the start of each shift to ensure they were safe to work in the home.

- Staff had completed IPC training and were observed to be wearing the correct PPE. Staff were aware of how to don and doff their PPE and disposed of it safely in line with recommended guidance. Staff were extremely positive about the support they received during this period and told us they always had enough PPE, even during the peak of the pandemic.
- We observed the home to be clean and free from malodours and although there was no written record of the current cleaning schedule, staff were aware of their cleaning responsibilities. We shared guidance related to cleaning products with the manager after the inspection.

Staffing and recruitment

- The provider ensured there were sufficient numbers of staff available and staffing levels continued to be appropriate to ensure people's needs were safely met. People had the necessary one to one support when needed to manage their personal care and to support them in the community.
- There were contingency plans in place which had been discussed across the service in preparation for a second wave and any additional winter pressures. The provider had access to bank staff and all staff had completed a COVID-19 risk assessment, including only working across one care setting to minimise the risk of infection.
- The provider had made improvements following the last inspection and followed safer recruitment procedures to ensure staff were suitable to work with people who used the service. Any gaps in applicants' employment histories were now discussed and recorded during the interview stage. All appropriate checks for staff had been completed, including references and photographic proof of identity.

Assessing risk, safety monitoring and management

- Risks to people's health and wellbeing continued to be assessed and reviewed if there were any changes in their needs. There were guidelines in place for staff to follow, including step by step instructions to explain safe moving and handling procedures.
- There was information for risks related to epilepsy and swallowing difficulties. Staff worked closely with health and social professionals and had helped facilitate a virtual assessment with a speech and language therapist to follow up one person's nutritional risks. The provider had also set up a helpline which staff could call for advice if the effects of the pandemic and subsequent lockdown had a negative impact on people's moods and behaviours.
- Regular fire safety checks and checks on people's mobility equipment were carried out, with Personal Emergency Evacuation Plans (PEEP) and a missing person's profile in place in the event of an emergency.
- Staff knew people well and had a good understanding about their health conditions and routine behaviours to help keep them safe. Relatives were confident the staff team knew how to keep their family members safe and health and social professionals did not have any concerns.

Using medicines safely

- People's medicines continued to be managed well and the procedures in place ensured people received their medicines on time and in line with best practice. Staff also ensured people had regular medicines reviews with their GP.
- Staff completed medicines training and had been assessed as being competent in this area. One newer member of staff confirmed they shadowed senior staff during their induction then were observed before being signed off. Staff were positive about the training and understood their responsibilities and actions to take if they had any concerns.
- People's medicines records were checked regularly by the staff team and signed off during daily handovers to help identify if there had been any errors. Medicines records were completed appropriately and the manager told us they would complete a monthly audit as part of their management responsibilities.

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.

At the last inspection this key question was rated as requires improvement. At this inspection this key question has improved to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care

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

At our last inspection we recommended the provider reviews their monitoring processes to ensure any identified issues are followed up and actioned within their agreed timeframes. The provider had made improvements.

- We saw action had been taken since the last inspection and both the new manager and regional manager had put systems in place to monitor the service and ensure people were kept safe and make any necessary improvements. The provider's action plan had been updated and was regularly reviewed, with clear examples where some action points had been delayed due to COVID-19.
- There were daily, weekly and monthly audit cycles in place across the home, completed by staff and the manager to ensure people received a good service. Daily checks of people's medicines records and financial transactions were completed, along with a range of health and safety checks, including a separate infection and prevention control monthly audit. Where there was lack of action regarding the reporting of a faulty door, the regional manager confirmed this had been reported after the inspection.
- The manager was still in the process of completing their induction and had not had to submit any statutory notifications to the CQC. There had been no notifiable incidents since the last inspection and we shared guidance about notifications and their regulatory responsibilities with the manager during a teleconference call on 7 October 2020.
- The manager was positive about the support they had received from both the provider and the staff team since they started in September 2020. They had bi-weekly management calls with the regional manager and other managers across the provider's services to discuss any issues and share any learning or examples of best practice.
- Staff had a good understanding of their responsibilities, especially with measures implemented due to COVID-19. Staff were reminded about their duties during daily handovers, team meetings and updates in the communication book. Handover record forms included an overview of the tasks staff needed to complete and had to be signed off.
- Due to the size of the service, staff confirmed they had regular informal discussions about people and any issues across the home, finding them very beneficial. One support worker added, "We reflect on what we can improve on during meetings, how to keep people safe and keep them involved. They are very important."

Engaging and involving people using the service, the public and staff, fully considering their equality

characteristics

- At the last inspection we found the provider had not always sought people's views and experiences about the service as satisfaction surveys had not been completed for several years. We saw this had been addressed and the provider had introduced updated easy read questionnaires which staff supported people to complete to find out their experiences of living in the home.
- Staff had also used easy read guidance from the NHS about how to reduce any anxiety or distress for people around the use of face masks and why it was important staff needed to wear one. We observed people were comfortable in the presence of staff wearing their masks and staff told us they introduced themselves to people each morning from a safe distance without their mask to help reduce any possible anxiety.
- A comments book had also been set up in the entrance of the home since the last inspection where relatives and visiting health and social care professionals could leave any feedback. Although relatives told us they had not been able to visit due to reasons related to COVID-19, they had regular contact with their relatives and staff and were updated about what was going on in the home. Relatives also confirmed they had been involved in best interest decisions regarding COVID-19 testing for their family members.
- Staff spoke positively about how they were treated and were kept updated, especially during the peak of the COVID-19 pandemic when there was a lot of anxiety. Staff felt reassured with the support available to them. One support worker added, "We get a daily email, are updated where we get information from and who we need to speak to. They are always available and able to help."

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- The new manager, who had worked for the organisation for four years in a different role, was motivated in building a positive work environment across the home. She was positive about the support she had received since starting and the dedicated work ethic of the staff team. She said, "I'm really lucky as the staff have been very understanding and work really well as a team. They have been really helpful."
- Relatives were positive about the management of the home and felt reassured with the care and support their family members received. Comments included, "I have no concerns at all and am very happy. I'm confident with what they are telling me and they just keep on doing what they do best" and "They have done really well during the pandemic."
- Staff were positive about their team morale and working environment despite the challenges and fears they had faced during the pandemic. Comments included, "We have worked so hard to keep ourselves and the residents safe. It is reassuring we have had no cases and staff have stood up and offered further support" and "We were scared but worked hard, knuckled down and worked as a team."
- We received feedback about the positive impact the new manager had brought into the team and across the home since they started in September 2020. Staff told us she was very approachable and they felt comfortable going to her for advice and support. We also received positive comments from relatives and staff about the senior support worker who had stepped up during the absence of a manager, especially during the peak of the pandemic.

Working in partnership with others

- The staff team worked closely with a range of health and social care professionals to ensure people's needs were met and any changes in their health and wellbeing were followed up. We saw people were supported to see their GP and attend any necessary healthcare appointments.
- Staff had been innovative and worked closely with a health and social professional to carry out a virtual assessment when they reported concerns. One person was also supported to meet their independent mental capacity advocate from outside a window in the home to ensure their needs were being met.
- We saw one person was supported to access the local community during the inspection to visit a local

café that met their cultural needs. Staff had researched local businesses as the person's day centre had been closed since the start of the pandemic.

How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- The service continued to understand their responsibility to be open and honest and give all relevant people information when things go wrong. Although there had not been any serious incidents since the last inspection, relatives told us they were regularly updated and informed of any incidents or events involving their family members. One relative added, "They've sent us lots of correspondence and kept us updated with everything that has been going on."