

Gloucestershire Group Homes Limited

4 Box Crescent

Inspection report

4 Box Crescent
Minchinhampton
Stroud
GL6 9DJ

Tel: 01453835023

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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

4 Box Crescent is a residential care home. It provides accommodation and personal care for up to two adults with autistic spectrum disorder. At the time of the inspection there were two people living at the service. People used to live at a previous registered location but moved to 4 Box Crescent when the service was registered with us on 17 October 2019. This is therefore an inspection of a newly registered service.

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

Risks to people were assessed and managed safely. However, on inspection we identified there had been no recent consideration of water testing to minimise the risk of potential exposure to legionella bacteria. We discussed this with the provider who took immediate action to put appropriate measures in place to mitigate the risk.

People were supported by staff who understood how to keep them safe. Appropriate safeguarding procedures were in place and staff were trained in how to protect people from abuse.

Medicines were managed effectively. Medicines were administered by trained staff and were stored safely.

Staff recruitment procedures ensured that appropriate pre-employment checks were carried out.

The service was clean and well maintained, and staff followed good infection control procedures.

People's needs were fully assessed and understood by staff, and were reflected in their care plans. People were supported to have maximum choice and control of their lives and staff them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

People's food and drink preferences were clearly documented, and people were fully involved in the meal planning process. People told us that they really enjoyed the choice and standard of food at 4 Box Crescent.

People had access to any healthcare appointments they needed, and staff supported people in this area as required.

We observed positive interactions between people and staff. Staff treated people with respect and dignity, and feedback we received from people and relatives was positive about the care they received. A complaints system was in place and people knew how to use it.

The home was well-led by a management team who were passionate about promoting a good understanding of autism to achieve the best possible outcomes for people. Audits and checks were in place that identified errors, and actioned improvements.

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.

The service was able to demonstrate how they were meeting the underpinning principles of Right support, right care, right culture. People's independence was promoted, care was person centred and staff understood people's needs.

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

Rating at last inspection

This service was registered with us on 17 October 2019. The last rating for the service at the previous premises was good, published on 20 March 2019.

Why we inspected

This was a planned inspection based on the service being newly registered.

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 until we return to visit as per our re-inspection programme. 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?

Good ●

The service was safe.

Is the service effective?

Good ●

The service was effective.

Is the service caring?

Good ●

The service was caring.

Is the service responsive?

Good ●

The service was responsive.

Is the service well-led?

Good ●

The service was well-led.

4 Box Crescent

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

4 Box Crescent 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.

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

We gave the service 48 hours' notice of the inspection. This was because the service is small, and we wanted to be sure there would be people at home to speak with us and the registered manager would be available to support the inspection.

What we did before inspection

We reviewed information we had received about the service and sought feedback from a professional who works with the service. We spoke with a staff member and a relative about their experience of the care provided. We used the information the provider sent us in the provider information return. This is

information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all of this information to plan our inspection.

During the inspection

We spoke with two people who used the service about their experience of the care provided. We spoke with four members of staff including the registered manager and care workers.

We reviewed a range of records. This included two people's care records and medication records. We looked at two staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We spoke with a relative about their experience of the care provided.

Is the service safe?

Our findings

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

This is the first inspection for this newly registered service. This key question has been rated good. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management

- There had been no recent consideration of water testing to minimise the risk of potential exposure to legionella bacteria. However, we discussed this with the provider who took immediate action to put appropriate measures in place to mitigate the risk.
- People were involved in managing their own risks, and risk assessments were person-centred, proportionate and reviewed regularly. One person said, "I'm involved fully in my care, very much so."
- Risk assessments and management plans covered all areas of people's care and identified the level of support they required, and how the risks to their safety were to be minimised. One person was fully involved in managing their finances and reviewing and recording that finance checks had been completed by staff.
- Staff gave people information about risks to their safety to actively support them to make informed choices. One person said, "I've missed being out and about during COVID, but it's getting better now and staff have explained everything about COVID [and the risks] to me."
- Staff liaised with healthcare professionals for specialist advice about how to best support people with their individual needs and promote their welfare. The GP had frequent contact with people at the service and had completed detailed annual health checks to promote good health outcomes.

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

- People were protected from the risk of abuse and told us that they felt safe. Staff were knowledgeable of safeguarding adults' procedures and aware of different forms of abuse. Staff told us they would share any concerns raised with their senior or registered manager and were aware of the incident reporting process..
- Staff had received training on safeguarding adults and there were safeguarding adults' policies and procedures in place.
- We saw an example of how, after an incident, the senior and registered manager had taken appropriate action to ensure the safety of the person, including timely updates that had been made to the care plan and risk assessment. This meant that effective learning had been implemented to minimise the risk of a further incident.

Staffing and recruitment

- Safe staff recruitment practices were in place to ensure suitable staff were employed. This included checking staff's identity, their eligibility to work in the UK, undertaking criminal record checks and obtaining references from previous employers.
- People told us there were sufficient numbers of competent staff at the service to support them, and they could request assistance from staff when they needed it. An effective on-call system ensured that staff who were lone working always had support when required. The registered manager said, "staffing levels are

continually reviewed by a manager. They have been reviewed throughout COVID [to reflect changes in people's activity schedules]."

Using medicines safely

- Medicine administration records (MARs) confirmed people received their medicines as prescribed. Medicines were received, stored and disposed of safely and in line with national guidance.
- Staff completed appropriate training to administer medication, and the registered manager was developing a competency process to provide further assurances that staff were working in line with best practice safe medicines administration practices. medication.
- Staff carried out medicine audits, ensuring that out of date and unused medicines were removed and that the medicines stored were all currently named for people and in use. Keeping medicine stocks to the minimum reduced the risk of giving incorrect medicines.

Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was meeting shielding and social distancing rules.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was accessing testing for people using the service and staff.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.
- We were assured the provider was facilitating visits for people living in the home in accordance with the current guidance.

Is the service effective?

Our findings

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

This is the first inspection for this newly registered service. This key question has been rated good. This meant 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 received care that accurately reflected their needs and wishes. The service was able to demonstrate how they were meeting the underpinning principles of Right support, right care, right culture as they were promoting choice in all areas of daily living. We observed staff offering people choice about the things they wanted to do.
- People received care and support that fully met their needs and was in line with current best practice. The registered manager attended local forums with other care professionals to share information, professional updates and discussions around how to implement best practice guidance. This was reflected in care plans which referred to evidence based guidance and research.

Staff support: induction, training, skills and experience

- Staff received a comprehensive induction at the start of their employment to ensure that they had the skills and knowledge to meet people's needs effectively. The induction programme included getting to know people and shadowing experienced staff, as well as completing the care certificate. The care certificate is an agreed set of national standards that define the knowledge, skills and behaviours expected of staff working in a care environment.
- Staff were competent, knowledgeable and carried out their roles effectively. One relative said, "The staff are brilliant, and I know [my relative] is very happy with the care that they receive."
- Staff received regular training and updates in areas relevant to the needs of the people they supported. Where training had been more difficult to organise due to the pandemic, the registered manager had written an action plan which allowed oversight of the training and identified areas which needed more urgent focus.
- Staff told us they felt supported by management and received regular supervision and appraisal of their work. One staff member reflected on their supervisions and appraisals, "They are really supportive. We talk about how to support people in all areas of their care. We also get an opportunity to talk about us and how we are coping. We have had a lot of support."
- Staff and the registered manager were upskilled where possible and additional training in autism was offered at certificate, diploma and degree level. The registered manager said, "We are talking about autism all the time. We are always considering best practice."

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

- People told us they enjoyed the food at 4 Box Crescent. One person said, "I love the food here. We have things like salmon and steak. I get to choose what I eat." A staff member said, "Food is excellent. What they want, they get."
- People were actively involved in their diet and empowered to give regular feedback about their meal

choices and preferences. One staff member said, "[People] go through the menu sheet on a Sunday and pick what they would like to eat. They have a rich and varied diet and always choose lots of vegetables. [One person] is very particular about their diet but all the staff know this and cater for it because it is recorded in the care plan."

- People with complex needs, from the risk of poor nutrition, dehydration, swallowing problems and other medical conditions that affected their health were regularly monitored to ensure their health needs were met. The relevant professionals were involved to ensure people's health needs were reviewed and the correct advice and guidance implemented.

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

- People lived in a well-maintained home with a spacious garden with countryside views. One person said, "It's lovely and homely."

- People had personalised bedrooms which were reflective of their interests, and decorated with their own possessions.

- People discussed how they wanted to decorate the communal areas of their home. In our July inspection there was a Christmas Tree in the lounge. People told us that they had chosen to have it there as they wanted something to make them smile during the recent difficult months with the pandemic.

Supporting people to live healthier lives, access healthcare services and support; Staff working with other agencies to provide consistent, effective, timely care

- Staff worked effectively with healthcare professionals to ensure people's healthcare needs were met. One professional said, "They offer a good service tailored to [people]. I have always had good communications with the staff, and they seek our advice when needed."

- Information about visits and consultations were detailed in people's care plans, including communication with GP's, opticians, dentists and the Community Learning Disability Team.

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 to receive care and treatment when this is in their best interests and legally authorised under the MCA. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS).

We checked whether the service was working within the principles of the MCA.

- The registered manager demonstrated a robust understanding of the principles of the MCA and told us that if people were unable to make a decision for themselves, a decision would be made in their best interests involving, where appropriate, people who were important in the person's life.

- Staff had received training and guidance on MCA and DoLS. Staff understood the importance of supporting people to make choices about their daily lives and we heard staff seeking consent from people before providing support with daily tasks.

Is the service caring?

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

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

- People told us they were happy living at 4 Box Crescent. One person said, "Staff are very caring and always treat me nicely." A relative said, ""The staff are brilliant, and I know [my relative] is very happy with the care they receive."
- People were clearly comfortable in the presence of staff, and we noted a lot of warm and friendly interactions.
- Staff showed a good awareness of people's individual needs and preferences. The registered manager said, "This is their life...we make sure people live their life as they want." A staff member said, "This is their home and I just want it to be right for them."
- Staff were committed to providing the best possible care for people. A relative said, "The staff have been brilliant with [my relative] and have supported [them] through this difficult time with the pandemic."
- Staff gave consideration to the Equality Act 2010, and followed equality and diversity policies and procedures to ensure people's diverse needs were met.

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

- People were supported by staff who had time to listen to them and fully involve them in decisions about their care. One staff member said, "I know people really well and I certainly listen to them. All staff listen to [the people we support]." Another staff member said, "There is enough staff at the service. [Our staffing levels] are perfect for the people living here."
- People were involved in making decisions about their care. We saw people were supported to have choice in different aspects of their daily lives such as meals and activities. A staff member said, "People tell us what they want and when they want it."
- We observed staff interacting with people and found they offered choices and respected people's decisions.

Respecting and promoting people's privacy, dignity and independence

- People told us that staff treated them with dignity and respect. Staff told us they would notice and challenge any failings in how people are treated at the service. One staff member said, "If I had a family member who required support then I would be very happy for them to live here."
- People were encouraged to be as independent as possible and staff supported people to develop their independence where possible. Before the pandemic one person had been supported to use public transport independently. One person said, "I can use the phone whenever I want. I've got numbers for people I want to ring, and I call them when I want."
- Records were stored safely which maintained people's confidentiality. The service ensured they

maintained their responsibilities in line with the General Data Protection Regulation (GDPR). GDPR is a legal framework that sets guidelines for the selection and processing of personal information of individuals.

Is the service responsive?

Our findings

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

This is the first inspection for this newly registered service. This key question has been rated good. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- People received person-centred care. The service was able to demonstrate how they were meeting the underpinning principles of Right support, right care, right culture as the care provided to them was according to their individual needs and wishes. One person said, "Staff know me very well."
- People's likes, dislikes and preferences were recorded in their care plans and reviewed and updated when required. Where one person specifically requested particular staff to support them with personal care, the rota and staff had accommodated this.
- People were encouraged to make their own decisions and choices and told us they were involved in decisions about their day-to-day life. A staff member said, "People are at the centre of what we do. We know them really well, their habits, likes, dislikes and hobbies." Another staff member said, "We are very [people] led because they tell us what they want and when they want it."
- Staff completed daily handovers to share important information about people and their mood and preferences on that particular day. One staff member said, "Handover period is really helpful. We had telephone conversations due to COVID. So that we were not in the same house we would speak to each other on the phone before someone came in [to start their shift]."

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- People's communication needs were considered as part of the ongoing care planning process so that information was given in line with their needs.
- People told us they were aware of the information detailed in their care plans and risks assessments, as well as how to raise complaints if necessary.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- People were supported to take part in activities they enjoyed and were protected from the risk of social isolation. Where the pandemic had impacted upon people's usual activities, staff had looked for creative solutions to allow people to still engage in activities which were meaningful to them. For example, one person said, "Staff have supported me to order things online during COVID. I like having parcels coming here to the house. I didn't want to miss out on shopping. I enjoy it."
- People were supported to maintain contact with people who were important to them during the

pandemic. People told us that they had regular telephone contact with family members, and one relative said, "The staff have been supportive with visits in line with government guidelines." Another relative said, "I telephone every night to see [my relative] and we have been to visit. Staff are very good."

Improving care quality in response to complaints or concerns

- The home had a complaints procedure for people or their relatives to use if they were not happy with the care received. There had been no recent formal complaints, but systems were in place to ensure any complaints made would be reviewed and responded to appropriately.

End of life care and support

- No end of life care was required at the time of the inspection. The registered manager had planned for staff to receive training at a local hospice so that end of life care planning could be made available, in the future, to those people who wished to discuss their preferences in this area.

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.

This is the first inspection for this newly registered service. This key question has been rated good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- There was a positive and person centred culture in the home. People were happy with the support they received and felt comfortable and relaxed in their surroundings. One person said, "I am involved fully in my care."
- Staff were knowledgeable about the people they supported. One staff member said, "The length of time staff stay here provides continuity and allows people to be supported by staff they really trust."
- The registered manager told us that people were empowered to share their feelings about the quality of the care, "People will communicate with the senior or ring the office directly."
- Staff told us they felt valued and supported. One staff member said, "We are a supportive team with good lines of communication. We have a very supportive line manager."
- The registered manager was open and transparent throughout our inspection and was clearly committed to providing good quality care. They said "Staff have a depth of knowledge of autism and we promote an understanding of autism. We have a good staff team...who always support people to work towards their goals and aspirations."

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 registered manager understood their legal responsibilities to report to the CQC.
- The provider and registered manager were aware of their responsibilities under the duty of candour, to be open and honest about any accident or incident that had caused or placed a person at risk of harm.
- The provider displayed their CQC rating from the previous location within the service.
- Concerns and complaints were listened to and acted upon. One staff member said, I recently had [a concern] and I was very supported."

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

- People benefited from a staff team that worked well together and understood their roles and responsibilities.
- Regular staff meetings took place to ensure information was shared and expected standards were clear for staff. Staff told us they felt listened to and had input into the running of the home.
- The management team monitored the service closely by completing audits and supervising staff to ensure

consistent practice. One staff member said, "We have constant support from line managers. The senior will always call and check in which is important when you're lone working." Another staff member said, "They run a tight ship."

- There was a clear management structure in place, consisting of the registered manager and senior who worked solely at the home. They were clear about their roles and responsibilities and staff spoke highly about the organisation. One staff member said, "I have been in numerous organisations and I have to say that [this organisation] is the best I've ever seen. I'm not just saying that because I work there, I'm saying that because they are. They are a really good provider."

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

- Staff, people and their relatives had confidence in the service and told us the home was well managed. One staff member said, "They run a very good organisation. It is a very good place to work."

- The registered manager kept up to date with best practice by attending local forums with other care professionals. These forums allowed for information sharing, professional updates and discussions around how to implement best practice guidance.