

The Bridge Community Care Limited

Roundhay Wood

Apartments

Inspection report

51-53 Gledhow Wood Road
Roundhay
Leeds
LS8 4DG

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12 April 2023

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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

Roundhay Wood Apartments is a care home registered to support up to 7 people with a learning disabilities and autistic people. At the time of the inspection, 7 people were using the service.

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted.

Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it. The registered manager and staff were working in line with these principles including choice, promotion of independence and inclusion.

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

Right Support

Staff protected and respected people's privacy and dignity. Staff understood and responded to people's individual needs. Staff understood how to protect people from poor care and abuse, and the service worked well with other agencies to do so. The service had enough appropriately skilled staff to meet people's needs and keep them safe. People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

Right Care

People received care and support from a team of staff who were dedicated, passionate and committed to their roles. Staff were caring and sought to ensure people were treated in a dignified and respectful way. Staff understood people's cultural needs and provided culturally appropriate care. Staff engaged with people in a respectful and compassionate manner.

Right culture

Leadership and management of the service was effective. The registered manager led by example, creating, and embedding a culture where people felt valued, and their individual contributions recognised. Staff and managers ensured the service was safe by assessing risks to people. Safe recruitment practices were followed. Staff knew and understood people well and had received the appropriate training to meet people's needs.

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

Why we inspected

This service was registered with us on 8th October 2021, and this is the first inspection.

We undertook this inspection to assess that the service is applying the principles of Right support right care

right culture.

Follow up

We will 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.

Details are in our safe findings below.

Is the service effective?

Good ●

The service was effective.

Details are in our safe findings below

Is the service caring?

Good ●

The service was caring.

Details are in our effective findings below.

Is the service responsive?

Good ●

The service was responsive.

Details are in our responsive findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Roundhay Wood Apartments

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 Health and Social Care Act 2008.

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

One inspector and an Expert by Experience carried out the inspection. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service. The Expert by Experience made telephone calls to relatives.

Service and service type

Roundhay Wood Apartments is a 'care home' People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. Roundhay Wood Apartments is a care home without nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

Notice of inspection

This inspection was unannounced.

What we did before the inspection

We reviewed information we had received about the service since. We asked the provider to complete a Provider Information Return (PIR) This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with 1 person living at the home, 4 people's relatives about their experience of the care provided. We observed care in peoples flats and in the communal garden to help us understand the experience of people. We spoke with the registered manager and 3 members of staff we also received email feedback from 3 members of staff. We gathered feedback from 3 visiting professionals. We reviewed a range of records. This included 5 people's care records and 7 medication records. We looked at 3 staff files in relation to recruitment and supervision. We also looked at information regarding the arrangements for monitoring the quality and safety of the service 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 of this newly registered service. This key question has been rated good. This meant people were safe and protected from avoidable harm.

Using medicines safely

- Medicine were managed and administered safely. The registered manager was passionate about the STOMP (stopping over-medication of people with a learning disability, autism or both) and worked with the GP regarding ensuring people received appropriate medication and people were not over or under medicated.
- Staff were trained to support people with their medicines and additional training was completed where required.
- Medicines were stored securely, and temperatures of medicines storage areas were monitored.
- Medicines records were completed and where people received 'as required' medicines, protocols were in place to guide staff about how to safely administer them.

Systems and processes to safeguard people from the risk of abuse

- Systems were in place which sought to protect people from the risk of abuse. Staff knew how to recognise and respond to potential signs of abuse and were aware of local safeguarding procedures.
- Relatives told us they had no concerns relating to safety when their family members were receiving care and support. Where people were at specific risk of abuse, for example when out in the community, there were detailed risk assessments in place to ensure the risk of abuse was managed and minimised. One relative told us, "[Person] is safe, but can now do more than they have been able to do in a very long time, the balance is right."

Assessing risk, safety monitoring and management; learning lessons when things go wrong

- An assessment of need was completed before a person started to use the service. This helped to ensure known risks were identified early and appropriate management plans could be put in place.
- New and emerging risks were identified and acted upon in a timely manner. This was evidenced through effective joined up working between the service and external agencies.
- Untoward events were investigated, and remedial action taken to reduce the likelihood of re-occurrence. Information related to lessons learned was shared internally with staff, and with other relevant agencies.

Staffing and recruitment

- There were enough staff to safely meet people's needs. People had their own individual staff teams that supported them. One staff member told us, "Staffing levels change as people's needs change, so people are not over or under supported."
- Pre-employment checks had been carried out to ensure the suitability of prospective new employees, this included with the Disclosure and Barring Service (DBS). DBS checks provide information including details

about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

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 supporting people living at the service to minimise the spread of infection.
- 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 responding effectively to risks and signs of infection.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises. 9 77 Gloucester Road North Inspection report 18 April 2023
- 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.

Learning lessons when things go wrong

- Safeguarding concerns, accidents and incidents were reviewed and analysed to ensure themes were identified, and appropriate action had been taken. This included looking at ways of preventing a re occurrence. Any learning was shared with the team during handovers and team meetings.

Visiting in care homes

- The registered manager demonstrated they had followed the government guidance on visiting arrangements. Friends and family were able to visit the home with no restrictions. This allowed people to stay in contact with their relatives during the COVID-19 pandemic.

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.

Staff support: induction, training, skills and experience

- All staff received an induction and staff new to care completed the Care Certificate. The Care Certificate is an agreed set of standards that define the knowledge, skills and behaviours expected of specific job roles in the health and social care sectors. It is made up of the 15 minimum standards that should form part of a robust induction programme. Comments from staff included, "I undertook induction, this covered training shadowing and any person specific training that was required for the person we support."
- Training and development of staff was a blend of face-to-face learning and online e-learning. Staff were also afforded opportunities for continuous professional development.
- The service had its own in house trainer that worked with staff to ensure up to date, relevant and person specific training was undertaken by all staff members, a mentor scheme was also in place to support staff's continuous improvement.
- Staff told us "Supervisions are undertaken with the registered manager, I could ask for a supervision if I wanted one, I feel I get lots of support and supervisions are very regular."

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- The views of people were fully considered throughout, including taking account of personal preferences. A visiting professional told us, "I was extremely impressed by the degree of thought, planning and risk management being considered, all with a view to reduce restrictions on [person]."
- People's care plans were up to date, personalised, and reflected their current needs and aspirations, including physical and mental health needs. They showed a good understanding of each person, including their communication support and cultural needs.

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

- Staff worked well with other services and professionals, to ensure that each individual person received a bespoke care package to meet their current needs and to progress with future goals. Comments a visiting healthcare professional included, "The staff are dedicated to helping to improve the quality of life of the people in their service and actively seek help, advice and support to achieve this goal."
- Relatives told us they felt their loved ones were supported by staff to access health professionals when needed. A relative told us "We had a review not so long back and I get regular reports when they change a plan they send me a copy and I comment on it."
- Staff had a good understanding about people's medical and health conditions and what actions they needed to take if a person were to become unwell.
- People care records covered all their health needs, these were used by staff to support them in the way

they needed. Where appropriate, people were also supported to access community-based health and social care services and to attend hospital appointments.

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

- Support with eating and drinking was provided to people where it was part of an assessed care need.
- Risks to people associated with eating and drinking, for example, swallowing difficulties, were detailed in care records and information shared with staff. Relevant and up-to-date guidance was also available.

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

- People were supported to keep their home and bedrooms clean. People's flats are well-furnished and maintained.
- People's flats reflected their likes and dislikes, for example one person's flat was full of cars and buses and another person's flat was quite sparse with space for them to throw their teddy as they liked and not overstimulate them.
- The provider had carried out walkthroughs and checks as required, such as electrical and gas safety.

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. Where people may need to be deprived of their liberty in order to receive care and treatment in their own homes, an application can be made to the Court of Protection who can authorise deprivations of liberty.

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

- The service was working within the principles of the MCA and staff had received appropriate training.
- People were encouraged and supported to have as much choice and control over their lives as possible. The registered manager told us, we have cameras in place and review and risk assess monthly were these can be turned off, to ensure that we always consider the least restrictive practice is being undertaken."
- Where people lacked the capacity to give consent, the principles of best interest decision making were followed and DoLs were in place. We found staff had a good understanding of what the MCA principles including about the need to always consider the least restrictive practices.

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

- People received kind and compassionate care from staff. People were comfortable in the company of staff, and staff we observed demonstrated respect when interacting with people.
- Staff were caring, motivated and passionate about their work. The service was enriched by a team of staff from diverse backgrounds and who were reflective of the community they served. This meant people's individual characteristics, likes, dislikes and personal preferences were fully embraced and recognised by staff.
- In our observations, staff treated people well. Relatives confirmed this. A relative commented, "Best care [person] can get as far as I can see, we can go anytime we want" and another relative saying "very very good care, the communication I can't fault. They've gone out of their way. [Person] went to centre parks last week and I had thirty videos. [Person] is 21 next week and they are organising a party, little things like that they do, they rang and asked how many children were coming to the party so that they could do party bags for them, he has nice clothes and they keep us well informed."
- Staff we spoke with had a good understanding of people's needs, their histories and their preferences. This meant people received support which was tailored to their needs and respected their equality and diversity rights. Relatives told us they had been involved in decision making and reviewing their loved one's care
- Some people living at the home needed support with their communication. Staff told us they used information from people's families, or from people's past, to try and understand what people's decisions might be. Where people could express their views, these were incorporated into their care planning.

Respecting and promoting people's privacy, dignity, and independence

- In our observations, staff took steps to uphold people's dignity and privacy. We observed staff playing by throwing the person teddy bear as they pointed to who they wanted to receive it next, this was included in the person's support plans as something they enjoyed doing and was effective in maintaining their well-being.
- Staff encouraged people to be independent and gave examples of how people were encouraged to be involved.
- Systems were in place to maintain confidentiality; people's records were stored securely within the home.

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 care and support which was personalised to them and took into consideration their needs and preferences.
- Staff were very familiar with people's likes and dislikes. Staff were able to tell us in depth about people's preferences
- Care records showed people's needs and preferences had been analysed in depth when their care and support plans were devised, these evidenced regular review to reflect people's needs.

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.

- The provider had carried out assessments of people's communication needs.
- There was information in people's care plans about the specific ways they communicated. This included an analysis of specific gestures people might make, what they were understood by staff to mean, and how staff should respond.
- One relative told us, "Staff plan ahead, like what film [person] wants to watch at the cinema and what staff they want [to support them with that activity]."

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

- The provider placed an emphasis on supporting people to maintain friendships and relationships where possible.
- Care records showed people were supported to be active in their local communities, in order to avoid social isolation.
- People's care plans showed they were supported to access a wide range of activities that were meaningful to them. One person told us how they would carry on an activity they really enjoyed that involved cars and car washes.,
- One person had recently had a birthday party, we saw videos of them alongside their family and friends, they had balloons, cake and party food that they clearly enjoyed.

Improving care quality in response to complaints or concerns

- The provider had a comprehensive complaints policy in place.

- Relatives told us they would be confident to raise concerns or complaints. One relative said: "Yes, yes, definitely [would not hesitate in making a complain]. No complaints."
- The provider had not received any formal complaints in the 12 months prior to the inspection.

End of life care and support

- At the time of the inspection there was no one receiving end of life support

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;

- The registered manager led by example and had worked hard to embed a positive culture in which people felt valued and their individual contributions recognised.
- Without exception, staff spoke positively about leadership and management. Comments included, "the registered manager is very encouraging to all staff. I think [name of registered manager] is incredible." Appraisals take place yearly. We have a thank you system and you can send them to colleagues to show your appreciation. They are fantastic to receive."
- Team meetings were used to share good practice ideas and problem solve, staff regularly completed 4+1 to enable reflection and learning.

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

- People had an opportunity to meet with their keyworker to explore how they wanted to spend their time and set goals for the forthcoming month.
- A relative confirmed they had regular contact from the registered manager and staff. They told us they participated in care reviews and matters of importance relating to their loved one.
- People's individual characteristics were considered, and care was tailored to the person. For example one person went to a disco at pop world.

Continuous learning and improving care

- Staff completed regular training and updates and met frequently as a team to discuss and make improvements to the service. New staff worked alongside more experienced staff enabling them to get to know people.
- There was an improvement plan that was driving improvements to the service. This included looking at ways involve people more in the writing and reviewing of their care plans.

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

- The registered manager was well supported by a deputy manager who contributed to the day-to-day management of the service.
- Systems for audit, quality assurance and questioning of practice were robust and operated effectively.
- Systems were in place to identify themes and trends which sought to reduce the likelihood of an untoward event occurring again in future.

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 provider fully understood their legal responsibilities around duty of candour. The provider had a framework in place which sought to ensure investigations into accidents, incidents and untoward events were completed in a timely manner and findings shared with relevant people.
- Relatives told us they were kept informed by the registered manager when something goes wrong and were happy with the leadership of the service.

Working in partnership with others

- The registered manager and wider staff team fully embraced the concept of partnership working. This including working with health professionals such as speech and language therapists, GP, social worker, and the tutor that visited to undertake individual learning with the people supported.