

Venus Healthcare Homes Ltd

# Toby Lodge

## Inspection report

141a White Horse Road  
London  
E1 0NW

Tel: 02077911889

Date of inspection visit:  
14 December 2021  
22 December 2021

Date of publication:  
09 February 2022

## Ratings

Overall rating for this service

Inspected but not rated

Is the service safe?

**Inspected but not rated**

Is the service well-led?

**Inspected but not rated**

# Summary of findings

## Overall summary

### About the service

Toby Lodge is a residential care home providing personal care for 10 male adults who had a forensic history, including mental health conditions and/or a learning disability.

Toby Lodge accommodates people in one building across four floors, with each person having their own bedroom with en-suite bathroom. There was also a communal living room/dining room, kitchen, quiet room and access to a small courtyard.

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

The inspection was prompted by information of concern regarding staffing levels and a poor culture within the service.

Although documentation confirmed that in November 2021 there had been a couple of occasions where staffing levels were below the provider's recommended levels, we found no evidence during this inspection that people had been impacted by this and the issue was being addressed by the management team.

The senior management team were open and transparent when we discussed the concerns with them and acknowledged they had experienced some staffing issues at the end of the November, which was impacting the whole health and social care sector. They also explained some recent changes in company policies, including the legal requirement for staff to be vaccinated for COVID-19 as a condition of their deployment, had led to a turnover of staff.

The provider had been responsive to this issue and was in the process of recruiting new staff to ensure they had sufficient staff to meet people's needs.

Throughout the inspection we observed a relaxed environment and people appeared comfortable in the presence of staff. A resident meeting on the first day of the inspection had a homely atmosphere, with discussions based around the upcoming Christmas and New Year plans.

We saw people were supported out in the community during our visit, with one person telling us they were going out for a walk to the local shop.

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 21 March 2018). We also carried out a targeted inspection looking at the Infection Prevention and Control (IPC) practices the provider had in place in February 2021. This was part of CQC's response to care homes with outbreaks of coronavirus, to ensure that the IPC practice was safe and the service was compliant with IPC measures (published 5 March 2021).

### Why we inspected

We undertook this targeted inspection to follow up on a specific concern which we had received about the service. The inspection was prompted in response to concerns received about alleged unsafe staffing levels and a culture of bullying and harassment. A decision was made for us to inspect and examine those risks.

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.

Please see the safe and well-led sections of this full report.

We also 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.

You can read the report from our last inspection, by selecting the 'all reports' link for Toby Lodge on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

### 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?**

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**

### **Is the service well-led?**

At our last inspection we rated this key question outstanding. 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**

# Toby Lodge

## 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. This was a targeted inspection to check whether the provider had met the requirements of the specific concern we had about safe staffing levels.

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

This consisted of one inspector.

#### Service and service type

Toby Lodge 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.

The service did not have a manager registered with the Care Quality Commission. A registered manager is a person, along with the provider who are legally responsible for how the service is run and for the quality and safety of the care provided. The previous registered manager had recently left and there was an interim deputy manager in place whilst the provider looked to recruit a permanent manager.

The provider informed us after the inspection on 7 January 2022 they had seconded a member of the senior management team to be an interim manager whilst the recruitment process was underway.

#### Notice of inspection

This inspection was unannounced. The provider knew we would be returning on the second day of the inspection.

### What we did before the inspection

We reviewed information we had received about the service since the last inspection. 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 reviewed the previous inspection report and sought feedback from the local authority. We also reviewed the information of concern that had been shared with us via our contact centre which triggered this inspection. We used all of this information to plan our inspection.

### During the inspection

We met and had introductions and general conversations with all of the people who used the service.

We spoke with seven staff members. This included the interim deputy manager and two members of the senior management team. We also spoke with four support workers.

We reviewed a range of records related to staffing levels in the home. This included samples of staff rotas and shift planner records for November and December 2021, daily and weekly service reports and email correspondence related to staffing in the home. We also reviewed samples of daily records that had been completed on the provider's digital care planning system.

We carried out observations throughout the inspection in relation to IPC procedures, staff awareness of best practice and reviewed signage that was displayed around the home. We also sat in and observed a resident meeting that took place on the first day of the inspection.

### After the inspection

We continued to seek clarification from the provider to validate evidence found. We reviewed policies and quality assurance records related to IPC within the home.

We had follow up correspondence with two directors on the 15 December 2021, one of them being the nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider. We provided formal feedback to the nominated individual and senior management team via email on the 23 December 2021, who responded with their comments on 12 January 2022.

We provided our contact details to the staff team to give all of them the opportunity to speak with us if they wanted to but did not receive any further feedback about the service. We also shared our findings with people's social workers and the relevant funding authorities.

# 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.

The purpose of this inspection was to explore the specific concern we had about safe staffing levels. We also looked at the infection control and prevention measures in place. We will assess all of the key question at the next inspection of the service.

### Staffing and recruitment

- On arrival at the home on the first day of the inspection, we were assured there were sufficient numbers of staff on duty in line with assessed levels to meet people's needs safely. There were seven members of staff on duty, which included five support workers, an interim deputy manager and an operations manager providing further support to the service.
- We were told the regular staffing structure which was scheduled on the rota included six support workers and the manager, but the minimum baseline of staff required was five.
- We discussed the concerns we received with the provider about staffing levels who acknowledged there had been a couple of occasions when staffing levels were below what was required. Daily records showed on the 29 and 30 November 2021 there were only four members of staff present, which included the deputy manager. We saw this had been escalated to the senior management team via a daily morning report and discussed in management meetings.
- The provider was open about this period and highlighted staff retention and recruitment had been an issue within the sector, due to factors including the pandemic and the requirement for care home staff to have the COVID-19 vaccine as a condition of their deployment. This had resulted in a higher turnover of staff.
- Daily records showed when there were staffing issues in the home, due to staff sickness or non-attendance, support was provided by members of head office staff.
- Daily records for December 2021 confirmed staffing levels had not fallen below baseline levels and staff confirmed this. One staff member told us staff shortages were a result of cancelled shifts on the day and they had to work around this issue. They added, "It was escalated to management and they provided extra support where they could. We had a couple of days of shortages, but the owners were very aware of this and took it seriously. They have made it clear they do not want to risk people's safety."
- The provider was taking action to recruit new staff and was in the process of recruiting overseas staff as they had obtained a certificate of sponsorship licence from the Home Office. One of the directors told us, "As you are aware, the whole industry is facing a labour crisis in addition to the COVID-19 pandemic and we have in excess of 15 staff in the pipeline being processed." We also saw a new recruit shadowing staff on the second day of the inspection.
- Staff confirmed that staffing levels had been consistent since the issues they had at the end of November 2021. Comments from staff included, "Since the new staff and the deputy manager, we have not had this happen again and I'm confident it won't happen again with the action they have taken" and "We did have

some issues and they looked into it. I have seen an improvement with the new staff."

- Where we found occasions in November 2021 where staffing levels were below the recommended levels, we found no evidence during this inspection that people had been severely impacted by this. Although some external activities for people had to be cancelled on the days with four staff members, people were told why and were still offered opportunities to go out for a walk in the local area within the abilities of the four staff present.
- Throughout the inspection we observed a calm and relaxed environment. Staff were present within communal areas when required, including the deputy manager. Where people required one to one support, we saw staff were with them throughout the day. We saw people were supported outside the home. Records of daily logs also showed people were supported to appointments or activities of interest.

### 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.

From 11 November 2021 registered persons must make sure all care home workers and other professionals visiting the service are fully vaccinated against COVID-19, unless they have an exemption or there is an emergency. We checked to make sure the service was meeting this requirement. We found the service had effective measures in place to make sure this requirement was being met.

- Staff confirmed this had been discussed with them before 11 November 2021 and had to show evidence they had been fully vaccinated. The provider kept a record of this on a central log to confirm the date it had been checked. Evidence of vaccination status had also been implemented into the recruitment and interview process.



# 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 outstanding. 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.

The purpose of this inspection was to explore the specific concern we had received about the management of the service. We will assess all of the key question at the next inspection of the service.

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

- The majority of feedback we received was positive about the management of the service and the support provided. Staff comments included, "I feel they have been proactive and listen to us. The owners have an open-door policy and it is never an issue contacting them" and "If I'm unsure about anything I have the numbers for the area managers and directors if I need it and they listen to us. I have a good relationship with the management team and feel it is a good place to work."
- Although the deputy manager had only been in post for five weeks, we saw people were relaxed in their presence and people were comfortable to come up and speak with them, engaging in general conversation and asking questions about the home. One staff member said, "[Deputy manager] has gone beyond the call of duty and supported people and us when needed."
- However, one staff comment highlighted other than the deputy manager, they did not always feel they were listened to by other members of the senior management team.
- We discussed the information we received with the provider about the staff morale and working environment within the home. The provider told us these issues were already being discussed with staff and they felt staff were looked after and were listened to. This was through support via supervision, appraisals and further training and development opportunities.
- An operations manager told us they always told staff they had an open-door policy and were available to speak with them if needed. They added, "We have staff supervision to give opportunities to raise issues, along with access to head office and the directors. We also check during monthly staff meetings where staff can raise any issues."
- Where there had been some recent changes in company policies, staff were informed there would be a zero-tolerance approach to non-compliance which could result in disciplinary procedures. The nominated individual added, "I am aware that some staff may not have been happy when these measures were brought in, hence the high turnover."
- The nominated individual told us after the inspection they prided themselves on people not reoffending since they had moved in and had been able to support people where placements had broken down in other homes. They added, "We take our responsibility and safety very seriously and I can assure you that since my close involvement in the past year, I have improved our systems and policies to reinforce this."
- One health and social care professional told us a person they worked with was happy at Toby Lodge, was well settled and staff managed the placement well. Although they were unable to fully comment on the

culture of the service, they said they had not been contacted by any staff or received any safeguarding concerns.