

Lansdowne Care Services Limited

182 Bromham Road

Inspection report

182 Bromham Road **Bedford** Bedfordshire MK40 4BP

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Ratings

Overall rating for this service

Requires improvement



Is the service safe?

Requires improvement



Overall summary

We carried out an unannounced comprehensive inspection of this service on 16 July 2015. A breach of legal requirements was found. People's risk management plans were not followed appropriately to prevent the risks of harm to people and visitors. After the comprehensive inspection, the provider wrote to us to say what they would do to meet legal requirements in relation to Regulation 12 (2) (b) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

We undertook this focused inspection to check that they had followed their plan and to confirm that they now met legal requirements.

This report only covers our findings in relation to the outstanding breach of regulation. You can read the report from our last comprehensive inspection by selecting the 'all reports' link for '182 Bromham Road' on our website at www.cqc.org.uk

182 Bromham Road provides a service for up to six people with a learning disability. There were six people living at the service on the day of our inspection.

The service has a manager but they had not yet been registered with the Care Quality Commission (CQC). The manager was able to show us that they had begun the registration process. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons.' Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act and associated Regulations about how the service is run.

During this inspection, we found improvements had been made to ensure people's risk management plans were followed appropriately to prevent the risks of harm to people and visitors. Risk management plans had been reviewed and contained clear guidelines for staff to follow a consistent approach.

Summary of findings

While improvements had been made we have not revised the rating for this key question; to improve the rating to 'Good' would require a longer term track record of consistent good practice. We will review our rating for safe at the next comprehensive inspection.

Summary of findings

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Action had been taken to improve safety.

People's risk management plans had been reviewed and contained clear guidelines for staff to follow to prevent the risks of harm to people and visitors.

We could not improve the rating for safe from requires improvement because to do so requires consistent good practice over time. We will check this during our next planned comprehensive inspection.

Requires improvement





182 Bromham Road

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service and to provide a rating for the service under the care Act 2014.

We undertook an unannounced focused inspection of 182 Bromham Road on 16 December 2015. This inspection was done to check that improvements to meet legal requirements planned by the provider after our comprehensive inspection on 16 July 2015 had been made. The inspector inspected the service against one of the five questions we ask about services: is the service safe. This is because the service was not meeting some legal requirements.

The inspection was undertaken by one inspector.

During the inspection we spoke with the manager to gain their views on what improvement had been made to achieve compliance. We looked at a generic risk assessment for the service and a risk assessment for one person who used the service.

Before our inspection we reviewed the information we held about the service. This included the provider's action plan, to meet the legal requirement. We also reviewed information we held about the service that included statutory notification, which the provider is required to send us by law.



Is the service safe?

Our findings

When we inspected 182 Bromham Road on 16 July 2015, we found that people's risk management plans were not always consistently followed to prevent the risks of harm to people and visitors.

This was a breach of Regulation 12 (2) (b) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014

The provider submitted an action plan detailing the actions they would be taking to minimise the risk of harm to people and visitors. They told us compliance would be achieved by October 2015.

We inspected the service on 16 December 2015 to assure ourselves that improvements had been made.

During this inspection we looked at a generic risk management record and a risk management plan for a person who used the service. We found that their risk management plans had been reviewed to reflect the changes to their individual behaviours when visitors were in the service. The plans contained detailed guidelines to enable staff to follow consistently to prevent the risk of harm to people and visitors.

We saw evidence that the manager had discussed with staff people's updated risk management plans during staff meetings, one to one supervision and during daily handovers. Staff had signed to confirm that they understood the measures they needed to put in place to minimise the risk of harm when there were visitors in the service.

The manager told us that another manager from within the organisation had visited the service and had observed staff practice to ensure they were following the revised risk management plans. The manager stated that the risk management plans would be reviewed on a quarterly basis or as and when people's needs changed.

It was evident that the manager had developed reasonably and practicable strategies to mitigate risks of harm to people and visitors.

While improvements had been made we have not revised the rating for this key question; to improve the rating to 'Good' would require a longer term track record of consistent good practice. We will review our rating for safe at the next comprehensive inspection.