

Life Opportunities Trust

# Life Opportunities Trust - 329 Martindale Road

## Inspection report

329 Martindale Road  
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## Ratings

Overall rating for this service

Requires Improvement ●

Is the service safe?

**Inspected but not rated**

Is the service caring?

**Inspected but not rated**

Is the service responsive?

**Inspected but not rated**

Is the service well-led?

**Requires Improvement ●**

# Summary of findings

## Overall summary

### About the service

Life Opportunities Trust - 329 Martindale Road is a care home situated in a residential street in Hounslow. It is registered to provide personal care for people aged 18 and over. It supports adults with multiple or complex needs such as profound learning and physical disabilities and who are living with additional conditions, including epilepsy and dementia. People had their own bedrooms. They shared the kitchen, dining room, living room, bathing and laundry facilities, a sensory room and garden. A team of staff supported people during the day and overnight.

The service has been developed and designed in line with the principles and values that underpin Registering the Right Support (RRS) and other best practice guidance in relation to environmental considerations. The service was registered to provide support to up to seven people and there were four people using the service at the time of our inspection.

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

There had been a number of improvements to the care people received. People were treated with dignity and respect. People's support and risk management plans set out how to avoid the risk of skin damage and discomfort. There was a planned approach to offering people support to regularly try activities that were meaningful to them.

The provider had a number of systems in place to monitor the quality of the service and had implemented an action plan to make sure the service was compliant with regulations. However, ongoing improvement was still required to ensure the quality assurance systems were properly embedded and reliable, and improvements were sustained.

At the time of the inspection the service applied the principles and values of Registering the Right Support. These ensure that people who use the service can live as full a life as possible and achieve the best possible outcomes that include control, choice and independence. The outcomes for people using the service reflected the principles and values of Registering the Right Support by promoting choice and control, independence and inclusion. People's support focused on them having opportunities to try activities that were meaningful to them and gain new skills and become more independent.

People using the service and staff experienced a challenging time as a result of the COVID-19 pandemic. Staff had supported people to shield based on health professionals' advice and this meant some people had not been able to access their community as much as would have been preferred.

There were appropriate procedures for infection prevention and control.

The service worked with other agencies to make sure people received joined up care.

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.

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 (and update)

The last rating for this service was requires improvement (published 27 February 2020) and there were multiple breaches of regulations. These were in relation to treating people with dignity and respect; providing care to meet people's needs and reflect their preferences; managing risks to people's safety; and having effective systems in place to monitor the quality of the service. This service has been in 'special measures' since 31 January 2019. During this inspection the provider demonstrated that improvements have been made. The service is no longer rated as inadequate overall or in any of the key questions. Therefore, this service is no longer in special measures.

#### Why we inspected

We undertook this unannounced targeted inspection to check if the provider had met regulations 9 (Person-centred care), 10 (Dignity and respect), 12 (Safe care and treatment) and 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014, which they were breaching at our last inspection in January 2020. The overall rating for the service has not changed following this targeted inspection and remains requires improvement.

CQC have introduced targeted inspections to follow up on Warning Notices, breaches of regulations 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.

We found there were improvements regarding the provider having effective systems in place to monitor the quality of the service, so we widened the scope of the inspection to include the whole of the well-led key question and to award it a rating.

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 request an action plan for the provider to understand what they will do to continue to improve the standards of quality and safety. We will work alongside the provider and local authority to monitor progress. 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?

At our last inspection we rated this key question requires improvement. 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 caring?

At our last inspection we rated this key question requires improvement. 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 responsive?

At our last inspection we rated this key question requires improvement. 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?

The service was not always well-led.

Details are in our well-Led findings below.

**Requires Improvement** 

# Life Opportunities Trust - 329 Martindale Road

## **Detailed findings**

### Background to this inspection

#### The inspection

This was a targeted inspection to check if the provider had met regulations 9 (Person-centred care), 10 (Dignity and respect), 12 (Safe care and treatment) and 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014, which they were breaching at our last inspection in January 2020.

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 inspection was undertaken by one inspector on 9 September 2020.

#### Service and service type

Life Opportunities Trust - 329 Martindale Road is a 'care home'. People in care homes receive accommodation and nursing or personal care as 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

This inspection was unannounced. We telephoned the provider on arrival to the care home to check if anyone was unwell and if it was safe for us to enter the home.

#### What we did before the inspection

We reviewed information we had received about the service since the last inspection. This included the action plan the provider sent to us following the previous inspections saying what they would do and by when to improve. We received feedback from the local authority and other agencies. We reviewed information about important events the provider had notified us about what had happened 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 used all of this information to plan our inspection.

#### During the inspection

We spoke with the registered manager and the provider's director of care. We used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us. We looked at the care plans for two people and a variety of records relating to the management of the service.

#### After the inspection

We spoke with two relatives, four support workers and three adult social care professionals who have worked with the service. We looked at quality assurance records and other records relating to the management of the service. We continued to seek clarification from the provider to validate evidence found.

# 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. 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. We will assess all of the key question at the next comprehensive inspection of the service.

The purpose of this inspection was to check if the provider had met regulation 12 (Safe care and treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014, which they were breaching at our last inspection in January 2020. The overall rating for the service has not changed following this targeted inspection and remains requires improvement.

### Assessing risk, safety monitoring and management

At our inspection in January 2020 the provider had failed to robustly assess and manage the risks relating to the health safety and welfare of people. This was a breach of regulation 12 (Safe Care and Treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

At this inspection we found improvements had been made and the provider was no longer in breach of this part of regulation 12.

- At the last inspection we found care and risk management plans for people who used wheelchairs and hoists to mobilise did not set out how they needed to change position regularly to avoid the risk of skin damage and discomfort. At this inspection we found people's plans now stated they needed support to change position every four hours to remain safe and comfortable. Records of people's daily care indicated staff supported them to change position regularly as required.
- The provider had also completed pressure area risk assessments to identify people who may be at risk of developing skin sores and actions to take to manage this. There were new plans to monitor people's skin integrity throughout the day and staff completed these regularly.
- We observed two staff supporting a person to transfer safely from one chair to another using the person's sling and a new ceiling-mounted hoist in the communal lounge.

### Preventing and controlling infection

- There were arrangements in place for preventing and controlling infection.
- Staff were provided with suitable personal protective equipment to keep themselves and people safe, including face masks, gloves and aprons. There were hand sanitisers for staff to use. We saw staff using this equipment appropriately during our visit.
- Staff completed daily and weekly cleaning schedules to keep the home clean. The registered manager and senior support workers audited infection prevention and control practices regularly to assess how staff supported people and the cleanliness of the environment. A support worker also told us, "We do deep cleaning now and when they come on shift the management team check it is done properly." The home was clean during the inspection visit.

# 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.

At the last inspection this key question was rated as requires improvement. 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. We will assess all of the key question at the next comprehensive inspection of the service.

The purpose of this inspection was to check if the provider had met regulation 10 (Dignity and respect) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014, which they were breaching at our last inspection in January 2020. The overall rating for the service has not changed following this targeted inspection and remains requires improvement.

Respecting and promoting people's privacy, dignity and independence; Ensuring people are well treated and supported

At our inspection in January 2020, we found the staff did not always treat people with dignity and respect. This was a breach of regulation 10 (Dignity and Respect) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 10.

- At the last inspection we observed staff supporting people and moving their wheelchairs without explaining what they were doing or why and leaving people with little stimulation or interaction. At this inspection we observed staff regularly talking with people. Staff told people what was happening, what they would like to support them with and asking them if they were ok with this. Staff told people when they were going to help them move their wheelchair before they did so.
- Staff spoke with people in a kindly manner and treated them with dignity and respect. Adult social care professionals also told us they had seen this. One professional said they had observed staff speak with people "politely and with respect." Staff we spoke with explained how they supported people in ways to promote their dignity and privacy. This included knocking before entering people's rooms, introducing themselves, explaining what they were supporting a person with, ensuring curtains and doors were closed, keeping areas of a person's body covered during personal care, and reassuring people when supporting them.
- The registered manager completed a 'dignity audit tool' each month since our last inspection to monitor how the service promoted people's dignity. These audits identified actions to uphold this, such as discussing dignity and privacy in people's care with staff at team meetings and in supervisions. Meeting records we saw showed the registered manager had discussed dignity, respect, encouraging people's choices and maintaining their privacy at monthly team meetings.
- Staff described how they promoted people's choices in everyday living. For example, how they recognised a person's facial expressions to show a choice of clothing or how they recognised people's choices about



what and where they would like to eat. During our visit we observed staff respecting people's choices about their meal and providing them with alternatives to eat. The provider had redecorated people's bedroom doors in colours based on their known preferences and one person's relative told us they had been involved in deciding this as well.

# Is the service responsive?

## Our findings

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

At the last inspection this key question was rated as requires improvement. 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. We will assess all of the key question at the next comprehensive inspection of the service.

The purpose of this inspection was to check if the provider had met regulation 9 (Person-centred care) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014, which they were breaching at our last inspection in January 2020. The overall rating for the service has not changed following this targeted inspection and remains requires improvement.

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

At our inspection in January 2020 we found the provider did not ensure people always received care and treatment which was appropriate, met their needs or reflected their preferences. This was a breach of regulation 9 (Person-centred care) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 9.

- At the last inspection, people were not always supported to engage in meaningful activities, opportunities to learn or develop their skills or interests or to meet their sensory needs. At this inspection we found improvements.
- There was a more coordinated approach to staff supporting people with activities. The registered manager had developed weekly activities plans for people. Each morning and afternoon staff offered each person at least two activities to choose from. These included activities such as painting, collage craft, story books, clay modelling, support to spend time in the sensory room, music, playing hoopla and baking. Records of daily care we viewed showed the activities people were offered, what they chose or alternatives staff tried with a person, and what the person appeared to enjoy. We saw some paintings people had made and pictures of people taking part in some activities on walls in the home and in photo albums.
- Relatives said they felt people were supported with more activities now and staff kept them informed about these. The registered manager sent relatives regular newsletters with pictures to show them some activities people had tried. Adult social care professionals told us staff engagement with people and support for activities had improved. One professional commented, "Staff seem to be much more engaged with the service users. You see staff sitting with the service users and chatting with them, interacting with them. You never used to see that."
- People had not been able to benefit from some activities in the community as planned, such as attending day centre sessions. These had not been available due to the COVID-19 pandemic and staff supported people to shield. However, daily care records indicated staff supported people on walks around the local

area and park and out for regular drives. A relative confirmed this took place and the drives had meant their family member had been able to come to see them while remaining in the vehicle so both stayed safe.

- Staff supported people to keep in contact with their families. For example, relatives told us they appreciated staff helping people to video-call them using digital devices. One relative said this happened regularly and they found it "really, really good."

# 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 inadequate. At this inspection this key question has now improved to requires improvement. This meant the service management and leadership was consistent. Systems for monitoring the quality and safety of the service and to create a culture to promote person-centred care needed to be embedded. We have not been able to change this rating to more than requires improvement because we have not been able to assess all the five key questions at this inspection and we wanted to see that any improvements would be embedded and sustained over time. We will review the ratings for the other key questions and the service overall when we next conduct a full comprehensive inspection.

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

In January 2020 we found the provider the provider's audit systems for monitoring the quality and safety of the service were not operated effectively as the systems had not successfully assessed and made improvements to the quality of care, activities and staff interactions that people were experiencing at home. This was a breach of regulation 17 (Good Governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17.

- At our last inspection we found there were ongoing breaches of regulations. These included the provider not ensuring people were always treated with dignity and respect, consistently experienced meaningful everyday lives and were protected from a risk of skin damage and discomfort. At this inspection we found the provider had made improvements and there were no breaches of regulations.
- We had previously identified breaches of regulations at the last three inspections since December 2018 which the provider had not complied with until this inspection visit. While we found that regulations were being met at this inspection, ongoing improvement was required to ensure the provider's systems for monitoring the quality and safety of the service were properly embedded and improvements were sustained. Relatives told us there had been improvement and they also wanted this to be maintained. One relative commented, "We're happy with it and want it to continue along the same lines."
- The registered manager and senior support workers completed a series of quality checks to monitor the service. These included audits of people's care and risk management plans, infection control practice, health and safety checks, medicines support, money handling, maintaining a safe environment and observing staff performance. These audits recorded issues that needed to be addressed and the actions taken for this. Senior management then checked this monitoring was taking place.
- There was a detailed service improvement plan in place which the provider had updated regularly. This set out the actions the provider had planned and completed to drive improvements at the service.

- Since the last inspection the provider had recruited a manager who had registered with CQC. We received positive feedback about them. A relative commented, "[The registered manager] is consistent and follows through with things they say they will do. So far they have been pretty good." An adult social care professional said, "[The registered manager] there makes a big difference. They come out of the office, sit with us, see the assessment, and talk about it with us afterwards. They are very organised."
- Staff felt supported by the registered manager and could approach them with concerns and for help. One support worker said, "The manager listens when you have issues, they deal with it immediately."

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

- The service had a positive culture to support the delivery of person-centred care. We observed staff support people in a friendly and compassionate manner. Staff said they felt the atmosphere in the house had improved and described it as "relaxed" and supportive.
- People who had visited the service told us it had improved. Adult social care professionals remarked that they found the home "calmer, not like it used to be" and "it feels really organised." A relative said, "It is much better. I am happy. I can come home and I am not worried and I can relax."
- The registered manager recorded incidents or accidents and the actions taken when responding to these. The registered manager had started to review these on a quarterly basis to identify service improvements, such as updating people's risk management plans or improving incident reporting for staff when the registered manager was not on site. This indicated the provider had started to develop an approach to continuous learning to make improvements at the service.
- The provider was aware of their responsibility to notify us of important events and had done so since our last inspection.
- The provider displayed the previous inspection ratings at the home and on their website.

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

- The registered manager provided relatives with opportunities to be involved in the running of the service. Before the COVID-19 pandemic lockdown, the registered manager had held family meetings with relatives to discuss and involve them in the service developments. Relatives told us the registered manager had still kept them informed during the pandemic through telephone and email contact. The provider had held some online meetings with some relatives to help them be involved in people's support. For example, when reviewing a person's care with their relatives and other professionals or planning for a person's future care needs. Relatives told us they felt listened to.
- Regular staff team meetings had been held since our last inspection. Records of these showed the team discussed issues such as people's health and well-being, safe working during the COVID-19 pandemic, safeguarding, promoting people's dignity, incident reporting and medicines support.
- Staff held regular meetings with people to discuss issues regarding the service. For example, the staff wearing protective masks due to COVID-19, new visitor arrangements, menus, and activities planning, such as a BBQ in the garden and a future trip to the zoo.
- The provider had not conducted any stakeholder or feedback surveys since our last inspection. They had completed one with staff to ascertain staff well-being during the pandemic. The registered manager told us they talked with staff about their concerns during team meetings and supervisions.

Working in partnership with others

- The service worked in partnership with other agencies, such as social workers, therapists, GPs and other

healthcare professionals, to help to provide coordinated care to people. Adult social care professionals told us the service worked constructively with them. They described the registered manager as "very proactive" in communicating with them and "really good at keeping us in the loop."