

Options Autism (6) Limited

# Options Malvern View

## Inspection report

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Date of inspection visit:  
08 September 2022

Date of publication:  
04 November 2022

## Ratings

Overall rating for this service	Inspected but not rated
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Is the service safe?	Inspected but not rated
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Is the service well-led?	Inspected but not rated
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# Summary of findings

## Overall summary

### About the service

Options Malvern View is a residential care home that provides personal care and support for up to 33 people with a learning disability and autism. At the time of the inspection there were 25 people living at the service.

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

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.

**Right Support:** The provider could not demonstrate how the service met the principles of right support, right care, right culture. This meant we could not be assured that people were always empowered to make choices and be involved in their care and support.

However, some improvements had been made since last inspection and some people were now having more access to community-based opportunities. There were also revised line management structures, which the provider told us would improve the oversight of the care that people received. These aspects of improvement were still under development and had not become fully embedded in people's experiences.

**Right Care:** People were not always supported to have maximum choice and control of their lives and staff did not always support people in the least restrictive way possible and in their best interests. Partner agencies and the CQC have continued to receive concerns around aspects of restrictive practice.

**Right Culture:** Although the provider was taking steps to improve the governance and oversight of the service, these improvements had not yet become embedded and the CQC and partner agencies and continued to receive concerns relating to the culture in the service.

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 inadequate (published 6 July 2022)

### Why we inspected

We undertook this targeted inspection to check on a specific concern we had about the culture in the service. The overall rating for the service has not changed following this targeted inspection and remains inadequate.

We use targeted inspections to follow up on Warning Notices or to check 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.

#### Follow up

We will meet with the provider following this report being published to discuss how they will make changes to ensure they improve their rating to at least good. We will work with the local authority to monitor progress. We will continue to monitor information we receive about the service, which will help inform when we next inspect.

The overall rating for this service is 'Inadequate' and the service remains in 'special measures'. This means we will keep the service under review and, if we do not propose to cancel the provider's registration, we will re-inspect within 6 months to check for significant improvements.

If the provider has not made enough improvement within this timeframe and there is still a rating of inadequate for any key question or overall rating, we will take action in line with our enforcement procedures. This will mean we will begin the process of preventing the provider from operating this service. This will usually lead to cancellation of their registration or to varying the conditions the registration.

For adult social care services, the maximum time for being in special measures will usually be no more than 12 months. If the service has demonstrated improvements when we inspect it and it is no longer rated as inadequate for any of the five key questions it will no longer be in special measures.

## 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 inadequate. We have not reviewed the rating as we have not looked at all of the key question at this inspection.

**Inspected but not rated**

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

At our last inspection we rated this key question inadequate. We have not reviewed the rating as we have not looked at all of the key question at this inspection.

**Inspected but not rated**

# Options Malvern View

## 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.

This was a targeted inspection to check whether the provider had met the requirements on a concern we had about poor culture and care that was not person centred.

#### Inspection team

Three inspectors carried out this inspection.

#### Service and service type

Options Malvern View 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. Options Malvern View 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 service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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.

At the time of our inspection there was not 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 the last inspection. We sought feedback

from the local authority and professionals who work with the service. The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with two people who used the service and observed how other people were being supported. We spoke with eight members of staff including senior operational staff and team leaders. We reviewed a range of records relating to the management of the service, including policies, procedures and safeguarding incident records.

# Is the service safe?

## Our findings

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

At our last inspection this key question was rated inadequate. We have not changed the rating as we have not looked at all of the safe key question at this inspection.

The purpose of this inspection was to check a concern we had about the culture in the home and how staff talked to people that lived there. We will assess the whole key question at the next comprehensive inspection of the service.

Systems and processes to safeguard people from the risk of abuse

- There had been concerns raised about potential verbal abuse and threatening behaviour from staff. At the time of inspection, the provider was in the process of gathering further information relating to these concerns. The provider had taken steps to mitigate the risk of staff currently under investigation working alone with people in the service and were working with the safeguarding authority.
- We spoke with two people that used the service and they told us they were happy with their care and support. We also carried out observations in the areas where people were supported. We saw one person becoming anxious and staff responded in a way that was calm and reassuring.

Assessing risk, safety monitoring and management

- Fire risks were not always effectively managed. Some fire doors were broken and therefore did not offer assurance as to their effectiveness in the result of a fire. Whilst the provider was aware and had ordered the fire doors to be replaced. The provider could not evidence that mitigation of risk had been thoroughly assessed. For example, combustible items were not appropriately stored, and routine fire safety checks were not carried out in line with the providers own procedures. The provider has now told us that these doors have been replaced and additional actions had been taken to further mitigate risk.

Staffing and recruitment

- At the last inspection there were not sufficient numbers of staff to meet people's assessed needs. At this inspection we found improvements in staffing levels and the provider told us they were making progress with recruitment. They acknowledged that there continued to be times when people did not receive their assessed levels of support, but told us people were safe as they had a system to allocate the available staff to ensure risks were mitigated.
- At the last inspection there was no effective system to ensure that staff who were on shift were appropriately deployed to ensure people were safely supported. Improvements had been made to how staff were deployed since last inspection and there was increased oversight from the management team.

# 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 our last inspection this key question was rated inadequate. We have not changed the rating as we have not looked at all of the Well-led key question at this inspection.

The purpose of this inspection was to check a concern we had about the culture in the home and how staff talked to people that lived there. We will assess the whole key question at the next comprehensive inspection of the service.

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

- The provider provided regular updates on their actions to CQC around how they planned to improve the management, governance and culture of the service. Whilst we could see changes had been made to the management structure in the home, there continued to be concerns received by the CQC in relation to the staff culture in the service.

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

- The provider has implemented a new management structure and roles in the service. Not all of the roles had been recruited to and there was no registered manager at the time of the inspection.
- The systems of governance needed to be improved and embedded to enable sustainable improvement.