

Vibrance

Vibrance 138 All Saints Road

Inspection report

138 All Saints Road
London
SW19 1BZ

Tel: 02085420260

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Vibrance 138 All Saints Road is a care home providing residential respite services. The service provides personal care for to up to 7 people at one time. At the time of our inspection there was one person using the service.

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

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.

People received their medicines safely. There were enough staff to meet people's needs and ensure people were safe. Risk assessments were clear in highlighting potential risks to people. Staff suitability was checked prior to them commencing work. Learning was shared following the occurrence of any incidents or accidents. Infection control processes were effective.

We expect health and social care providers to guarantee autistic people and people with a learning disability the choices, dignity, independence and good access to local communities that most people take for granted. Right support, right care, right culture is the statutory guidance which supports CQC to make assessments and judgements about services providing support to people with a learning disability and/or autistic people.

Based on our review of safe and well-led the service was able to demonstrate how they were meeting the underpinning principles of Right support, right care, right culture.

Right support: People were supported to be as independent as they could be and were supported to make choices about how they received their care

Right care: People received person centred care. Staff respected people's rights and treated them with privacy and dignity

Right culture: The culture of the service supported people and staff in an inclusive way; enabling people to live their day-to-day lives as they chose to.

The service ran with an inclusive culture which was transparent with people, their relatives and staff. Quality assurance systems were effective in driving improvement across the service. Other parties were consulted to provide feedback about the service.

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

Rating at last inspection

The last rating for this service was good (published 06 February 2020)

Why we inspected

The inspection was prompted in part by notification of a specific incident. The outcome of this could have resulted in a serious risk to a person's health or wellbeing.

The information CQC received about the incident indicated concerns about the management of specific risks. This inspection examined those risks.

We found no evidence during this inspection that people were at risk of harm from this concern. Please see the safe sections of this full report.

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 COVID-19 and other infection outbreaks effectively.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

We found no evidence during this inspection that people were at risk of harm from this concern. Please see the safe and well-led sections of this full report.

The provider had taken full action to review and mitigate potential risks and we were satisfied with their response.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Vibrance 138 All Saints Road on our website at www.cqc.org.uk.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next 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?

Good ●

The service was safe.

Details are in our safe findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-Led findings below.

Vibrance 138 All Saints Road

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

This inspection was carried out by one inspector.

Service and service type

Vibrance 138 All Saints Road 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. Vibrance 138 All Saints Road 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 a registered manager in post. However, they were not present at the time of inspection. Therefore, we were unable to speak with them.

Notice of inspection

We gave the service 24 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the provider or registered manager would be in the office to support the inspection.

What we did before the inspection

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 reviewed information the provider had sent to us such as statutory notifications.

We used all this information to plan our inspection.

During the inspection

We spoke with the assistant director of operations and a staff member. We reviewed a range of documents including a care file, medicines administration record (MAR) and audits.

After the inspection

We spoke with a relative of the person using the service. We reviewed a range of additional documentation such as policies and staff files.

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 we rated this key question good. The rating for this key question has remained good.

This meant people were safe and protected from avoidable harm.

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

- A recent statutory notification submitted to the Care Quality Commission highlighted concerns that the provider did not have clear risk assessments in place to ensure staff were aware of specific risks to people.
- We reviewed the incident with the provider and saw that potential risk areas were clearly recorded and defined the specific actions staff needed to take to reduce the likelihood of risk occurrence.
- As part of their incident investigation and management the provider had taken steps to mitigate the likelihood of the risk reoccurring. Records were clear for staff to ensure they were able to reduce the likelihood as much as possible.
- The provider had fully investigated the incident and ensured any learning was clearly shared with staff.

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of abuse. Staff understood how to report concerns telling us, "I would protect the wellbeing of the person. If in immediate danger I would need medical help. I would have to inform the manager. I can report it to their line manager, I can report to the CQC."
- Records showed that any safeguarding concerns had been reported in a timely manner and that the provider liaised with the local authority to support any investigations.

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 MCA 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 Mental Capacity Act (MCA). In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS)

- We found the service was working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty. Any conditions related to DoLS authorisations were being met.
- Staff understood the importance of asking people for consent. They told us, "The MCA, if someone is deemed not to have capacity, to take their liberty from them should be in their best interests. DoLS ensures we do not act outside of their best interest, or do things without their consent."

Staffing and recruitment

- Staff were safely recruited prior to commencing their employment. This included appropriate references, history of employment and a Disclosure and Barring Service (DBS) check. DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.
- Staffing levels were safe to ensure that they were able to meet people's needs.

Using medicines safely

- Medicines were securely stored and administered to people in line with prescribing GP guidance.
- We reviewed recent medicines administration records and found there were no gaps or omissions. Where people were prescribed PRN 'as needed' medicines, suitable protocols were in place to determine their usage.

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.

Where visitors attended the service their COVID-19 status was suitably screened with temperature checks and a lateral flow test. Steps were taken to reduce the likelihood of COVID-19 affecting the premises as much as possible.

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 we rated this key question good. The rating for this key question has remained 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

- People and relatives felt management were transparent and ran the home well. They told us, "[Management] does everything right, keeps me updated on how [person] is and everything."
- Staff were positive about the management support they received. Comments included, "[Registered manager] is quick to deal with things, everything is available to us. [Registered manager] doesn't hide anything."
- The home focused on providing respite care, whilst empowering people to be as independent as they could be in their day to day living.

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

- The provider understood their responsibility under the duty of candour, and would apologise if things went wrong.
- Statutory notifications were submitted to the Care Quality Commission in a timely manner. This ensured we were informed about important events and the action the provider had taken in response to them.
- Quality assurance checks were effective in reviewing systems across the service, identifying areas for improvement and taking action to ensure the service met people's needs.

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

- People, relatives and staff feedback was regularly sought. This was through regular surveys. Where necessary people were supported through an advocacy group or their relatives. We reviewed the most recent results and feedback was positive.
- Pictorial surveys were in place to support people to understand what they were being asked and allow them to respond in ways that were suitable to them.

Continuous learning and improving care; Working in partnership with others

- The provider worked alongside other healthcare professionals to ensure people's care needs were met. Records showed that liaison occurred with the appropriate placing authority so that the provider could be clear they could meet people's care needs.

- Staff were supported with continuous learning through training updates. Learning and updates were shared through regular handover communications and staff meetings.