

CareTech Community Services Limited
CareTech Community
Services Limited - 15
Brooklyn Road

Inspection report

15 Brooklyn Road
Cheltenham
Gloucestershire
GL51 8DT

Tel: 01242581112

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23 September 2020

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03 November 2020

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

15 Brooklyn Road is a residential care home providing accommodation and personal care to up to six people with learning disabilities and autism. At the time of the inspection four people were living in the home.

The service has been developed and designed in line with the principles and values that underpin Registering the Right Support and other best practice guidance. This ensures that people who use the service can live as full a life as possible and achieve the best possible outcomes.

The principles reflect the need for people with learning disabilities and/or autism to live meaningful lives that include control, choice, and independence. People using the service receive planned and co-ordinated person-centred support that is appropriate and inclusive for them.

There were deliberately no identifying signs, intercom, cameras, industrial bins or anything else outside to indicate it was a care home. Staff were also discouraged from wearing anything that suggested they were care staff when coming and going with people.

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

Improvements had been made to the provider's quality assurance systems to effectively identify and respond to shortfalls. There were a variety of audits completed to ensure the quality of the service was maintained and improved.

We were assured the service were following safe infection prevention and control procedures to keep people safe. People lived in a clean and pleasant environment, maintenance work was either underway or planned.

There was an open and transparent person-centred culture within the service. Staff were clear about their responsibilities told us they felt well supported, appreciated and valued.

Staff closely monitored people's risks and action was taken when people's needs changed to continue to keep them safe. When safety incidents occurred, these were reviewed and action taken to keep people safe.

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

Rating at last inspection and update:

The last rating for this service was Requires Improvement (report published 17 October 2019) and we identified one breach of regulation 17 Good Governance. The provider completed an action plan after the last inspection to show what they would do and by when to improve.

At this inspection we found improvements had been made in this area inspected and the provider was no

longer in breach of regulations.

The service's overall rating has improved to Good.

Why we inspected

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

This report only covers our findings in relation to the Key Questions Safe and Well-led which contain those requirements.

We reviewed the information we held about the service. No areas of concern were identified in the other key questions. We therefore did not inspect them. Ratings from previous comprehensive inspections for those key questions were used in calculating the overall rating at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for CareTech Community Services Limited – 15 Brooklyn Road on our website at www.cqc.org.uk.

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.

Is the service well-led?

Good ●

The service was well-led.

CareTech Community Services Limited - 15 Brooklyn 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 Care Act 2014.

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

The inspection was carried out by one inspector.

Service and service type

CareTech Community Services Limited – 15 Brooklyn Road 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, 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 announced. Due to pressures from COVID-19 we gave the service some notice of our

visit.

Inspection activity started on 23 September 2020 with a visit to the care home and continued with desk top activity which ended on 30 September 2020.

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 requested documents related to infection control and management of the service from the provider. We took this into account when we inspected the service and made the judgements in this report.

During the inspection

We toured the building and grounds. We spoke with one person who used the service about their experience of the care provided. We observed four staff members while they were supporting people at the service. We observed one staff member giving a person their medicines. We spoke with five members of staff including the registered manager, locality manager, head of maintenance, a team leader and a support worker. We reviewed a range of records. This included two people's care records and three people's medication records. We looked at three staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including rotas and incident records were reviewed.

After our site visit

We continued to seek clarification from the registered manager to validate evidence found. We requested, received and reviewed additional information related to one person's health needs, staff training records, action plans and audits and policies. We received feedback from one of the three healthcare professionals we contacted. We spoke with three people's relatives and a further three support workers.

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. At this inspection this key question has improved to Good. This meant people were safe and protected from avoidable harm.

Preventing and controlling infection

- Cleaning schedules were now in place and cleanliness in the home had improved. One staff member told us, "We all know that cleaning needs to happen, so we are aware, we all communicate with each other and agree tasks."
- A programme of refurbishment was ongoing. Where areas had deteriorated, such as the bathrooms, making it harder to keep clean, work had been completed to address this.
- The registered manager and staff team had implemented government guidance in relation to COVID-19. Staff were observed following this throughout the inspection site visit.

Using medicines safely

- People received their medicines as prescribed. Medicines were stored, recorded and administered appropriately. Medicines which required extra security were stored safely and administered correctly.
- People's medicines records included body charts to ensure prescribed creams were applied to the correct part of the body. Where emollient creams were prescribed, good practice guidance from the Medicines and Healthcare Products Regulatory Agency was followed.
- There were protocols in place for 'as required' medicines.
- Staff had received medicines training and their competencies were assessed.

Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe, were happy living here and happy with the support they received from staff.
- People were kept safe by staff who had been trained to identify and respond to any safeguarding concerns. Staff had also received training in safe behaviour support to ensure people would be supported in the least restrictive manner.
- Systems and processes ensured any safeguarding concerns were appropriately responded to, to ensure people remained safe. This included reviewing suitability of the placement when people's needs changed.

Assessing risk, safety monitoring and management

- Systems were in place to identify and reduce risks to people. Support plans included risk assessments that had been regularly reviewed to ensure they remained relevant. Support plans provided detailed guidance for staff around managing people's anxiety related behaviours and health related needs.
- Regular environmental checks had been completed to ensure the home environment was safe and appropriately serviced.
- Accidents and incidents had been recorded. A system was in place to monitor accidents and incidents and reduce risks where possible. Any lessons learnt were shared with staff.

Staffing and recruitment

- One new staff member had been recruited following our previous inspection and the service was fully staffed. The new staff member was happy with the induction they had received. They told us: "There is always someone to help me, especially on how to communicate and to give people options."
- Safe recruitment processes were followed. This ensured suitable staff were employed.
- A safe number of staff were on duty. Staff were visible when in the service and responded to people's needs in a timely manner. One staff member said there were enough staff to enable them to take people out in the community regularly. We observed this during the inspection as people were out on activities both morning and afternoon.
- To improve the retention of staff, the provider had introduced a financial incentive scheme for employees who had a high attendance and length of service record. Some staff at Brooklyn Road had been longstanding which meant people received care from staff that knew them well. We saw people interacting with staff in a comfortable, familiar and easy fashion.

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 Requires Improvement. At this inspection this key question has now improved to Good. This meant the service was consistently managed and well-led.

At our last inspection we found the provider's quality assurance systems had not effectively identified and addressed shortfalls in the service. This was a breach of Regulation 17 of the Health and social care Act 2008 (Regulated Activity) Regulations 2014.

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

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

- The registered manager had been registered with CQC since June 2020. We saw they were comfortable interacting with people and seemed to know them well. One relative said they had seen noticeable changes since the registered manager came into post, such as day trips out to the seaside for a walk on the beach.
- There were strong visible, leadership and management role models who provided consistent, supportive guidance for staff. One staff member told us the registered manager was, "Firm but fair, very clear in saying these are the expectations, she is taking the improvement of the service very seriously."
- The registered manager and provider completed regular audits and checks of the service. These included a regular infection control audit, health and safety checks, medicines audits and support plan audits. Where actions for improvement had been identified, these were completed as soon as possible. Accident and incident records were reviewed in a timely manner and support plans had been updated to include any changes needed.

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

- The registered manager and management team worked in an open and transparent way when incidents occurred at the service, in line with their responsibilities under the duty of candour.
- The registered manager understood the need to notify CQC about important events that had occurred and had met their regulatory requirements.

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

- The management team regularly sought the views of people.
- People and staff were empowered to voice their opinions through informal chats and meetings.
- The management team always responded to comments put forward. This included adapting menus and planning events.

Working in partnership with others

- The provider was transparent, open and collaborative with external agencies.
- The service was actively working in partnership with people, staff and visitors to reduce risks associated with the catching and/or transmission of Covid-19.
- The management team regularly communicated with external professionals with regards to people using the service.