

# Ayai Care Limited

# Bloom House

## Inspection report

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## Ratings

Overall rating for this service

Outstanding 

Is the service safe?

Good 

Is the service effective?

Good 

Is the service caring?

Good 

Is the service responsive?

Outstanding 

Is the service well-led?

Outstanding 

# Summary of findings

## Overall summary

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.

### About the service

Bloom House is a supported living location providing personal care to 2 people at the time of the inspection. The service can support up to 3 people.

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

**Right Support:** People had complete control of their care and how they wanted to be supported. Staff were aware of their responsibilities and ensured people were empowered to make decisions for themselves. We saw many examples of staff promoting people's independence.

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.

**Right Care:** People received person-centred care of a high standard. Staff respected people's privacy and promoted dignity. Staff had a thorough understanding of what support, needs and preferences each person had on an individual basis. People were supported by kind and caring staff.

**Right Culture:** The management team and staffing team all knew and valued the inclusive culture of the service. People had experienced positive, life altering results after receiving care and support from the service and staff. This had empowered their lives and led them to achieve goals they previously had not realised they were able to.

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

This service was registered with us on 11 February 2022 and this is the first inspection.

### Why we inspected

We inspected to ensure the service experienced a first inspection and an official rating.

### 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 effective?

Good ●

The service was effective.

Details are in our effective findings below.

### Is the service caring?

Good ●

The service was caring.

Details are in our caring findings below.

### Is the service responsive?

Outstanding ☆

The service was exceptionally responsive.

Details are in our responsive findings below.

### Is the service well-led?

Outstanding ☆

The service was exceptionally well-led.

Details are in our well-led findings below.

# Bloom House

## 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.

#### Inspection team

This inspection was carried out by one inspector.

#### Service and service type

This service provides care and support to people living in a 'supported living' setting, so that they can live as independently as possible. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for supported living; this inspection looked at people's personal care and support.

#### Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

#### Notice of inspection

We gave the service 48 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.

Inspection activity started on 30 May 2023 and ended on 13 June 2023. We visited the location's service on 30 May 2023.

### 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. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

### During the inspection

We spoke with 2 people who used the service and 2 relatives about their experience of the care provided. We also observed interactions between staff and 2 people who used the service. We spoke with 5 members of staff including the registered manager, location manager and care workers. We also spoke with one social care professional that works with the home.

We reviewed a range of records. This included 2 people's care records and medication records. We looked at 3 staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

# Is the service safe?

## Our findings

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

This is the first inspection of this newly registered service. This key question has been rated good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People and relatives felt safe at the property. A relative said, "Always (kept safe), without fail, it's not easy handing that responsibility over to someone with your child, but they made it so easy for me to relax." Another relative said, "I have never had concerns. They keep [person] so safe, safer than I could keep him. It makes me so relieved we found this home."
- Staff knew how to identify and report any safeguarding concerns. A member of staff told us, "We know the people well and always document if there is any change that could be unsafe." Another member of staff said, "We have had training and we would report it to the manager straight away."
- Staff received regular safeguarding training and there was a policy in place. We saw how the registered manager had worked with social care professionals when a safeguarding concerns had been raised.

Assessing risk, safety monitoring and management

- People were kept safe from the risk of harm. People had individual risk assessments in place which offered advice and guidance for staff. For example if people were at risk of heightened anxiety or behaviours there was a detailed positive behaviour plan in place.
- Relatives told us how staff managed people's risks well. A relative told us, "They know all of the risks and they manage them very well."
- We saw care plans detailed risks in detail and we saw evidence that these were regularly reviewed and updated as and when this was needed.

Staffing and recruitment

- There were enough staff to meet the needs of the people living at the property. A relative said, "There are always lots of staff around, there is always someone with [person] whenever they need help."
- Staff told us there was always enough staff on duty to meet all of the needs of the people they supported. A member of staff told us, "That's what I love about working here. There is no pressure we can just take our time and chat (to people)."
- We observed there were lots of staff on duty to support people whenever they needed assistance. We reviewed rotas and saw this was the usual amount of staff on duty to ensure the same level of care was provided on other days.
- The registered manager ensured they followed safe recruitment processes. This included full reference checks, interviews and checks with the Disclosure and Barring Service (DBS). These checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

### Using medicines safely

- People were supported with their medicine when they needed them. We observed safe practise with the storage of medicine and the recording of when this was taken. We also saw the registered manager and staff continued to monitor prescriptions to ensure people continued to receive their prescribed dose.
- Staff were subject to medicine competency checks. This ensured people were being supported by competent staff to avoid medicine errors.
- The registered manager and staff ensured people were not on unnecessary medicine. We saw an example where a person had been overprescribed medicine to manage behaviours and change of moods. The staff had worked with the person to 'self-regulate' and as a result had reduced the amount of prescribed medicine they had to take.

### Preventing and controlling infection

- The property was clean and free of infection. We observed staff regularly wiping surfaces that had been used and complete general cleaning of the property during the inspection.
- Staff had good knowledge of how to prevent and control infection. A member of staff said, "I always wear my PPE (personal protective equipment) when needed and we are always cleaning."
- There was an infection control audit and policy in place to ensure the home was as well protected as possible against infection.

### Learning lessons when things go wrong

- The registered manager was open and honest when talking about learning lessons. They said, "We know we take positive risks here to ensure independence. We sometimes learn from this risk taking and adapt so we can still keep that independence."
- There was an accident and incident process in place which showed successful monitoring by the registered manager. We saw how themes and patterns were identified to reduce the risk of a reoccurrence going forward.



# Is the service effective?

## Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- There was a clear assessment completed before anyone moved into the property. This was completed thoughtfully to ensure the service could meet the needs of the person. Relatives told us how the registered manager and location manager visited her and spoke to her about what the person's needs were and what the perfect living situation would be. As a result the person's behaviour had decreased dramatically. The relative told us, "Since [person] came here surprisingly, I was really nervous and apprehensive. [Person] settled in so seamlessly. The carers are, and continue to be really attentive."
- Care plans were reviewed regularly and amended to ensure all details were captured of any changes to care needs. This was in line with guidance to ensure people received up to date care to meet their needs and choices.
- Staff were supported with the amount of detail in assessments and care plans to ensure they could support people effectively. A member of staff said, "We have all got to know the people living here so well. We talk to them, ask them questions, ask their families. We can then add this to care plans and all staff can refer to the care plans to make sure they are meeting people's preferences."

Staff support: induction, training, skills and experience

- Staff were supported in their role with the training they undertook. We saw a training matrix which ensured the registered manager had oversight of all training, upcoming training and refresher training for each member of staff. This ensured staff remained fully trained to complete their role.
- When new members of staff started at the home they were supported through an induction process. A staff member said, "Ever since my induction the training has been brilliant. When I first started I went through a period of shadowing an experienced member of staff, this was really helpful for me to learn people's needs and people to be comfortable with me as well."
- We saw evidence of thorough induction processes. The registered manager said, "It is important we make sure we recruit the right staff and this is often seen during the induction process. We need to make sure the people here are happy with them as well."

Supporting people to eat and drink enough to maintain a balanced diet

- People were supported to maintain a balanced diet. Care plans detailed people's choices and favourite foods. We observed staff supporting people with snacks, drinks and meals to meet their preferences.
- Relatives told us people received food they enjoyed. A relative said, "The food is very good and [person] seems to enjoy it very much."
- We observed a BBQ at the property during the inspection. This was enjoyed by people and staff alike. There was music playing and people were dancing and enjoying the mealtime experience.

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- Staff were working well with health and social care professionals. A social care professional told us, "Bloom House ensures that they provide me with updates when needed and send reports. I have never struggled with communication regarding them."
- We saw evidence in care plans of health referrals being made and followed up to support people with appointments. This was then embedded into the guidance and advice for staff in the care plans.
- Relatives told us staff worked well with people's social workers. A relative said, "They (staff) work well with [person's] social worker. Everything seems to be shared appropriately to keep everyone in the loop."

Ensuring consent to care and treatment in line with law and guidance

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 MCA. When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty.

We checked whether the service was working within the principles of the MCA, whether appropriate legal authorisations were in place when needed to deprive a person of their liberty, and whether any conditions relating to those authorisations were being met.

- People were supported in the least restrictive way and where restrictions were required, they had been applied for appropriately.
- We saw examples of capacity assessments, best interest decision meetings including professionals and family members and applications being made to the court of protection.

# 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.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; respecting equality and diversity

- People were supported by kind and caring staff. A relative said, "They (staff) are just so kind and beautiful souls. They are calm, collected and very professional and good at what they do." Another relative said, "They are wonderful. They are brilliant in every way in every area, I can't fault them in anything."
- People's diverse needs were met through staff arranging individual support for them. For example, one of the care staff ensured a person's hair was braided and styled in line with her preference and culture.
- People were treated as equals in the home. A staff member told us, "This is their home. They chose what we do to support them."

Supporting people to express their views and be involved in making decisions about their care

- People were encouraged to make decisions about their care. A relative said, "They are always asking if [person] is happy with what they are doing, or if they want them to do something different."
- We observed staff treat people with kindness and offer them different choices so people could make decisions for themselves.
- Staff told us how they encouraged people to make their own choices. A staff member said, "We (staff) always offer them different options so they actually have to make a decision so we know how to support them."

Respecting and promoting people's privacy, dignity and independence

- People were treated with respect and supported to be independent. A relative told us, "Staff respect [person's] space, they respect when [person] may want quiet time."
- We observed staff respecting a person when they wanted to be on their own. The person changed their mind quickly and staff were beside them as soon as they needed support.
- Staff told us how they respect people's privacy. A staff member said, "I always respect this is their home, we are in their home and if they don't like something we change it, we knock on their bedroom doors, we make sure they are happy."

# Is the service responsive?

## Our findings

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

This is the first inspection for this newly registered service. This key question has been rated outstanding. This meant services were tailored to meet the needs of individuals and delivered to ensure flexibility, choice and continuity of care.

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

- People received personalised care of a high level. The registered manager and staff were always striving to ensure people received outstanding care. We saw examples of 'progress reports' that were completed monthly, or more frequently if needed. For example, when one person first moved to the home they were completed on a weekly basis. This included information on what the person had enjoyed, what had a positive result in regards to behaviours amongst many other factors. From reviewing these reports we could see how closely staff had worked with people to meet their individual needs and preferences. And as a result of people having this choice and control behaviours had improved.
- Where positive behaviour plans detailed people's needs, this had been incorporated thoughtfully in to care plans in complex detail. For example, a person had wanted to learn new techniques on how to manage their behaviours. This had led to staff educating and supporting the person in 'self-regulating'. As a result, there had been a substantial decrease in heightened behaviour incidents.
- Relatives told us how staff were in tune to people's needs. A relative said, "They (staff) always make sure [person] gets to do everything they want and encourage them to have new experiences that enrich their life."
- Relatives also told us of how positive a response their loved ones had from the support they were provided. A relative said, "It makes me emotional, because I truly think [person] is so happy here, and that is such a relief for us as a family."
- We saw in care plans how people had wanted to go to events and trips but had not been able to before in their lives due to the lack of the same level of support they were now receiving at Bloom House. We received feedback from professionals informing us how staff had made sure people still had a wide range of experiences whilst the risks were managed. A relative said, "When I saw a picture of [person] on top of a city bus in the middle of London, it brought tears to my eyes that she has been able to achieve so much."

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

- People's relatives were made to feel at home at Bloom House. We observed two relatives arrive during the inspection and join in with a BBQ with music and dancing. When they were asked if this was a regular occurrence they said, "Oh yes, we are welcomed always, I think the staff genuinely care we get to see [person] as much as possible."
- Staff supported people and their families to ensure people attended important cultural events. A relative told us how their was a religious event that they wanted their family member at. They said, "It just wasn't a problem for the staff, without hesitation they ensured a staff member accompanied [person] for the whole time to support us as well as a family. We wouldn't have been able to support him at such a big event

without the support of [staff member]. [Person] loved it so much, they were up dancing and didn't stop smiling. That would not have been possible without the staff at Bloom House."

- Care plans detailed what people enjoyed doing. We saw staff support people with these same activities and talk to us about these as interests of people.

#### Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- Where people could not speak verbally there was a range of choice or various aids to ensure staff could understand people and people could understand staff. This included pictorial aids as well as sensory and signs. We observed staff successfully communicate with a person throughout the inspection who could not always verbally communicate.
- Care plans were detailed for staff to have advice and guidance if they needed this. A staff member said, "I always make sure people have understood and they either nod or give a thumbs up. If I can't understand something they are trying to communicate to me, I sit beside them and calmly talk it through until I understand, I can also use the pictures and the other signs we use, I have never found communication an issue."
- Relatives told us how staff communicated with their loved ones well. A relative said, "They always make sure they have understood him. I can't believe how well they know exactly what he is trying to say to them, they are very in tune to him and his needs."

#### Improving care quality in response to complaints or concerns

- People and relatives were supported to raise any concerns or complaints whenever they wanted to. A relative said, "Yes, I am always asking questions and she is always confirming what is happening and putting my mind at rest."
- There was a complaints process in place. We saw how the registered manager had responded to any concerns in a timely way and evidence of assurances provided to the person raising the concern.

#### End of life care and support

- There was nobody receiving end of life care as this was a service supporting young people. However, we were assured that the registered manager had the skills and knowledge to involve all relevant health professionals and relatives if any person entered this stage of their lives.

# 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.

This is the first inspection for this newly registered service. This key question has been rated outstanding. This meant service leadership was exceptional and distinctive. Leaders and the service culture they created drove and improved high-quality, person-centred care.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- Bloom House not only was a supported living property, it had the appearance and atmosphere of 'a home'. The décor and atmosphere within Bloom House was that of a calm and loving atmosphere. Staff wanted to really deliver person-centred care. A staff member said, "It's care that is only appropriate for that person in particular, in line with what they want and their needs. We do everything in our power to cater to every single one of their needs."
- The registered manager and staff included people in the home. The registered manager said, "This is their home, they tell us how they want their care, what they want in the home, how they want it decorated and we support them to make sure they are as comfortable as possible, and they really see it as their home."
- People were empowered to make decisions about their care and the running of Bloom House. We saw evidence of menu design to match people's preferred foods, we heard music playing that was detailed in care plans as specific music people enjoyed. We saw 2 people dancing and enjoying the music and atmosphere in the home. We observed people smiling throughout our inspection and nodding to show they were happy with the care they were receiving.
- Staff also supported people to achieve goals that historically had been branded 'unachievable' for them in previous placements. We found future goals had been detailed in care plans that were going to be challenging, however, it was described how these were achievable for people.
- We saw evidence of people's behaviours changing in a positive way. This appeared to be a direct result of the care and support they were receiving at Bloom House. A relative said, "It's changed [person's] life, they can do so much more now. What [person] has achieved in a year is mad compared to their previous placement. I just can't imagine what's next for [person] the sky is the limit."
- Health and social care professionals also told us how the outstanding level of person-centred care had resulted in positive results for the people they worked with. A professional said, "I have no doubt that the good outcomes achieved are largely due to the exceptional care received at Bloom House. Staff have worked hard to build safe, containing relationships with the young person, understanding that positive and affirming relationships are needed alongside clear boundaries. They have approached the young person's care with skill, competence and positivity, ensuring that community activities and days out could be accessed from the start and communicating confidence that any challenges could be managed."
- People and relatives were involved with the running of the service and this was shown through meeting minutes and action taken as a result. This promoted a positive, inclusive culture in the home. Relatives were welcomed into Bloom House whenever they wanted to and staff put extra effort in to arranging transport

and staff support for family events, trips and visits to the family home to ensure relatives remained a part of their lives.

- Staff felt involved in the staffing team. A staff member said, "We are all one team, we are all one big family, including the people living here. We all genuinely have such a good time here, it doesn't feel like work."

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

- The registered manager was also responsible for other sites. We discussed the future of the other supported living locations and they confirmed there was a clear management structure at each site to ensure the best level of care is maintained. We were told the sites were small to ensure staff were able to get to know each person on an individual basis and thoughtful, obtainable goals set for each person to achieve. Once each goal was achieved there would be regular discussions with people and their relatives of what new goals can be set to keep striving for new experiences and a variety of life.

- The registered manager, site manager and care staff were all clear about their roles. The registered manager had full oversight of the service and the quality of support and care being provided. This was through audits as well as staff meetings and supervisions. We saw evidence of staff making suggestions and the registered manager taking action in a timely way. For example, for home improvements to the service or a change of activity for a person.

- The registered manager and management team supported staff well. A staff member said, "I feel so supported, if I need anything they (management team) are there. The door is always open and they really listen. They are so passionate they make us all just as passionate to do our job properly."

- The registered manager and the provider were knowledgeable about regulatory requirements. This was shown through various audits to not only ensure they were in line with regulations, in addition they were trying their hardest to exceed expectations and provide people with the best service possible.

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 registered manager and the management team understood there was always areas of learning. The registered manager said, "I'm keen to keep improving everything about the service. I believe we are doing the best we can do, however, there are always new, innovative ways to deliver outstanding care."

- There was a duty of candour policy in place. We saw evidence of this being followed after incidents at the home. This ensured that all relevant professionals were aware and relatives were included in the learning. We saw input from family members about what could have been a trigger and analysis completed by staff.

- There were reflective forms following incidents to ensure all possible learning was captured. This was another innovative way the provider had thought of to ensure as much information was captured to learn to prevent future incidents. This also gave the staff members directly involved the opportunity to give first hand information to increase and share knowledge.

Working in partnership with others

- Social care and health professionals provided positive feedback. A health professional had feedback, "Ayai Care are doing an amazing job." Another health professional told us, "Bloom House regarding the young people that I work with has been positive as there have been significant changes regarding the young people. One of them has been presenting with challenging behaviour which resulted in their previous placement breaking down - they have been settled at Bloom House. The second young person visits their family for 2 nights every week - parents have reported that they are settled during the home visits. This is a reflection that Bloom House is doing an amazing job with the young people."

- We saw detailed entries in care plans involving advice and guidance from various health and social care professionals. This ensured people were receiving the best level of care as all people involved were updating

each other with clear communication and working in a cohesive way.