

Living Ambitions Limited

The Bungalow

Inspection report

Beech Lane
Normandy
Surrey
GU3 2JH

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21 January 2020

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09 March 2020

Ratings

Overall rating for this service	Good ●
Is the service safe?	Good ●
Is the service effective?	Good ●
Is the service caring?	Good ●
Is the service responsive?	Good ●
Is the service well-led?	Good ●

Summary of findings

Overall summary

About the service

The Bungalow is a residential care home providing personal care to 4four people with learning and physical disabilities at the time of the inspection. The service can support up to five people.

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.

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.

There were systems in place to safeguard people from the risk of abuse and staff understood their role in protecting people from harm. There was some concern that minimum staffing levels had not always been maintained over few weeks prior to the inspection, however there was evidence of ongoing recruitment at the service and the provider was taking appropriate action to manage the situation. Managers and staff demonstrated reflective practice in order to improve care.

People's needs were appropriately assessed in order to develop an effective plan of care.

Staff received ongoing training and support to ensure they had the skills to meet people's specialist needs. Staff worked effectively together as a team and with other professionals. Communication was good across the service.

There was meaningful engagement between staff and people. People enjoyed positive relationships with the staff that supported them and were actively included in all aspects of their care. Where able, people made their own decisions about their daily routines. Staff consistently promoted privacy and ensured their dignity was upheld.

People received a personalised approach to care. Support was responsive to individual needs and people had opportunities to spend their time doing things they enjoyed including regular access to their local community and other places of interest. People were encouraged and supported to share their views about the service and concerns were listened to and acted upon.

People spoke positively about the registered manager and had confidence in how the service was being run. There were effective systems in place to continually monitor and drive improvements. Action was taken to

effectively engage with a range of stakeholders and ensure their views were included in the ongoing development of 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 (and update)

The last rating for this service was Good (published 5 October 2017).

Why we inspected

This was a planned inspection based on the previous rating.

Follow up

We will continue to monitor information we receive about the service until we 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?

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?

Good ●

The service was responsive.

Details are in our responsive findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

The Bungalow

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.

Inspection team

The inspection was carried out by two inspectors.

Service and service type

The Bungalow 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

The Inspection was unannounced.

What we did before the inspection

We reviewed the information we held about the service. This included the statutory notifications that had been submitted since the last inspection. Notifications are changes, events and incidents that the service must inform us about.

We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections.

We used all this information to plan our inspection.

During the inspection

We met with the four people who lived at the service and spoke with four staff, including the registered manager and three care staff.

We reviewed a range of records. This included two people's care records and multiple medication records. We looked at two 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.

After the inspection

We telephoned three representatives of people to gain an understanding of their views about people's lives at The Bungalow. We also received feedback from staff at Surrey County Council who had experience of working with the service.

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 Good. At this inspection this key question has remained the same and is still rated as Good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe with staff who supported them. One relative told us, "He has been there a long time. I know that he is in safe hands".
- Staff had a good understanding of their roles and responsibilities in relation to safeguarding. One member of staff told us "Safeguarding is the most important thing as people are vulnerable and we must protect them."
- The registered manager continued to ensure any safeguarding matters were appropriately reported to all relevant agencies without delay.
- There were systems in place to ensure people were safely supported to manage their financial affairs.

Assessing risk, safety monitoring and management

- People were supported safely. This was confirmed by one person who told us that they felt safe living there.
- Each person's care plan and goals were linked to risk assessments that outlined the action needed by staff to keep people safe. It was clear that these were kept under ongoing review and that staff were kept up to date of any changes.
- Behaviour support plans were available for staff to refer to in order to support people safely and manage risks associated with behaviour that could challenge or place people at risk.
- There were contingency plans in place to ensure people's care would continue in the event of an emergency which meant people had to leave the service.
- Staff undertook routine checks of safety throughout the environment.

Staffing and recruitment

- The registered manager deployed suitable numbers of trained and competent staff.
- Staffing levels were organised flexibly around people's needs and to enable people to undertake their preferred activities.
- There were a number of staff vacancies which had meant that appropriate staffing levels had occasionally not been maintained. The registered manager was open and transparent about this issue and shared a plan they had implemented to ensure appropriate levels were in place going forward. Some agency staff were being used to ensure safe staffing levels.
- The provider continued to use appropriate recruitment checks to help ensure staff were safe to work with people who used care and support services.
- People living at the service were involved in the selection of new staff by asking candidates questions to see if they would be well suited to supporting them.

Using medicines safely

- Systems and processes for the management of people's medicines were robust. Staff supported people to take their medicines in a person-centred way and medicines were stored at the service securely.
- Staff completed Medication Administration Records (MAR charts) following the administration of medication. MAR charts were regularly audited to ensure any discrepancies could be identified and rectified quickly.
- Staff received relevant training before they were able to give people medicines and the registered manager checked their competency in relation to the administration of people's medicines.

Preventing and controlling infection

- The environment was visibly clean and there were appropriate systems in place to manage infection control. There was some damage to the kitchen floor which the registered manager assured us was due to be repaired shortly.
- Staff had access to appropriate personal protective equipment which allowed them to maintain adequate standards of hygiene.

Learning lessons when things go wrong

- The management team had created a culture of reflective practice. Incidents and accidents were routinely reviewed and areas for learning discussed with the whole staff team.
- Care plans showed that if there was an incident or accident then relevant reviews took place. For instance, following one incident, one person's care plan had been improved to help staff to have a better understanding of how to support them safely during the night.

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.

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same and is still rated as 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

- Assessment information had been used to formulate personalised plans of care which outlined people's needs and choices.
- People's needs had continued to be appropriately assessed and reviewed.

Staff support: induction, training, skills and experience

- People were supported by competent staff. One relative told us "We are very happy with the care, it is very good and she is well looked after".
- New staff completed an induction which included the Care Certificate. This is a nationally recognised set of standards which health and social care workers are expected to demonstrate in their daily working lives.
- Staff told us that they received good ongoing training which helped them to provide people with high quality support. In addition to mandatory courses staff were given training in areas such as epilepsy and positive behaviour management which were specific to the needs of the people using the service.
- Agency staff had completed an induction at the service and the registered manager had taken other steps to ensure that people received good continuity of care.

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

- People were supported to eat a balanced and varied diet. One person told us that staff give them choice at mealtimes.
- People were supported to be able to eat and drink as independently as possible. Equipment was in place to help people to be able to do this.
- Staff had a good knowledge of people's dietary preferences, for instance a staff member told us that one person preferred to eat cereal for breakfast as they liked crunchy food.
- Staff completed training about the risks of choking so they were able to safely support people with eating and drinking.

Staff working with other agencies to provide consistent, effective, timely care

- People had individual guidelines from a Speech and Language Therapist (SALT) about which foods it was safe to them to eat. Staff were aware of these guidelines and had worked in conjunction with SALTs to ensure these guidelines reflected people's dietary preferences.
- Positive feedback was received from a professional who had worked with the service. They told us: "The home appeared to be well kept and documents requested well organised and up to date. Service users'

families have always given strong positive feedback about the home and the staff supporting their family."

Adapting service, design, decoration to meet people's needs

- The service had level access throughout and had been designed and adapted to meet people's needs. Corridors were wide enough for easy wheelchair access.
- Moving and handling equipment was in place for people including hoists, profiling beds and an adapted bathroom.
- People's bedrooms were personalised and reflected people's hobbies and interests. This included the use of people's favourite colours, their own artwork framed on the walls and photos of friends and families.

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 Act 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. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS). We checked whether the service was working within the principles of the MCA, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- Staff obtained consent for people's care and support. Staff had a good understanding of the principles of the MCA and always offered choices. People were supported wherever possible to make their own decisions.
- When people could not make their own decision, staff completed a mental capacity assessment and the best interest decision making process was followed.
- DoLS applications had been made when required. Where people had a DoLS in place these were being followed appropriately.

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 Good. At this inspection this key question has remained the same.

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

- Staff treated people with respect. One person told us staff were kind and respected their choices. This approach helped to enable people to be in control of their own lives and routines.
- People were supported to attend church. This enabled them to follow their chosen religion and to be part of the wider community.
- Staff knew people at the service well. One member of staff described to us the routine they followed when supporting a person who enjoys travelling in a car. This routine had been developed with the person to help to avoid anxiety.
- Staff engaged with people in their preferred communication style, for example through singing and clapping. This was clearly appreciated by people and they responded positively.

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

- People were involved in all decision making about their care and support. The registered manager told us one person wanted a friend to be able to support them to eat when out in the community. The registered manager involved the local SALT team to enable this to be accomplished safely.
- There were regular resident's meetings and people's views were actively sought regarding any changes that were taking place.
- Staff told us that they are careful to listen to the people and not to talk over them. One staff member said: "They are like my family, they are like us, so we treat them equally."

Respecting and promoting people's privacy, dignity and independence

- People's independence was promoted at the service. The registered manager had arranged for one person to have specialist equipment installed at the service which enabled them to eat without assistance.
- Staff considered how to treat people with dignity and respect. For instance, staff told us that when supporting people with personal care they were always considerate of people's privacy. This approach was clearly reflected in people's care plans and the support we observed.

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 Good. At this inspection this key question has remained the same.

This meant people's needs were met through good organisation and delivery.

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

- Staff had a good knowledge about people. For instance, a staff member told us that one person enjoyed listening to loud music however another person preferred to avoid loud noises completely. Staff were mindful of people's individual likes and dislikes when supporting them.
- People's care plans contained detailed information about their needs, goals and preferences and were clearly written to help facilitate person centred support.
- People had keyworkers and they met them regularly to look at goals and aims for the coming months and how these could be achieved. We saw examples of these including planning birthday parties and upcoming trips out. A keyworker is a member of staff with delegated specific responsibilities for an individual.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- People were supported by staff who knew them well and had a good knowledge of how they preferred to communicate including the use of pictures and objects of reference.
- Communication plans were in place for people. Staff explained how they communicated with people who were non-verbal and had a good understanding of how they expressed themselves.
- People had access to aids to help them to communicate with others. For instance, one person was supported to use an alphabet template to enable them to spell out words that they had difficulties verbalising.

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 were supported to engage in their preferred activities both whilst at the service or in the community. This included activities such as hydrotherapy, music, attending church and going to local cafes.
- People were encouraged to follow their interests. One person had written two books and was about to publish a third. Staff had been very supportive of this and were helping to arrange a book launch at a local church.
- People were supported to maintain relationships with friends and family. One representative told us "I am always made very welcome there".

- People were supported to play an active role in the community and participated in a range of activities according to their interests including art classes, gardening and hydrotherapy. On the day that we visited the service staff supported each person to access the community individually.

Improving care quality in response to complaints or concerns

- The registered manager was responsive and listened to concerns.
- The service had a complaints procedure. People told us that they knew who to speak to if they had concerns.

End of life care and support

- Staff worked with other professionals to enable someone who had been receiving end of life care to remain at the service for as long as possible. Advanced care planning took place and the person's wishes about their care and support were respected.
- Staff had received relevant training and understood how to care for people at the end of their life. Staff had discussed end of life care with people where relevant and recorded their wishes.

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 Good. At this inspection this key question has remained the same.

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

- There was a person-centred culture within the service. Staff and people were positive about the registered manager. One member of staff described them as being "very supportive." The registered manager promoted good values amongst the team and led by example.
- Staff attended regular supervision with the registered manager where they had the opportunity to discuss concerns and were given feedback on their performance in carrying out their role.
- There were clear systems in place for monitoring of the quality of care. These included regular observations of staff practice and audits of documents used at the service.

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

- There was an ethos of reflective practice to improve the quality of care. When something had gone wrong with someone's care the registered manager worked with the staff team to ensure that improvements were made for the future.
- People spoke positively about the registered manager and were confident in the way they approached them and expressed their views.

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

- Legal responsibilities had continued to be met and notifications to relevant agencies were submitted in a timely way to ensure effective external oversight and monitoring of the service.
- The registered manager continued to develop her professional practice. This included recently completing a Level seven NVQ Diploma in Strategic Management and Leadership to further increase her knowledge and understanding of managing social care services.
- The registered manager and staff team showed commitment to achieving good outcomes for people and providing a safe, high quality service.
- The management team had good networks to provide support to staff and to share learning with other services.

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

characteristics

- People and their representatives had regular opportunities to both formally and informally share their views with staff and managers in a way that enabled them to influence the running of the service. For example, service users, stakeholders and staff were asked to complete regular satisfaction surveys. Where feedback had been provided, clear action plans were formulated to ensure identified areas for improvement were addressed.
- Daily handovers and monthly staff meetings were used to ensure that staff were kept up to date with changes at the service and delivered care in line with best practice.
- The service had good links with the local community. People were encouraged to be a part of their community and supported to make good use of the local facilities available.

Continuous learning and improving care

- The registered manager told us they kept up to date with current legislation by attending provider meetings and engaging with the local authority to share good practice ideas.
- The provider was committed to supporting staff to develop in their roles, staff were encouraged to access internal training from the provider as well as external training including diplomas in health and social care.
- Regular audits were carried out by the registered manager and the provider.

Working in partnership with others

- Staff worked closely with other health professionals such as SALTs and GPs which helped to enhance people's health and well-being.
- Staff spoke confidently about the engagement with other professionals and the advice provided. Care plans reflected guidelines based on advice from other health professionals, including dieticians and physiotherapists.