

Mr & Mrs J P Rampersad

Brighton Road

Inspection report

477 Brighton Road
Croydon
Surrey
CR2 6EW

Tel: 02086688631

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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

Brighton Road is a care home providing personal care to up to 4 people. The service provides support to people with learning disabilities. At the time of our inspection there was 1 person using the service. Who received personal care. CQC only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do, we also consider any wider social care provided.

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.

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

Right Support: Model of Care and setting that maximises people's choice, control and independence

A person was 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.

All care was carried out by the registered manager, who was also a director, and the other director. Both regularly received training in safeguarding to keep their knowledge of their responsibilities up to date. The registered manager understood their responsibilities to report any allegations of safeguarding to the local authority safeguarding team, although none had been necessary since our last inspection.

Health and safety checks were carried out of the premises to make sure they were safe. The premises were clean, tidy and hygienic and the registered manager and director followed current infection control and hygiene practice to reduce the risk of infections.

Right Care: Care is person-centred and promotes people's dignity, privacy and human rights

A person received the right support in relation to risks, such as those relating to learning disabilities. The registered manager and director together provided enough support to safely care for the person and no other staff were required. No support relating to medicines was provided at the time of our inspection.

Right Culture: The ethos, values, attitudes and behaviours of leaders and care staff ensure people using services lead confident, inclusive and empowered lives.

The service was managed well, and the registered manager was experienced and understood their role, as did the second director. The registered manager oversaw the service with regular checks and reviews to ensure people received good quality care. Communication with the person and their relatives was good. Care was provided in a person-centred way. The provider worked with relevant health and social care services to ensure a person received the care they needed.

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

Rating at last inspection

At the last inspection the service was rated good (report published October 2018).

Why we inspected

This inspection was prompted by a review of the information we held about this service.

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.

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.

Brighton 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

One inspector carried out this inspection.

Service and service type

Brighton 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. Brighton 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 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 who was also a director of the company that owned and operated the service.

Notice of inspection

This inspection was announced because we needed to make sure the registered manager and the person

using the service would be available to speak with us.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We did not use information the provider sent us in the provider information return (PIR) as we did not request this. A PIR 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 the 1 person using the service, the registered manager and the second director. We asked them for their views about the safety and quality of care and support provided at the service. We observed interactions between the person and staff to understand their experiences. We reviewed a range of records. This included care records and other records relating to the management of 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. This meant people were safe and protected from avoidable harm.

Using medicines safely

- No one at the service received medicines so we did not inspect this aspect of the service.

Systems and processes to safeguard people from the risk of abuse

- People were safe at the service. A person told us they felt safe and comfortable with the registered manager and director who provided all their care and also lived onsite.
- The registered manager and director understood their responsibilities in relation to safeguarding and kept their knowledge up to date with frequent training.
- The registered manager understood their responsibility to report all safeguarding allegations to the local authority and to take action to reduce the risk of harm, although no allegations had been necessary since our last inspection.

Assessing risk, safety monitoring and management

- Risks were safely managed. Individual risks to a person, such as those relating to their learning disability and also daily needs, were assessed and managed with clear guidance accessible for the registered manager and director to follow when providing care.
- Health and safety checks of the premises and equipment were carried out and the directors were currently reviewing the fire doors.
- An action plan was in place to deal with emergency situations such as floods, electrical and fire issues and sudden staffing difficulties.

Staffing and recruitment

- There were enough staff to provide care to the person safely. There registered manager and director provided all care to the person and no other staff were necessary.
- No staff had been recruited since our last inspection, so we did not inspect recruitment.

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 supporting people living at the service to minimise the spread of infection.
- 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 responding effectively to risks and signs of infection.
- 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.
- All relevant staff had completed food hygiene training and followed correct procedures for preparing and storing food. We observed hygiene standards in the kitchen were good.

Visiting in care homes

- The provider made sure visiting arrangements at this service were in line with government guidance.

Learning lessons when things go wrong

- The provider had systems to explore any lessons to be learned when things went wrong, although there had been no accidents or incidents, safeguarding's, complaints or concerns since our last inspection.

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. 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, 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.

- The person using the service had full capacity in relation to their care. However, the provider had suitable systems in place to assess people's capacity to make decisions about their care and to make decisions in their best interests necessary.
- The registered manager and second director received training in the MCA and associated codes of practice and understood their responsibilities under this Act.

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

- The registered manager and director provided care in a person-centred way. A person could choose how they spent their day and they were supported to follow their interests. They were provided with food of their choice, including from their cultural and ethnic background when they wanted this.
- The registered manager received training in equality and diversity and ran an open and inclusive service. A person told us they could speak with the registered manager or director at any time and would be listened to and understood.
- The registered manager engaged well with the person using the service, speaking daily and supporting them in daily living tasks such as cleaning, cooking and food shopping. The registered manager frequently spoke with family members to receive their feedback too.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; 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 was experienced with good oversight of the service and understood their role well.
- The registered manager monitored the safety and quality of the service through various checks and took action when needed to address any gaps or shortfalls at the service.
- A person received good quality care. The registered manager and director understood a person's individual needs well and we observed they were unhurried and engaged well with the person. Both received training to understand the needs of adults with learning disabilities.
- The registered manager gave honest information and suitable support and told us they would apply duty of candour where appropriate.
- The registered manager understood their requirement to submitted notifications to CQC of significant incidents as required.
- The provider displayed their rating in the reception area of the home.

Continuous learning and improving care; working in partnership with others

- The provider worked closely with other health and social care professionals to meet a person's needs. These included the GP, dentist and optician and any specialist services as and when required.

