

Livability

Bradbury Court

Inspection report

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Ratings

Overall rating for this service	Good	
Is the service safe?	Good	
Is the service effective?	Good	
Is the service responsive?	Requires improvement	

Overall summary

We carried out an unannounced comprehensive inspection of this service on 6 & 10 March 2015 at which we found one breach of legal requirements. The registered provider did not ensure that people who used the service were provided and offered a range of stimulating activities. We also made two recommendations in regards to checking and labelling slings used for transfers and offering people a choice of hot and cold breakfast.

After the comprehensive inspection, the registered provider sent us an action plan on 7 May 2015 telling us how they would meet legal requirements and recommendations.

We undertook a focused inspection on the 2 July 2015. The purpose of our focused inspection was to check that the registered provider had followed their plan and to confirm that they now met all legal requirements.

This report only covers our findings in relation to this topic. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Bradbury Court on our website at www.cqc.org.uk.

Bradbury Court is a care home providing accommodation and support for 21 adults with physical disabilities. Bradbury Court was purpose built and fully accessible for wheelchair users. Appropriate adaptations such as a

Summary of findings

passenger lift, accessible bathrooms and toilets ensured that people were able to access all areas in the home independently. The home is in a residential area in Harrow close to public amenities.

At our focused inspection on the 2 July 2015, we found that the provider had followed their action plan and legal requirements had been met. We were also satisfied with the management arrangements put into place until a new registered manager was appointed. This demonstrated to us that the provider strived for improvements in the quality of care provided.

The home has a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act and associated Regulations about how the service is run.

We found that the provider had taken action and labelled slings appropriately and provided information about the make and type of sling to be used in people's manual handling plans.

We found that the provider had taken tried to employ a new chef, who unfortunately did not commence employment. We also saw that menus had been reviewed and people had more choice in what they want for breakfast.

The provider had discussed activities with people who used the service and reviewed staff allocation to facilitate a wider range of community based activities. However they had not been successful yet in recruiting an appropriate activity coordinator which will be reflected in a recommendation in this report.

Summary of findings

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

The service was safe. The provider ensured that equipment used for transfers was labelled and recorded appropriately to ensure it was only used for the designated person.

Good



Is the service effective?

The service was effective. The provider has made improvement to enable people who used the service to have a wider choice during breakfast.

Good



Is the service responsive?

The service was responsive. The provide provided a wider range of in-house activities, but was still not able to provide a designated activity co-ordinator.

Requires improvement



Bradbury Court

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

We undertook an unannounced focused inspection of Bradbury Court on 2 July 2015. This inspection was completed to check that improvements to meet legal requirements planned by the provider after our comprehensive inspection on 6 & 10 March 2015 had been made.

We inspected the service against three of the five questions we ask about services: is the service safe, effective and responsive. This is because the service was not meeting legal requirements in relation to these questions.

The inspection was undertaken by one inspector.

Before our inspection we reviewed the information we held about the home including the action plan sent to us by the provider after our comprehensive inspection.

During our focused inspection we spoke with seven people who used the service, one relative and three care workers. We looked at six manual handling assessments, minutes of staff and residents meetings and other documents relevant to management of the home.

Is the service safe?

Our findings

At our comprehensive inspection of Bradbury Court on 6 & 10 March 2015 we recommended the provider followed up to date guidance and regulations in regards to lifting and operating equipment to lift and transfer people who used the service.

At our focused inspection on 2 July 2015 we found that the provider had addressed this recommendation.

We looked at eight slings of different people who used this service and found that they had been labelled appropriately, however on two slings we found while the name and room number were still readable, the writing had faded. Manual handling risk assessments of seven people provided information in regards to the type, make and model of sling used to transfer people; however this was not easy to find as it was written down in different records. We spoke to the provider about this during feedback and were told that this would be resolved and reviewed.

Is the service effective?

Our findings

At our comprehensive inspection of Bradbury Court on 6 & 10 March 2015 we recommended that the provider referred to guidance in relation to providing choice to people who used the service around their meals.

At our focused inspection on 2 July 2015 we found that the provider had started to address our recommendation, but still needed more time to implement the changes.

The provider had appointed a second chef following our inspection; however the chef did not commence employment. The provider told us that they continued to recruit a second chef, but this had proven difficult. We saw a new menu, which had been discussed during residents meetings in April 2015 and people who used the service

were asked to make suggestions of meal choices they liked. Two people who used the service told us that they were able to choose on occasions a cooked breakfast option. One person said, "If I want to have a fried or scrambled egg in the morning staff would make this for me." However we did not see any evidence of this in the new proposed menu. Some people who used the service told us that they still found it difficult to ask for cooked breakfast options. We discussed this with the provider, who told us that they were aware of this. However the difficulties of recruiting a second chef made this very challenging. In the meantime the provider told us that they were planning to purchase a combination microwave oven, which would make it easier for staff to support people in making wider meal choices during breakfast.

Is the service responsive?

Our findings

At our comprehensive inspection of Bradbury Court on 6 & 10 March 2015 we had concerns that people who used the service were not offered sufficient stimulating activities in-house and in the community.

This was a breach of Regulation 9 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010, which corresponds to regulation 9 (3) (d&e) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

At our focused inspection on 2 July 2015 we found that the provider had taken actions to address the shortfalls in relation to the requirements of regulation 9(3) (d&e) described above.

People who used the service told us that activities had become better since our last inspection. One person told us “We do baking on Tuesdays and Karaoke on Thursday and one person is doing Turkish lessons.” However other people told us “Yes, there is a little more to do in-house, but it is still difficult to go out.” Another person told us “I like to socialise, but you always have to plan this in

advance.” Care workers spoken with confirmed this. “The company has made some changes, but we have to come in on our day off to take people out.” We asked staff if they get paid for this. All staff told us “Yes, we get paid overtime.” We discussed this with the provider who advised us that community based outings were based on the individual funding received and some people get paid for 10 hours activities, while others get paid for 30 hours, this was depending on the funding authority. The provider told us that they were still trying to appoint a new activity co-ordinator, which they have sourced additional funding, but we were told that this proved to be more difficult than expected.

During our visit we observed staff interacting with people positively in the communal area, some people played pool, others played table top games and some were watching TV or listened to music. We also observed people accessing the community and one person told us “I am going out with staff this afternoon to the cinema to watch a movie”

We recommend for the provider to continue to source additional staff to facilitate activities for people who used the service.