

Burrow Down Support Services Limited

Burrow Down Residential Home

Inspection report

Preston Down Road
Preston
Paignton
Devon
TQ3 1RN

Tel: 01803663445

Website: www.burrowdown.co.uk

Date of inspection visit:
09 June 2023

Date of publication:
02 August 2023

Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service responsive?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

We expect health and social care providers to guarantee autistic people and people with a learning disability the choices, dignity, independence and good access to local communities that most people take for granted. Right support, right care, right culture is the statutory guidance which supports CQC to make assessments and judgements about services providing support to people with a learning disability and/or autistic people. We considered this guidance as there were people using the service who have a learning disability and or who are autistic.

About the service

Burrow Down Residential Home is a residential care home providing accommodation and personal care to up to 14 adults with learning disabilities. At the time of our inspection there were 13 people using the service.

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

Right support: People were kept safe from avoidable harm because staff knew them well and understood how to protect them from abuse. The service worked well with other agencies to do so. People were not always able to comment on their safety. However, their body language while interacting with staff was relaxed and positive, which indicated they felt safe.

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.

People lived safely and free from unwarranted restrictions because the service assessed, monitored and managed safety well. There were comprehensive risk assessments in place covering all aspects of the service and support provided.

Medicines were managed as necessary. Infection control measures were in place. Health and social care professionals were regularly involved in people's care to ensure they received the care and treatment which was right for them.

There were effective staff recruitment and selection processes in place.

Right care:

Staff relationships with people were caring and supportive. Staff provided care that was kind and compassionate.

Right culture:

People's equality, diversity and human rights were respected. The service's vision and values centred around the people they supported. The organisation's statement of purpose documented a philosophy of

maximising people's life choices, encouraging independence and people having a sense of worth and value. Our inspection found that the organisation's philosophy was embedded in Burrow Down Residential Home. Although the service was a larger residential home, people were constantly encouraged to lead individual rich and meaningful lives with opportunities to try new things, whilst enjoying company when they wished.

The service worked hard to instil a culture of care in which staff truly valued and promoted people's individuality, protected their rights and enabled them to develop and flourish. Staff felt respected, supported, and valued by the registered manager and operations manager which supported a positive and improvement-driven culture. One staff member said, "I have never felt I am going to work, always feels like going home. That stress free feeling gives me the opportunity to offer as much as I can and even more, to those beautiful residents of Burrow Down, which deserve 100% to be happy and receive the best ever quality of care, and they actually do."

A number of methods were used to assess the quality and safety of the service people received. The service made continuous improvements in response to their findings.

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

Rating at last inspection

The last rating for this service was Good (published 13 April 2018).

Why we inspected

This inspection was prompted by a review of the information we held about this service and length of time since the last inspection. 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.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Burrow Down Residential Home on our website at www.cqc.org.uk.

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 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.

Burrow Down Residential Home

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

The inspection was completed by 2 inspectors.

Service and service type

Burrow Down 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. Burrow Down 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.

Notice of inspection

This inspection was unannounced.

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 6 members of staff, which included the registered manager and operations manager. We reviewed a range of records. We looked at a variety of records relating to the care and support provided. This included 3 care files and 3 staff files in relation to recruitment, and various audits/reports relating to the quality and safety of the service. We requested a variety of records were sent to us relating to staff training and regards the management of the service.

After the inspection

After our visit we sought feedback from relatives to obtain their views of the service provided to people. We received feedback from 8 staff. We did not receive any replies from relatives. We received feedback from 1 health professional. We continued to seek clarification from the provider to validate evidence found.

Is the service safe?

Our findings

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

At our last inspection we rated this key question good. The rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were kept safe from avoidable harm because staff knew them well and understood how to protect them from abuse. The service worked well with other agencies to do so.
- People were not always able to comment on their safety. However, their body language while interacting with staff was relaxed and positive, which indicated they felt safe. One person said they had a lot of fun at Burrow Down and that everyone was lovely. A relative in a recent survey stated, "It's been an incredible relief to me to know that [person's name] is now under the care of Burrow Down, as things were beginning to get overwhelming. I feel so much better now and [person's name] always seems happy. It's made a huge difference".
- Staff had training on how to recognise and report abuse and they knew how to apply it.
- Staff had access to the provider's policies on safeguarding and whistleblowing. Safeguarding was a regular topic in staff supervision to ensure staff had the opportunity to discuss any concerns.
- Staff knew people very well and could recognise if a person was worried or unhappy. This meant any concerns about people's wellbeing could be identified and followed up. A health professional told us, "The [registered manager] is switched on with her safeguarding responsibilities, enthusiastic and keen to help the client achieve a good outcome. They follow through with any tasks in a timely manner. [Person's name] has presented as very happy in the care of Burrow Down and their transition to them has gone well."

Assessing risk, safety monitoring and management

- People lived safely and free from unwarranted restrictions because the service assessed, monitored, and managed safety well.
- There were comprehensive risk assessments in place covering all aspects of the service and support provided.
- The service worked in partnership with people to understand and manage risks. Information was provided in an accessible format according to their individual communication needs. This meant people could participate meaningfully in assessing risks and developing support plans. This created a positive culture where people could participate safely in a range of activities of their choosing.
- Staff were trained to monitor, anticipate, and observe changes in behaviour. This helped them identify if people were unwell or upset and provide the support they needed. Care plans detailed how people liked their support and staff ensured these were followed. This minimised any distress for people because they knew what was happening.
- Support plans contained clear guidance for staff about how to recognise and manage risks, for example when people were experiencing emotional distress.
- People's support and records were monitored and reviewed frequently. This meant any issues or

improvements needed were identified and communicated to staff promptly.

- There were effective systems in place to ensure information about any changes in people's needs was shared across the staff team.
- People were referred for support from external health professionals when this need was identified.
- There were governance systems which ensured the environment and equipment were effectively maintained. Checks included hot water temperatures, fire safety, window restrictors and equipment to aid people's independence.

Learning lessons when things go wrong

- Staff raised concerns and recorded incidents and near misses. This helped keep people safe.
- There was evidence that learning from incidents and investigations took place and appropriate changes were implemented. For example, care plans and risk assessments were updated. Actions had been taken in line with the service's policies and procedures. Where incidents had taken place, involvement of other health and social care professionals was requested where needed to review people's plans of care and treatment.

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 Mental Capacity Act (MCA). In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS)

- We found the service was working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty. Any conditions related to DoLS authorisations were being met.
- Staff empowered people to make their own decisions about their care and support.
- Staff knew about people's capacity to make decisions through verbal or non-verbal means and this was well documented.
- For people that the service assessed as lacking mental capacity for certain decisions, staff clearly recorded assessments and any best interest decisions.
- Staff demonstrated best practice around assessing mental capacity, supporting decision-making and best interest decision-making.

Staffing and recruitment

- The number and skills of staff matched the needs of people using the service. Service advertisements used the phrase 'Do you have what it takes to fill this uniform?' and were diligent in finding the right people for the job.
- Every person's record contained a clear profile with essential information and 'dos and don'ts' to ensure that new or temporary staff could see quickly how best to support them.
- There were effective recruitment and selection processes in place. Staff had completed application forms and interviews had been undertaken. In addition, pre-employment checks, which included references from previous employers and Disclosure and Barring Service (DBS) checks, were completed. DBS 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

- The service ensured people's behaviour was not controlled by excessive and inappropriate use of medicines. Staff understood and implemented the principles of STOMP (stopping over-medication of people with a learning disability, autism or both) and ensured that people's medicines were reviewed by prescribers in line with these principles.
- Staff made sure people received information about medicines in a way they could understand. One person was able to self-medicate and this was managed safely.
- Staff followed effective processes to assess and provide the support people needed to take their medicines safely.
- Staff reviewed each person's medicines regularly to monitor the effects on their health and wellbeing. They provided advice to people and care workers about their medicines.
- People were supported by staff who followed systems and processes to prescribe, administer, record and store medicines safely.

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. One staff member said, "First of all, Burrow Downs is spotless. It is the most clean and tidy house I have ever worked in till now."

Visiting in care homes

- The provider's approach to visiting was in line with government guidance. Staff ensured visitors followed the government's protocols to minimise the risk of infection and or spread of COVID-19.

Is the service responsive?

Our findings

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

At our last inspection we rated this key question good. The rating for this key question has remained good. This meant people's needs were met through good organisation and delivery.

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

- Staff supported people to live the life they wanted. People spent as much time as they wanted taking part in activities and spending time with friends. The activity timetables were individualised and person centred. Each activity during the day had timeframes for each person using pictures and verbal descriptions. These included the staff who would be supporting them. Each person clearly had activities that were specific to them and their interests.
- People who were living away from their local area were able to stay in regular contact with friends and family via telephone and video calls.
- Staff helped people to have freedom of choice and control over what they did. One person was very interested in gardening. They were supported to choose and select plants and maintain them. Their key worker said, "The service user now looks after all the plants in the garden, which has got them outside in the fresh air again and seeing other people outside." Another staff member said, "Staff members always come up with ideas to create fun and fulfilling activities to improve the lives of the service users. One of the senior care workers made a life story (sensory) book on a pillow, which the service user who was visually impaired thought was great This meant the person could reminisce through touch."
- People were able to access recreation that was onsite in the extensive grounds. These activities included feeding and petting chickens and pigs. People took part in arts and crafts, making lip balms/scrubs, wax melts and clay rings. These items were sold by people at a local monthly market. People also sold compost and eggs that were produced on site as well as caring for baby chicks and using on site home-grown produce. People were able to have pets such as guinea pigs and rabbits. Alpacas and pygmy goats were planned additions. The operations manager said it was important people felt seen and valued in the community.
- People used their local community services as well as travelling further afield. One person told us how they enjoyed their trips out. They had chosen to go on a day trip out by taxi to go wherever they wanted. The Provider Information Return (PIR) said how important it was to ensure staff drivers were available on every shift so people could go out regularly.
- We heard how some friends had gone to the pub to celebrate a birthday. The service was planning on building a home pub to enable those who could not access the local pub to enjoy pub culture. There was a community and staff link with a local football team with local players visiting the service. Other people had enjoyed bespoke visits to their favourite shows and holiday destinations. One person had become isolated but with staff encouragement was now enjoying company.

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

- There were enough staff to meet peoples' needs. Staff were consistent and knowledgeable about how to support individuals. For example, one person had a detailed routine for staff to follow to ensure their wellbeing. People were supported to go out when they wanted and spend time with their friends.
- Staff knew people well and described how people liked to be supported. They respected people's decisions about how they wanted to live and express themselves. One staff member said, "The care is very good and it makes me very happy to see [staff] go the extra mile to help vulnerable people." A new staff member said, "[I can already see] the service users get the best support and care with all their daily routines and activities they wish to do."

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.

- People were provided with information in the way they preferred. People communicated with us using their communication aids, to discuss their experience of living at the service. People had communication passports in place for when they attended appointments.
- Staff understood how each person communicated their needs. We observed staff responding to people's non-verbal cues and supporting their needs. People were provided with pictorial information when needed to explain or support with decisions.

Improving care quality in response to complaints or concerns

- The provider had a complaints policy in place. People and staff told us, they would speak to senior staff or the registered manager if they had any concerns and were confident, they would be taken seriously.
- There had been no formal complaints since the last inspection. The registered manager understood and described the process they would follow if they received a complaint.

End of life care and support

- Nobody at Burrow Down Residential Home was currently receiving end of life care. People's care plans contained information about any conversations which had taken place with families, including if they did not want to discuss this yet.
- The registered manager understood the importance of planning people's care if their condition began to deteriorate.
- Supporting people to share and express bereavement was very important at Burrow Down. Following a recent bereavement, people had gathered to meet the hearse outside the service to say goodbye and were involved in creating a memorial garden to remember and celebrate loved ones.

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 our last inspection we rated this key question good. The rating for this key question has remained good. 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

- The service worked hard to instil a culture of care in which staff truly valued and promoted people's individuality, protected their rights, and enabled them to develop and flourish. A new provider had recently purchased the company. These values remained, with one of the founders of Burrow Down staying as operations manager, with the additional support of the new provider's network. They said, "We are well supported by the new provider company. The managing director has 'eyes that see' and knows what is good care."
- The registered manager was visible in the service, approachable and took a genuine interest in what people, staff, family, and other professionals had to say. One staff member said, "[The staff] are all amazing because that is the result of a strong united team. The [registered] manager is the right person at the right position, and you receive that when you notice the love the residents express through their eyes when they look at her." Another staff member said, "I feel I can go to anyone within the company for a chat or advice."
- The registered manager worked directly with people and led by example. One staff member said, "I have never felt I am going to work, always feels like going home. That stress free feeling gives me the opportunity to offer as much as I can and even more, to those beautiful residents of Burrow Down, which deserve 100% to be happy and receive the best ever quality of care, and they actually do."
- Staff felt respected, supported, and valued by the registered manager and operations manager. This created a positive and improvement-driven culture. One staff member said, "The support I have had from the team is amazing."
- Staff relationships with people were caring and supportive. Staff provided care that was kind and compassionate and this was commented on by all staff and the people we spoke to.
- People's equality, diversity and human rights were respected. The service's vision and values centred around the people they supported. The organisation's statement of purpose documented a philosophy of maximising people's life choices, encouraging independence and people having a sense of worth and value. Our inspection found that the organisation's philosophy was embedded in Burrow Down Residential Home. For example one person had moved to Burrow Down from the community due to issues within their neighbourhood. The operations manager told us how they had been supported to move back into the community, in line with their wishes. They now lived in a bespoke flat with sound proofing, in a quiet area where they were flourishing.
- Staff supported people as advocates where needed. For example, they supported one person who had been unable to remain at the service due to funding issues. The operations manager told us how they had

'fought their corner about funding' and had supported the person, reassuring them they would facilitate them seeing their friends and visiting Burrow Down regularly.

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 service apologised to people, and those important to them, when things went wrong.
- Staff gave honest information and suitable support, and applied duty of candour where appropriate.

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

- The registered manager had the skills, knowledge and experience to perform their role and a clear understanding of people's needs and oversight of the services they managed.
- Staff knew and understood the provider's vision and values and how to apply them in the work of their team.
- Systems were in place to monitor the quality and safety of the service.
- Governance processes were effective and helped to hold staff to account, keep people safe, protect people's rights and provide good quality care and support.
- Staff were committed to reviewing people's care and support on an ongoing basis as people's needs and wishes changed over time.
- The provider invested in staff by providing them with quality training to meet the needs of all individuals using the service.
- The registered manager understood and demonstrated compliance with regulatory and legislative requirements.
- Staff were able to explain their role in respect of individual people without having to refer to documentation.
- Staff delivered good quality support consistently, facilitated by detailed records of how people liked their support delivered.

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

- People, and those important to them, worked with managers and staff to develop and improve the service. Regular house meetings enabled people to air their views and make suggestions.
- There was a keyworker system in place. This enabled people to communicate their care and support needs, and experience of the care and support received, on an ongoing basis with a particular member of staff.
- The registered manager and their staff team were in regular contact with families, via phone calls, technologies and visits. Relatives had recently commented in a survey, "Management have excellent communication. It always seems like they care and they're trying to make things better."
- People had review and update discussions when they wanted. For example, one person had a regular call to update their family on Fridays.
- Staff confirmed they were kept up to date with things affecting the overall service through conversations with the provider on an on-going basis. Additional meetings took place on a regular basis as part of the service's detailed handover system, to ensure consistency of care and support.
- The service recognised the importance of continually improving the service to meet people's individual needs. This included the gathering of people's views to improve the quality and safety of the service and the care being provided. A recent local authority PAMMS report stated, "Excellent rating- Annual customer surveys were sent out in an easy read format each year and staff surveys are also completed. All feedback was collated, and actions taken as a result were shared through the quarterly newsletter. There is an

ongoing service improvement plan (SIP) in place, reviewed 3 monthly, including all future plans for the business, incidents and complaints with associated lessons learned, actions assigned to staff members and time frames for completion. Customers had a monthly key worker meeting and family and friends were invited 6 monthly/annually for a person-centred review meeting." The Provider Assessment & Market Management Solution (PAMMS) is an online tool which manages the quality monitoring process. PAMMS is designed for monitoring officers, managers, and providers to collaborate and improve service provision, through the collation and analysis of information gathered both for the local authority as well as providers from an online portal.

- A colourful newsletter, 'The Burrow Low-down' celebrated people's achievements and shared updates, upcoming events such as Harvest Markets open to the public, and community events. For example, people went to a local event for people living with learning disabilities attended by the Mayor, with a Q and A session.

Continuous learning and improving care

- The provider set a culture that valued reflection, learning and improvement and they were receptive to challenge and welcomed fresh perspectives. Staff all praised the quality of their training and involvement.
- The registered manager kept up to date with national policy to inform improvements to the service.
- The provider had a clear vision for the direction of the service which demonstrated ambition and a desire for people to achieve the best outcomes possible.

Working in partnership with others

- The service worked with other health and social care professionals in line with people's specific needs. Staff commented that communication between other agencies was good and enabled people's needs to be met. Care files showed evidence of professionals working together. For example, GPs and various specialists specific to certain conditions/needs.
- Regular reviews took place to ensure people's current and changing needs were being met. One health professional told us, "I just get the impression of a competent, client-focused service and always feel reassured that any of the residents I place there are in a safe pair of hands."