

Bavani Care Home Limited

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Inspection report

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Ratings

Overall rating for this service

Requires Improvement 

Is the service safe?

Good 

Is the service well-led?

Good 

Summary of findings

Overall summary

About the service

Bavani Care Home Limited is a residential care home providing personal care and support to nine people with mental health care needs at the time of our inspection. The service can support up to a maximum of nine people in a single adapted building.

People's experience of using this service

Feedback we received from people about the service was positive. Typical comments included, "I really do like living here. The [registered] manager and staff are great" and "This is a very well run care home. The staff are always so kind, compassionate and patient with my [family member] who says they're happy at Bavani." Most people using the service, their relatives and staff all spoke positively about the relatively new registered manager and felt the service had definitely begun to improve in the last six months under their leadership.

The service was safe. At our previous two inspections of this service we found the provider had failed to ensure medicines were managed safely. This was because medicines records were not always appropriately maintained by staff, there were no processes in place to receive and act on medicines alerts and people's allergy status was not recorded. At this inspection we found the provider had made enough improvements to ensure people received their prescribed medicines safely.

We also found enough progress had been made by the provider to ensure their fire safety arrangements were now suitably robust after we found at their last inspection not all their fire-resistant doors closed automatically when the fire alarm sounded.

Furthermore, the service was adequately staffed. There were systems and processes to protect people from the risk of abuse. People were supported by staff who knew how to prevent or manage risks they might face in a person-centred way. This kept people safe, while not restricting their freedom. The care home was kept clean and staff followed relevant national guidelines regarding infection control. There were sufficiently robust systems in place to assess and respond to risks regarding infection prevention and control, including those associated with Covid-19.

The service was well-led. At our last inspection we found the provider had failed to ensure their established governance systems to monitor the safety and quality of the service people received were not always operated effectively. At this inspection we found the provider had improved the way they operated their oversight and scrutiny arrangements.

People also benefited from living in a care home that was now much better managed. The new registered manager had installed an open, inclusive and person-centred culture at the care home. They also consulted people, their relatives and staff as part of their on-going programme of improving the service they provided. For example, when things had gone wrong, there were systems to learn lessons from this and prevent similar incidents from reoccurring. The provider worked holistically in close partnership with other mental health

and social care professionals and agencies to plan and deliver positive outcomes for people.

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

Rating at the last inspection

We carried out an unannounced comprehensive inspection of this service on 19 and 21 November 2019. Multiple breaches of legal requirements were found. The provider completed an action plan following our last inspection stating what they would do and by when to improve the way they managed medicines and operated their governance systems.

Why we inspected

We undertook this focused inspection to check they had followed the action plan they sent us and to confirm they now met legal requirements. This report only covers our findings in relation to the Key Questions; Is the service Safe and Well-led?, which contain those requirements.

The ratings from the previous comprehensive inspection for those Key Questions not looked at on this occasion were used in calculating the overall rating at this inspection. The overall rating for the service therefore remains unchanged as requires improvement, despite improved ratings of good for both the two Key Questions we look at this time. The overall rating is based on the findings of this and the service's previous inspection.

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.

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

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.

Bavani Care Home Limited

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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Inspection team

This inspection was carried out by two inspectors, (one onsite and the other working remotely) and a Care Quality Commission (CQC) pharmacist specialising in the management of medicines (also working remotely).

Service and service type

Bavani Care Home Limited is a 'care home'. People in care homes receive accommodation and personal care as 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 CQC. 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

We gave the service 24 hours' notice of the inspection. This was because the service is small and we wanted to make sure the care home's environment could be made as safe as possible for the people living there to speak with the visiting inspector. Inspection activity was carried out over three days, starting on 7 July and ending on 9 July 2020.

What we did

Before this inspection, we reviewed all the information we had received about the service since their last inspection. This included any statutory notifications the provider had been required to send us, feedback from the local authority and external community professionals who work with the service and issues of concern raised by some neighbours. We used all this information to plan our inspection.

We did not ask the provider to complete a Provider Information Return. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report.

We spoke in-person with four people about their experiences of the care and support they received at the care home, the service's registered manager and a visiting manager who managed the provider's other care home. We also spoke over the telephone with two people's relatives and received email feedback from five members of staff who worked at the care home.

We reviewed a range of records. This included two people's care plans, three medicines administration records, two staff files and multiple fire safety documents.

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 requires improvement. At this inspection this key question has improved to good. This meant people were now safe and protected from avoidable harm.

Using medicines safely

At our previous two inspections of this service we found the provider had failed to ensure medicines were managed safely. This was because medicines records were not always appropriately maintained by staff, there were no processes in place to receive and act on medicines alerts and people's allergy status was not recorded. This represented a continued breach of regulation 12 (Safe Care and Treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

At this inspection we found the provider had followed the action plan they had sent us after our last inspection and had made enough improvements to ensure they were no longer in breach of regulation 12.

- Medicines systems were now well-organised, and people continued to receive their medicines as prescribed. One person told us, "They [staff members] give me my medicines every day when I need them."
- Medicines administration records (MAR) were appropriately maintained by staff and we found no gaps or omissions in recording. For example, we saw examples of handwritten MAR sheets that had been checked and signed by two members of staff. Each person's allergy status was recorded on their MAR and individual care plans were in place for health needs such as diabetes and epilepsy. A separate folder was also kept of medicine alerts.
- People's care plans also included detailed information about their prescribed medicines and how they needed and preferred them to be administered, including what support they need to take their medicines on time.
- Staff had received up to date safe management of medicines training and their competency to continue managing medicines safely was now routinely assessed at least bi-annually by the registered manager. One member of staff told us, "The [registered] manager often checks we're still handling medicines safely, so we minimise the risks of making mistakes."
- Audits were routinely carried out by the registered manager and staff to check medicines were being managed in the right way.

Assessing risk, safety monitoring and management.

At our last inspection we found several fire-resistant doors in the communal areas would not close automatically into their doorframe when the fire alarm was activated. We discussed this safety issue with the registered manager at the time who responded immediately by confirming in an email he sent after our inspection that all the faulty fire-resistant doors had been repaired.

At this inspection we were able to confirm the action the registered manager said would be taken had.

- We saw fire-resistant doors we tested at random during this inspection all closed automatically into their doorframes.

- There were plans in place to help staff deal with emergencies, including fire. For example, we saw personal emergency evacuation plans (PEEP's), which clearly set out what support people would need to safely evacuate the building in an emergency.
- People confirmed they routinely participated in fire evacuation drills of the premises and said they had been told what to do in the event of fire. Staff also demonstrated a good understanding of their fire safety roles and responsibilities and confirmed they routinely participated in fire evacuation drills with people living in the care home. Records showed fire evacuation drills were carried out at least quarterly.
- Staff demonstrated a good understanding of the risks people might face and how to prevent or manage them. Several staff told us risk management plans were easy to access and follow.
- The London Fire Brigade inspected the service in January 2020 and were satisfied the service's safety fire arrangements were adequately robust.

Staffing and recruitment; Learning lessons when things go wrong

- People received safe care and support from adequate numbers of staff. We saw staff were available when people needed them. All the people we spoke with said Bavani Care Home was adequately staffed and they felt safe living there. Comments included, "The staff are very supportive. More like family. I do feel comfortable and safe here." Another person remarked, "I used to regularly visit my [family member] before the Corona virus crisis and always saw plenty of staff on duty in the home."
- Throughout our inspection we observed people engaging positively with the manager and staff on duty at the time.
- The registered manager told us the service had learnt a valuable lesson when things had gone wrong early in the year (2020). Following an incident of challenging behaviour the number of male staff working across the day at weekends had been increased to reduce the risk of similar incidents reoccurring. One member of staff told us, "Having more male carers on duty at weekends has really helped us prevent incidents of anti-social."

Systems and processes to safeguard people from the risk of abuse

- People were supported to understand how to keep safe and to raise concerns if abuse occurred. One person told us, "I would talk to the [registered] manager or staff. They do listen to us." A second person remarked, "I can talk to the [registered] manager and the staff are approachable."
- The provider had effective safeguarding policies and procedures in place.
- Staff had completed safeguarding adults training and knew how to recognise abuse and respond to it.
- At the time of our inspection no safeguarding incidents were under investigation.

Preventing and controlling infection

- There were systems to assess and respond to risks regarding infection prevention and control, including those associated with COVID-19.
- People were protected against the risk of infection. For example, a sign on the front door informed visitors of the infection control measures in place during the pandemic. Individual temperatures were taken on entering the service and hand-wash was available. Both people and staff had access to ample supplies of Personal Protective Equipment (PPE).

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 requires improvement. At this inspection this key question has improved to good. This meant the service was now consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; and continuous learning and improving care

At our last inspection we found the provider had failed to ensure their established governance systems to monitor the safety and quality of the service they provided were not always operated effectively. This was because their oversight and scrutiny processes had failed to pick up a number of issues, we identified at our last inspection in relation to safe medicines management, fire safety, staff support, promoting people's independence and access to meaningful social and vocational activities. This represented a breach of regulation 17 (Good Governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

At this inspection we found the provider had followed the action plan they had send us after our last inspection and had made enough improvement to ensure they were no longer in breach of regulation 17.

- The registered manager recognised the importance of continued monitoring of the safety the quality of the standard of personal care people living at the service received. We saw since our last inspection the registered manager had ensured their established quality assurance system had been improved to operate more effectively. For example, the frequency of audits and checks the owner, registered managers and staff, now carried out at the service had been significantly increased in the last six months. A member of staff told us, "We now have a daily and monthly medicines audit which ensures medicines are always accurately given, recorded and stored."
- The registered manager told us they used these ongoing checks to identify issues, learn lessons and implement action plans to improve the service they provided. For example, staffing levels were increased at weekends to help prevent or appropriately manage incidents of challenging or anti-social behaviour happening at the service or in the local community.
- There were clear management and staffing structures in place. The registered manager was supported by the owner, the registered manager of the provider's other care home in the area, a deputy manager and his staff team.
- People using the service, their relatives and staff all spoke positively about the way the service was now run by the relatively new registered manager. A relative told us, "He is a good manager. He has the utmost respect for residents and staff and is often around to make sure they [staff] are doing a good job." Another member of staff remarked, "The manager is great...He gives us [staff] every opportunity to improve. I can talk to him freely about anything."
- The registered manager understood their responsibilities with regard to the Health and Social Care Act 2008 and what they needed to notify us about without delay.

Planning and promoting person-centred, high-quality care and support; and how the provider understands and acts on duty of candour responsibility

- We saw the service's last CQC inspection report and ratings were clearly displayed in the care home and were easy to access on the provider's website. The display of the ratings is a legal requirement, to inform people of our judgments.
- The registered manager had a clear vision and person-centred culture which they shared with his staff team. They told us they routinely used group and individual supervision meetings to remind staff about the provider's underlying core values and principles. One member of staff told us, "The service does work well and is improving, but I think the [registered] manager would be the first to acknowledge there's still a lot of work to be done."
- The registered manager was aware of their responsibilities under the Duty of Candour. The Duty of Candour is a regulation that all providers must adhere to. Under the Duty of Candour, providers must be open and transparent, and it sets out specific guidelines providers must follow if things go wrong with care and treatment.

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

- The provider engaged and involved people using the service, their relatives and staff in the running of the service.
- People told us the registered manager was approachable and felt able to express their views about the service they received at Bavani Care Home.
- Records showed people had regular opportunities to express their views to managers and staff during day-to-day contact and regular house meetings.
- The provider also valued and listened to the views of staff. Staff were encouraged to contribute their ideas about what the service did well and what they could do better, during individual meetings with their line manager and group meetings with their fellow co-workers. One member of staff told us, "To me, this manager has real qualities. He's very hands-on and approachable."

Working in partnership with others

- The provider worked in close partnership with various external agencies, including local authorities, clinical commissioning groups (CCG) and the police. A relative told us, "I've been very impressed with the way the manager and staff work so well with other mental health professionals to help stabilise my [family members] emotional wellbeing."
- The registered manager gave us an example of how they had recently worked in close partnership with the local CCG to audit and develop an action plan to improve the way they managed medicines in the service on behalf of the people living there. Several staff also told us the owner and the registered manager were working closely with the local authority, the police and neighbours to try and resolve ongoing concerns raised about anti-social behaviour within the service and local community.
- The registered manager also told us they regularly communicated with these external bodies and other health and social care professionals, and always welcomed their views and advice.