

# 229 Mitcham Lane Limited

# Trevelyan Road

## Inspection report

140 Trevelyan Road  
Tooting  
London  
SW17 9LW

Tel: 02086729977

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## 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

Trevelyan Road provides residential accommodation for up to four people with mental health needs. At the time of our inspection there were three people using the service.

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

People using the service told us they liked living at Trevelyan Road and they felt safe. There were enough staff employed to meet their needs, including supporting them to take their medicines on time. Risks to people were managed and the provider worked with healthcare professionals to manage risk, including around behaviours that could be interpreted as challenging.

Staff received training that was appropriate for their role. However, we found that staff supervision was not being carried out regularly by the registered manager. People's dietary needs were being met and the provider worked in collaboration with external healthcare professionals to support people.

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 and staff had been living and working at the service for a long time which helped to foster positive relationships within the service. People told us that staff treated them well and encouraged them to maintain their independence.

Care plans were individual to each person and were reviewed regularly which helped them to remain up to date. People lived independent lives, accessing community day centres and taking part in activities of their choosing. They told us they had no complaints but knew who to speak with if they did.

There was an open culture within the service, with people and staff telling us they felt comfortable in approaching the registered manager or Director. The provider met its regulatory requirements such as submitting statutory notifications and displaying the latest CQC ratings. Quality assurance checks took place to ensure the service was managed well, including care plan reviews, medicines records and health and safety checks.

We have made a recommendation in relation to staff supervision.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

### Rating at last inspection and update

The last rating for this service was good (published 10 November 2017).

### 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.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Trevelyan Road on our website at [www.cqc.org.uk](http://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?

The service was safe.

Details are in our safe findings below.

Good ●

### Is the service effective?

The service was effective.

Details are in our effective findings below.

Good ●

### Is the service caring?

The service was caring.

Details are in our caring findings below.

Good ●

### Is the service responsive?

The service was responsive.

Details are in our responsive findings below.

Good ●

### Is the service well-led?

The service was well-led.

Details are in our well-led findings below.

Good ●

# Trevelyan 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

This inspection was conducted by one inspector.

#### Service and service type

Trevelyan 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. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

#### Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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.

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 professionals who work with the service. The provider was not asked to complete a provider information return prior to this inspection. 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 two people using the service, two support workers and the Director. The registered manager was on leave at the time of our inspection. We reviewed a range of records. This included two care records, staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including audits, training records, policies and procedures were reviewed.

# 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 requires good. At this inspection the rating has remained the same. This meant people were safe and protected from avoidable harm.

### Assessing risk, safety monitoring and management

- Risks to people were assessed regularly and managed in a way that kept people as safe as possible.
- Some people using the service were at risk out in the community. Staff followed agreed procedures written in a community access safety plan to ensure this was done in a safe way.
- Risk management guidelines were in place to help staff mitigate any risk."
- The provider liaised and worked with healthcare professionals to manage risks.

### Staffing and recruitment

- We were assured the provider's staffing and recruitment systems were safe.
- There had been no new staff employed by the provider for a number of years. Staff employed had Disclosure and Barring Service (DBS) checks in place. DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.
- There were enough staff employed to meet people's needs included supporting them when out in the community. As well as permanent staff, the provider used regular agency workers who were familiar with people's needs.
- People using the service told us there were enough staff to support them, including taking them out into the community when they wanted.

### Systems and processes to safeguard people from the risk of abuse

- People using the service told us they liked living at Trevelyan Road and said they felt safe living there. Comments included, "Yes, I am safe here" and "I feel safe."
- Staff we spoke with were familiar with the term safeguarding and how they would protect people using the service from harm or abuse. They were aware of reporting procedures and there were safeguarding posters on display in the staff office with details of the local safeguarding procedures and processes. One support worker said, "We have to keep them [people using the service] safe from harm. We have to report any concerns to the manager."
- Records showed safeguarding training had been delivered to staff.

### Using medicines safely

- People received their medicines from staff who had the appropriate training to do so. People told us that staff supported them to take their medicines.
- Staff completed medicines records when they administered medicines. We reviewed these as part of the inspection and saw they were fully completed.

- When medicines were delivered they were counted in and stock balances checked every time they were administered.
- Care plans included details of people's medicines and any allergies which meant staff had up to date information available to them regarding current medicines.

#### Preventing and controlling infection

- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider's infection prevention and control policy was up to date.

#### Learning lessons when things go wrong

- Staff followed a process for recording and following up on any incidents and accidents that occurred.
- Where incidents had occurred, these were documented and shared with the wider staff team and also with healthcare professionals. This helped the provider to monitor any trends and try and reduce these from occurring in future.



# 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 our last inspection we rated this key question good. At this inspection the rating for this key question has remained the same. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Staff support: induction, training, skills and experience

- People received care from staff who had received the appropriate training needed to support people effectively.
- Staff told us they were happy with the training they received and said they were given a list of training by the registered manager which they were required to complete. One support worker said, "I do regular e-learning, last month I did three."
- The Director told us that they had signed up to a training provider to deliver courses over a two year cycle. These were in topics that were relevant to people's needs including managing challenging behaviour, conflict awareness, mental health awareness, drugs and alcohol awareness.
- Although the provider held team meetings, there was a lack of individual 1:1 supervisions for staff. We raised this with the Director during the inspection. They said this had been impacted due to the absence of the registered manager and Covid-19 but was something they would be recommencing as soon as possible.

We recommend the provider puts in place a system for formal staff supervision. We will follow this up at the next planned inspection of the service.

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

- People's care and support was provided in a safe and clean environment.
- There were private and communal spaces for people to engage and spend time alone or with other people. There was a well-maintained garden which people could access when they chose.
- People's rooms included their own belongings and personal items.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- People's care and support plans reflected their current needs. There had been no recent admissions to the service but care plans for people using the service had been reviewed recently.

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

- People told us they enjoyed the food at the home and staff supported and prepared food for them. One person said, "We get cooked food and we get take away." Another said, "The staff cook for me, they cook good food. They make macaroni or spaghetti."
- People were involved in planning their own menus on a weekly basis and went out with staff to purchase food to cook.
- Where they were able to do so, people prepared their own meals according to their preferences.

Supporting people to live healthier lives, access healthcare services and support; Staff working with other agencies to provide consistent, effective, timely care

- People were supported to access healthcare services if needed.
- People told us they were able to visit the GP if they were feeling poorly and staff supported them to do so.
- People's healthcare needs were recorded in their care plans and staff demonstrated a good understanding of what these needs were and how they supported people.
- Records showed that the provider liaised with healthcare professionals, such as a Speech and Language Therapist, to support people.
- The provider kept a record of any health appointments that people attended.

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.

- People using the service had the capacity to consent to the care and living arrangements and there was nobody who was under a DoLS at the time of the inspection.
- Where there were some restrictions in place for people, these were done in agreement with them.

# 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 our last inspection we rated this key question good. At this inspection the rating for this key question has remained good. 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

- People told us they enjoyed living at Trevelyan road and said they liked the company of staff. They said, "The staff are alright, we get along."
- People and staff had been living and working at the service for a number of years which meant they were comfortable in each other's company. We observed friendly interaction between people and staff.
- Staff demonstrated a good understanding of people's needs including their preferences such as what they liked to eat and how they liked to spend their day.

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

- People were able to express their views and make decisions about their care.
- People and staff held communal and individual meetings where they were able to discuss things that were important to them. Key worker meetings were held by staff with people they supported where they were able to discuss things that were important to them.
- People were supported to maintain family relationships that were important to them. One person was supported to visit family. He told us, "I'm going out with my sister and my mum for my birthday, going to go out for a nice meal."

Respecting and promoting people's privacy, dignity and independence

- Staff respected people's privacy and their independence.
- People told us they led independent lives. People were supported to attend community day centres. One person said, "I like to go to the hope project and play sports, table tennis and snooker." People told us they were encouraged to do things independently by staff such as buying personal items, going for walks and preparing meals. One person told us, "I do cooking and cleaning."
- Some people using the service needed prompting to manage their personal care needs, these were recorded in their care plans and staff were directed to support them in a way that was discreet.
- Staff told us ways in which they encouraged people's independence with regards to daily living skills such as cooking, shopping and accessing the community.

# 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. At this inspection the rating for 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

- The provider supported people so that their individual support needs were met.
- There were individual care plans in place which were based around people's support needs. These included the intended goals/objectives and the interventions that staff needed to take to support people. Care plans had been reviewed recently which meant they captured people's current needs. One person said, "I like the help I get here."
- Care plans were developed in consultation with people and key workers which meant they considered their views. Guidance from external healthcare professionals were also included in their care plans.
- Staff demonstrated a good understanding of people's support needs and how they supported them to achieve their objectives.
- Support workers completed daily notes with details of how people spent their day and the support they were given.

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 take part in a variety of social activities that reflected their interests.
- People said they took part in community activities that they enjoyed. They told us they went out every day, to the local town centre shopping for personal items and food shopping for the home. They said that staff supported them to do so.
- There were individual daily activity timetables in place for people which showed a range of activities that they took part in.

Improving care quality in response to complaints or concerns

- The director told us there had been no formal complaints received, this was reflected in the feedback we received from people and the records we saw.
- People told us they had not raised any formal complaints. They said they would speak to their key worker if they were not happy with anything.

# 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. At this inspection the rating for 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.

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

- The provider was aware of its regulatory responsibilities. For example, statutory notifications were submitted in line with their legal requirements.
- Care plans and risk assessments were audited regularly which helped to ensure they were up to date and reflected people's current support needs.
- Medicines records were checked for accuracy and medicines were counted in and stock balances checked daily.
- Health and safety checks were completed by staff. The provider carried out daily fridge temperature checks and cleaning records. Fire alarms and fire door release mechanisms were checked every week. There were regular fire drills and emergency lighting was checked monthly. These checks helped to ensure the environment was safe.

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 provider was aware of the requirements under Duty of Candour.
- The service's previous CQC inspection report was clearly displayed. The display of the ratings is a legal requirement, to inform people, those seeking information about the service and visitors of our judgments.

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

- The provider held team meetings with staff where their views were heard.
- People had the opportunity to discuss things that were important to them through group meetings or individual key worker meetings if they wished to discuss things in private.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people;

- People and staff told us they enjoyed living and working at the service. The majority of them had been at the service for a number of years and told us they felt comfortable there. One support worker said, "I like working here, I get on with everyone."
- People told us they would speak to staff if they were unhappy about anything and felt they would be heard. One person said, "They are always around for me."

#### Working in partnership with others

- The director told us they had established good links with external professionals such as the Community Mental Health Team in supporting people.
- Records showed engagement with these professionals including referrals and regular reviews.