

Achieve Together Limited

231 Brook Lane

Inspection report

231 Brook Lane
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Ratings

| | |
|---------------------------------|-------------------------|
| Overall rating for this service | Requires Improvement ● |
| Is the service effective? | Inspected but not rated |

Summary of findings

Overall summary

About the service

231 Brook Lane is a residential care home that can support up to 10 people with a learning disability. At the time of our inspection, 7 people were using the service. The service provides support to adults with a learning disability and/or autism, mental health conditions and physical disabilities.

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

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.

Right Support: We found staff training had improved and the provider had systems in place to monitor training, competence and qualifications more effectively. Whilst some staff had not fully completed all their training, we were assured further learning and development opportunities were available for staff. Information provided to us demonstrated staff had been booked to attend various training sessions.

This was a targeted inspection to follow up 1 warning notice served at the previous inspection about number of suitably skilled, qualified and trained staff deployed to meet people's needs. We use targeted inspections to follow up on Warning Notices or to check concerns. We did not look at an entire key question, only the part of the key question we are specifically concerned about. Targeted inspections do not change the rating from the previous inspection. This is because they do not assess all areas of a key question. For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at the last inspection was required improvement and the report was published on 4 August 2022.

At the last inspection we served a warning notice because we found insufficient numbers of suitably skilled, qualified and experienced staff.

The provider had failed to meet the requirements of Right support: The model of care failed to provide people with the appropriate opportunities to maximise their choices, Right care: Care was not always provided in a person-centred manner and relatives told us they felt people were isolated and Right culture: The leadership in the service failed to create a culture of inclusion which empowered people's lives

Why we inspected

We undertook this targeted inspection to check whether the warning notice previously served in relation to Regulations 18 (1) (2) (a) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 had been met. Therefore, the overall rating for the service has not changed following this targeted inspection

and remains requires improvement.

Enforcement

The provider remains in breach of regulations found at the last inspection. We found breaches in relation to the management of medicines, staff deployment, training, notification of incidents, mental capacity, premises and governance. The service was not able to demonstrate how they were meeting some of the underpinning principles of Right support, right care and right culture.

At this inspection we found improvements had been made and the provider was no longer in breach of regulation 18, staffing. However, improvement is still required to ensure all staff are suitably skilled, qualified and experienced.

Follow up

We will work alongside the provider and local authority to monitor progress. We will continue to monitor information we receive about the service, which will help inform when we next inspect.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link 231 Brook Lane. View 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 effective?

At our last inspection we rated this key question requires improvement. We have not reviewed the rating as we have not looked at all of the key question at this inspection.

Inspected but not rated

231 Brook Lane

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.

This was a targeted inspection to check whether the provider had met the requirements of Warning Notices in relation to Regulation 18 (1) (2) (a) (staffing) of the HSCA (Regulated Activities) Regulations 2014.

Inspection team

This inspection was carried out by one inspector.

Service and service type

231 Brook Lane 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. 231 Brook Lane 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 not a registered manager in post. The provider was in the process of trying to recruit a new registered manager. In the interim, the location was being overseen by a floating support manager.

Notice of inspection

The inspection was unannounced.

What we did before the inspection.

We reviewed information we had received about the service since the last inspection.

During the inspection

We spoke with the floating support manager and the deputy manager. At the time of our inspection people were being supported in the community. We reviewed a range of records related to the training of staff.

Is the service effective?

Our findings

At our last inspection this key question was rated requires improvement. 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.

The purpose of this inspection was to check if the provider had met the requirements of the warning notice we previously served. We will assess the whole key question at the next comprehensive inspection of the service.

Staff support, induction, training, skills and experience.

At our last inspection the provider had failed to ensure staff were suitably skilled, qualified and experienced. This was a breach of regulation 18 (1) (2) (a) (staffing) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. We served the provider a warning notice and told them to meet Regulation 18 by 19 September 2022. We went back to the service to check that the warning notices had been met.

Although the majority of improvements had been made, the provider continues to require improvement, however, is no longer in breach of regulation 18.

- During our previous inspection we identified a failure to deploy enough numbers of suitably qualified, competent, skilled and experienced staff. We issued a warning notice in relation to regulation 18 (staffing) of the Health and Social Care Act 2008 and told the provider to make improvements. At this inspection, we were satisfied the provider had met the majority of the warning notice. However, we continued to have concerns about the competence of staff and their ability to meet people's needs at all times.
- The floating regional manager told us they were satisfied with the progress made but felt improvements were still needed to further develop the staff team. They also told us the provider's health team had supported 231 Brook Lane by providing bespoke training in relation to the use of EpiPen (EpiPen is a device that administers a dose of epinephrine used for the emergency treatment of an acute allergic reaction). They said, "Our training figures are much better now but we still have areas to improve upon".
- Records demonstrated significant improvements in relation to various training subjects. At the last inspection we had concerns about the number of staff who had received effective training in relation to anaphylaxis auto injectors, buccal administration, PICA (A condition in which a person repeatedly eats things that are not food), medicine management, STOMP (stop over medication of people with a learning disability, autism or both) and autism awareness.
- Staff who had not undertaken recent refresher training or had not fully completed their learning development objectives had been booked to attend the relevant courses to ensure they could meet people's needs at all times.