

## Mrs Jacqueline Lorraine Bailey

# Airthrie Homes - 56 Airthrie Road

## **Inspection report**

56 Airthrie Road Goodmayes Ilford Essex IG3 9QU

Tel: 02085900154

Website: www.airthriehomes.co.uk

Date of inspection visit: 08 June 2016

Date of publication: 11 July 2016

### Ratings

Overall rating for this service	Requires Improvement
Is the service safe?	Requires Improvement •
Is the service effective?	Requires Improvement •

## Summary of findings

## Overall summary

This inspection took place on 8 June 2016 and was announced. The provider was given one hour notice because the location is a small care home for younger adults who are often out during the day; we needed to be sure that members of the management team were available to talk to.

At the last inspection on 18 November 2015 we found the service to be breaching regulations as there was not always sufficient numbers of staff to meet the needs of people. We also noted staff had not been having regular supervision sessions to enable them to carry out the duties they are employed to perform. After the comprehensive inspection, the provider wrote to us to say what they would do to meet legal requirements in relation to the breach.

We undertook this focused inspection to check that they had followed their plan and to confirm that they now met legal requirements. This report only covers our findings in relation to those requirements. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Airthrie Homes - 56 Airthrie Road on our website at www.cqc.org.uk.

Airthrie Homes - 56 Airthrie Road provides accommodation and support with personal care for up to four adults with learning disabilities.

There is no registered manager in place as the registered provider is in day to day charge of the service. 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 2008 and associated Regulations about how the service is run.

At this inspection we found the registered provider had taken sufficient action to ensure people were looked after by sufficient number of staff. We saw evidence the staff were supported through regular supervision sessions. However we noted that the provider was failing to prevent contamination of water supply to the service and this could put people as well as staff at risk of consuming contaminated water.

## 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 not always safe.

People and staff were at risk of consuming contaminated water.

There were sufficient staff to meet people's care and support needs.

#### Requires Improvement

#### Is the service effective?

The service was effective.

Staff received appropriate support to meet the needs of people living at the service.

We could not improve the rating for effective from requires improvement because to do so requires consistent good practice over time. We will check this during our next planned comprehensive inspection.

#### Requires Improvement





## Airthrie Homes - 56 Airthrie Road

**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.

This inspection was undertaken to check that the provider had made improvements to meet legal requirements after our 18 November 2015 inspection. We inspected the service against two of the five questions we ask about services: Is the service safe and is the service effective? This is because there were not always sufficient numbers of staff to meet people's needs and to keep them safe and there was a lack of regular supervision and appraisals for staff. This inspection took place on 8 June 2016 and was announced.

Before our inspection we reviewed information we held about the service and the provider such as the action plan the provider submitted setting out how they would become compliant with the breach identified at the previous inspection.

During the inspection we spoke with the registered provider and the monitoring officer who manages the service when the registered provider is not around. We were unable to speak to people who used the service as one person was not well, another person did not want to be disturbed and the other two people were out in the community. We looked at four staff supervision records and staff rota for the past two weeks.

After the inspection people, we spoke with two members of staff and one relative.

## **Requires Improvement**

## Is the service safe?

## Our findings

The relative told us they were happy with the care and support being provided at the service. They said, "The staff are very good and caring, they are marvellous."

People were cared for in an environment which was well maintained and appropriate health and safety checks were carried out. However during our inspection we noted that the shower heads in two bathrooms could drop below the water level when the baths were in use and could create a backflow [an unwanted flow of water in the reverse direction]. This could be a serious health risk for the contamination of potable water which people and staff consumed.

This was a breach of Regulation 15 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

The registered provider told us they were not aware of the risk. They said that they would take immediate action to rectify the situation and would inform us when the work had been completed.

At the last inspection in November 2015 we found a breach of the regulation in relation to the number of staff working at the service. We were concerned there was only one staff member on duty at all times especially during day time. We raised our concerns with the registered provider who agreed with us that more staff were needed in the service. They advised they were already in contact with the placing authorities regarding increasing the funding of people so that they could employ more staff.

During this visit we looked at the staff rota for the last two weeks and found there were enough staff to meet the needs of the people living at the service. Relative commented they felt there were enough staff were around to respond to people when they needed support. Staff told us they felt there were enough staff working in the service to meet the needs of people. One staff said, "Yes we do have enough staff on duty." There were systems in place to adjust staffing levels for example more staff would be working when they needed to support people to go into the community. People's needs were responded to in a timely manner and support was provided to people as per their individual needs.

## **Requires Improvement**

## Is the service effective?

## Our findings

People were supported by staff who had been given training and development to carry out their role. Staff told us they received the support they needed to carry out their duties through one to one meeting. One staff said, "I do have regular supervision and the last one was two weeks ago."

At the last inspection in November 2015 we found a breach of the regulation in relation to staff not being appropriately supported through supervision. We noted staff had not been having regular supervision sessions and there was no evidence of appraisals. We looked at three staff files and saw only one supervision record in two of them dated 19 November 2014 and 4 June 2015 respectively and in the other there was none. This meant that the registered provider was not regularly assessing and monitoring the staff's ability to meet people's needs.

During this visit we looked at four staff records and saw staff received regular supervision and support which helped to ensure they were able to provide effective care. Staff told us they felt well supported in their role and that discussions in supervision covered their goals, training, personal matter which could be affecting their performance and any concerns they might have about people using the service or in general. One staff said, "We discuss a lot of enough for example training, or any areas where I need to improve." We looked at some supervisions records and saw they were very detailed and include information about the discussion that took place. This indicated that the registered provider regularly assessed and monitored the staff's ability to meet people's needs.