

Enhanceable EnhanceAble Space

Inspection report

221A Malden Rd New Malden Surrey KT3 2TW Tel: 020 8288 0225 Website: www.enhanceable.org

Date of inspection visit: 27 July 2015 Date of publication: 04/09/2015

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	

Overall summary

This announced inspection took place on 26 July 2015. We told the provider two days before our visit that we would be coming. We did this because the service is small and the manager and/or deputy are often out of the office supporting people or staff in the community. We needed to be sure that they would be in.

EnhanceAble Space is a respite care service that offers support and activities during the day and accommodation overnight. It provides accommodation for up to five people and support services for up to eight people with learning and physical disabilities. There were six people receiving daycare services and of those people, two were receiving overnight accommodation at the home on the day we visited.

This is the first inspection for this service since it was registered on 28 April 2014.

The service had a manager at the time of the inspection, this person had applied to the Care Quality Commission (CQC) to be registered . A registered manager is a person who has registered with the CQC to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting

Summary of findings

the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run. The manager was on leave on the day of our visit but we met with the deputy manager and the Chief Executive Officer (CEO), who was a former manager for this service.

People were safe at the home. The provider took appropriate steps to protect people from abuse, neglect or harm. Care plans showed that staff assessed the risks to people's health, safety and welfare. Where risks were identified management plans were in place.

We saw that regular checks of maintenance and service records were conducted. A recent food standards agency inspection gave the kitchen a rating of five. These checks helped to ensure the home and any equipment used was safe.

We observed that there were sufficient numbers of qualified staff to care for and support people and to meet their needs. We looked at staff files and saw the provider had followed their recruitment procedures to ensure that only suitable staff were recruited to work with people.

People were supported by staff to take their medicines when they needed them and records were kept of medicines taken. Medicines were stored in locked cupboards. The checks the provider made and the safe storage of medicines helped to ensure that people were safe from medicines errors.

Staff had the skills, experiences and a good understanding of how to meet people's needs. People were cared for by staff who received appropriate training and support. Staff spoke positively about the support they received from the manager, the deputy and CEO and through training.

The service had taken appropriate action to ensure the requirements were followed for the Mental Capacity Act 2005 (MCA) and Deprivation of Liberty Safeguards (DoLS). These safeguards ensure that a service only deprives someone of their liberty in a safe and correct way, when it is in their best interests and there is no other way to look after them.

EnhanceAble Space was based in a large house with rooms on two floors including two fully accessible en-suite bedrooms.There was a sensory room that could also be used as a quiet chill out space and a large garden with a sunken trampoline. We saw that people could choose which area of the house they would like to be in and staff assisted them to do this.

People were supported to eat and drink sufficient amounts to meet their needs. We saw meals were prepared according to people's wishes on the day the person visited.

Staff took appropriate action to ensure people received the care and support they needed from healthcare professionals. This helped to ensure people needs were met in the most appropriate way.

All the bedrooms were en-suite and unoccupied bedrooms could be used by a person during the day. This flexibility in the use of the rooms meant that people could choose where they wanted to be and how they wanted to spend their time.

People were supported by caring staff. We saw people were happy being around the staff and relaxed in answering our questions. People could choose which days and times they came to the house, sometimes when they knew their friends would also be there and this made for a very sociable time.

We observed when providing personal care this was done in the privacy of the bedrooms or bathrooms. This was done to ensure people's privacy and uphold their dignity.

People's needs were assessed and information from these assessments had been used to plan the support they received. This was all explained to the person in an easy to understand way.

Support plans were in an easy read format, written in the first person and comprehensive in their content. The support people received was tailored to their individual needs and was designed to be adaptable to the person on the day. This flexibility and awareness of a person's individual needs helped to ensure that people received the support they needed.

People could choose individually what activities they would like to do and how they would like to spend their time at the service and staff supported people to do these activities. Staff said the service was flexible and could accommodate a person's change of mind at any time.

Summary of findings

The provider had arrangements in place to respond appropriately to people's concerns and complaints. People said they felt happy to speak up when necessary.

We could see that people who used the service knew who all the staff were by name and could freely chat with them at any time.

The service was led by a manager, and supported by a deputy manager and the CEO. It was clear they had a good understanding of their management role and the provider's legal obligations with regard to CQC including the requirements for submission of notifications of relevant events and changes.

The service had policies and procedures in place and these were readily available for staff to refer to when necessary. Regular team meetings took place and staff discussed respecting people's dignity, policy and procedure changes or updates and improvements that could be made. These meetings gave the staff team an opportunity to share information and knowledge.

The provider had systems in place to assess and monitor the quality of the service. They conducted monthly health and safety checks of the home including the environment, people's rooms and equipment.

The provider organised a one day staff conference to give staff the opportunity to think how they could support people as individuals and work together as a team.

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. Staff were knowledgeable in recognising signs of potential abuse. Risk assessments were undertaken to establish any risks present for people who used the service, which helped to protect them.	Good
There were sufficient numbers of skilled staff to ensure that people had their needs met in a timely way. The recruitment practices were safe and ensured staff were suitable for their roles.	
We found the registered provider had systems in place to protect people against risks associated with the management of medicines; appropriate arrangements for the recording, safe administration, storage were in place.	
Is the service effective? The service was effective. Staff had the skills and knowledge to meet people's needs and preferences. Staff were suitably trained and supported for their caring role and we saw this training put into practice.	Good
People were supported to eat and drink sufficient amounts of their choice to meet their needs.	
Staff took appropriate action to ensure people received the care and support they needed from healthcare professionals.	
The service had taken the correct actions to ensure that the requirements of the Mental Capacity Act 2005 (MCA) and Deprivation of Liberty Safeguards (DoLS) were followed.	
Is the service caring?	Good
The service was caring. We observed staff treated people with dignity, respect and kindness.	
Staff were very knowledgeable about people's needs, likes, interests and preferences.	
People were listened to and there were systems in place to obtain people's views about their care. People were encouraged and supported by staff to be as independent as possible.	
Is the service responsive? The service was responsive. People were treated as individuals. Assessments were undertaken to identify people's needs and these were used to develop support plans for people.	Good
People were supported by staff to access social, leisure and recreational activities that were important to them.	
People we spoke with told us they felt able to raise concerns and would complain if they needed to	
Is the service well-led? The service was well-led. A manager and deputy were in place who promoted good standards of care and support for people to promote people's quality of life.	Good

Summary of findings

Staff told us they felt well supported by the manager and deputy who were approachable and listened to their views. The ethos of the home was positive; there was an open and transparent culture.

Staff understood the management structure in the home and were aware of their roles and responsibilities.



EnhanceAble Space

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 took place on 26 July 2015 and was announced. It was carried out by one inspector. Before the inspection, we reviewed information we had about the service such as notifications the service were required to send to the Care Quality Commission (CQC). During this inspection we spoke with four people living at the home. Not everyone was able to verbally answer our questions, but with the help of staff, sign language and a person's reaction to our questions we were able to understand their answers. We also spoke to three care staff, the deputy manager and the Chief Executive Officer (CEO) for the company EnhanceAble. We observed care and support in communal areas.

We looked at the care records for four people. We reviewed the medicines records for all the people using the service, the training and staff supervision records for all the staff and personnel files for three of the staff employed at the home. We also looked at other records that related to how the home was managed including the quality assurance audits.

Is the service safe?

Our findings

People were safe at the home. One person used sign language to say that staff were kind. Another person said about staff, "Good to me." Comments taken from the last survey for people using the service stated, "Space [EnhanceAble Space] is very safe, my safety comes first" and "Staff listen, I know I am safe."

The provider took appropriate steps to protect people from abuse, neglect or harm. Training records showed staff had received training in safeguarding adults at risk of harm. Staff knew and explained to us what constituted abuse and the action they would take to protect people if they had a concern about them. There were policies and procedures available to staff which set out how they should do this. One staff member said, "It's very comfortable here, really safe."

Care plans showed that staff assessed the risks to people's health, safety and welfare. Records showed that these assessments included all aspects of a person's daily life. Where risks were identified management plans were in place and this included managing risks associated with equipment that was used in the home. One management plan highlighted a person's risk of choking when eating and the practical steps staff should put in place to minimise the risk of this occurring.

The main door to the home opened onto a front garden and car parking area and then on to a busy road. We saw there was a gate from the garden to the road which could only be opened by staff and the main door was kept locked to protect people from the dangers of the busy road. But we saw the code for the door was kept nearby and if a person wanted to go out staff would assist them to do so. This meant that people were not being unduly restricted.

We saw that regular checks of maintenance and service records were conducted. Fire safety equipment and systems were checked weekly and fire drills conducted every three months. Staff told us because of the complexity of people's disabilities it was not always safe to conduct a full evacuation practice of the building but that staff simulated what they needed to do in order to keep people safe.

The water temperature from hot water taps and showers were tested weekly to ensure the temperature range was within a safe limit to avoid people being scalded by hot water and action taken if a fault was found. Action was taken to avoid the build-up of limescale in water outlets and the potential hazard of Legionella bacteria, (Legionella is a water borne disease).

A recent food standards agency inspection in March 2015 gave the kitchen a rating of five, where one is the poorest score and five the highest score. The temperature of cooked food and the fridge and freezer temperatures were monitored daily. We saw that the kitchen was visibly clean and the equipment well maintained. These checks helped to ensure the home and any equipment used was safe and helped to keep the environment and people safe.

We observed that there were sufficient numbers of qualified staff to care for and support people to meet their needs. There were five people using the service and five members of staff on duty, plus the deputy manager and the chief executive officer, all of whom worked with people throughout the day. The manager was on annual leave on the day of our visit.

The majority of people were receiving one to one support and we observed that people were happy with this arrangement and that some games people were playing involved several staff and people. We looked at three staff files and saw the provider had followed their recruitment procedures to ensure that only suitable staff were recruited to work with people. Files contained a completed application form, two references and a copy of a criminal records check.

People could use the services of EnhanceAble Space for day time and weekend breaks, overnight or longer stays and brought with them their own medicines, in blister packs. People were supported by staff to take their medicines when they needed them and records were kept of medicines taken. Only staff trained in medicines awareness were allowed to support people with their medicine needs. Medicines were stored in locked cupboards and regular checks were made of the medicines storage and procedures. We looked at all the medicine administration records (MAR) and saw that these had been completed correctly. These checks and the safe storage of medicines helped to ensure that people were safe from medicines errors.

We saw the home was clean and free of malodours. Staff told us that as well as their caring duties they also cleaned

Is the service safe?

people's rooms and the communal areas including bathrooms and toilets. We saw there was a rota for cleaning the home for both day and night staff and staff had to sign to say they had completed the task.

Is the service effective?

Our findings

Staff had the skills, experiences and a good understanding of how to meet people's needs. We asked one person who lived in the home what was the best thing about EnhanceAble Space and they said "The staff, me being in charge, doing what I want to do."

People were cared for by staff who received appropriate training and support. Records showed staff had attended training in safeguarding adults, awareness of Asperger`s Syndrome, and autism, respecting professional boundaries and diversity. Staff spoke about the training they had received and how helpful it had been in helping them understand the needs of people they supported. Support for people was conducted in three main areas that were adjacent to one another and this meant that staff could be observed in their support practice and assistance given to them if needed.

The home had a team of 12 staff, some of whom also worked for "EnhanceAble Living" a domiciliary care service operated by the same provider. Team meetings were held every two/three months but staff had the opportunity to speak to a manager or the CEO at any time. We saw records that confirmed one to one supervision took place every eight weeks plus a yearly appraisal. Staff spoke about the induction process they had gone through and how they felt it had been long enough to give them a good feel for the job before they started working with people. They spoke about shadowing staff to ensure they understood the needs of people using the service and how best to support them.

Staff spoke positively about the support they received from the manager, the deputy and CEO and through training. Staff described the home as, "A great environment, other staff are very helpful," and "Best job I've ever had, staff are very helpful in knowing people and helping you," and "There hasn't been a day when I haven't laughed."

The service had taken appropriate action to ensure the requirements were followed for the Mental Capacity Act 2005 (MCA) and Deprivation of Liberty Safeguards (DoLS). These safeguards ensure that a service only deprives someone of their liberty in a safe and correct way, when it is in their best interests and there is no other way to look after them. The deputy manager explained and we saw records confirming they had carried out mental capacity assessments for all the people who were supported at the service. This was to assess whether a person could safely access the community on their own. These assessments had been sent to the local authority for verifying as to whether a DoLS application was needed. We saw that staff encouraged people to make their own decisions and gave them the time and support to do so. The provider had policies and procedures which provided them with clear guidance about their duties in relation to the MCA and DoLS.

Comments about the food at EnhanceAble Space taken from the service users survey said 'It is good food here. I go shopping and choose my dinner,' and 'Nice food. I can choose what I want each day.' We heard staff asking people what they would like to eat for lunch and ensuring people had their choice of food. People were supported to eat and drink sufficient amounts to meet their needs.

Because this is a flexible support respite service and people choose when they are going to attend, meals are not planned in advance. We saw meals were prepared according to people's wishes on the day the person visited. The CEO said they knew people well and what was their favourite food and ensured that they had sufficient food in stock to cater for people's choices. They said that if a person wanted something they didn't have then a member of staff would go to the shops and buy what the person would like. People could choose to eat out at a restaurant and staff would accompany them. We saw that people could join in with cooking meals if they wanted to and could make their own drinks with help from staff when needed.

Detailed records of the care, support and activities people received were kept. Details included information about people's general health and wellbeing, the activities they have participated in and any and medical needs they had. Staff took appropriate action to ensure people received the care and support they needed from healthcare professionals. Staff told us that the community nurse, the speech and language therapist (SALT) and the physiotherapist come to EnhanceAble Space to give advice and training to staff. This helped to ensure people needs were met in the most appropriate way.

The home provided a suitable environment to meet people's needs. EnhanceAble Space was based in a large house with rooms on two floors. En-suite bedrooms were on both floors, with a kitchen/dining room, a large sitting

Is the service effective?

room, a separate toilet and a sensory room that could also be used as a quiet chill out space on the ground floor. The house had a large garden with games and a sunken trampoline. We saw that people could choose which area of the house they would like to be in and staff assisted them to do this.

All the bedrooms were en-suite with either a shower or bath. Rooms were nicely decorated and varied in design. One room had a double bed so that if needed a couple could stay together. One room was simply furnished and decorated. The CEO said this was because they had one person with very specific needs that could be best met in this type of room. Unoccupied bedrooms could be used by a person during the day for personal care, to have a shower or bath or to rest. We saw that one of the bedrooms was being used by one person as a play space, with a game of hide and seek taking place with staff and visitors joining in. This flexibility in the use of the rooms meant that people could choose where they wanted to be and how they wanted to spend their time.

Is the service caring?

Our findings

People were supported by caring staff. One person said "I'm happy to be here." People responded with smiles and laughter when asked if the staff were kind and caring. A comment taken from the service users' survey said about staff, 'Lovely people, I like them very much. We have a laugh together...if you can't laugh you'll be sad.' This showed us that people were happy being around the staff and relaxed in answering our questions.

This was a new service but some of the staff had worked with people before through the EnhanceAble Living domiciliary care service and this meant that many of the staff knew people well. Staff told us they had read peoples support plans, had spoken to people's families, had spoken to other staff and observed support being given and this helped them to get to know a person.

We saw an example of this when a person became upset about something that had happened when they were younger, staff were able to comfort and reassure them because they knew about their background. This meant people were relaxed with staff who knew and cared for them.

We asked staff how they knew for people who had limited communication skills whether they were happy receiving the service or with the activity they were engaged in. One staff member said, "You try lots of different things and watch a person carefully for any signs that they are happy. One person always holds my hand when they are happy and smiles." They went on to explain when the person is smiling or laughing you know you are doing the right thing and can try that again. Another staff member said, "If it feels right and people are happy then it feels like fun."

One staff member told us because the majority of the people who came to EnhanceAble Space were under 30 years old and as staff were also young they could often find a common bond, similar taste in music, outings, things to do. They said this made the place a real home from home.

People could choose which days and times they came to the house. Some people booked themselves in on a regular day each week, sometimes when they knew their friends would also be there. Staff said this made for a very sociable time for people and some people would stay over night and go to school or college from the service.

Staff enabled people to make decisions by taking the time to explain things to people and to wait for the person to make a decision. Staff used various methods to help the person understand information and make decisions such as showing them the actual choice of food or drinks or pictures. People also used and IPad or Makaton signing to help them communicate. This helped to ensure people received the support they wanted.

We saw and heard staff speaking quietly with people when discussing their personal needs. Staff encouraged people to think about their own personal care and how they could manage this themselves. We observed when staff provided personal care this was done in the privacy of the bedrooms or bathrooms. This was done to ensure people's privacy and to uphold their dignity.

Is the service responsive?

Our findings

People's needs were assessed and information from these assessments had been used to plan the support they received. Staff from EnhanceAble Space would visit a person at home to assess their support needs including the person's health, their ability to consent to support, the level of their personal care needs and their social needs.

This was all explained to the person in an easy to understand way, staff did this by talking to the person about the process and the relevant stages. The next step would be for the person to visit the service; they could join in an activity or have a meal. The process of integrating a person into the service could take some time, even several months. This gave staff the chance to see if the person was settling in ok and if they were getting along with other people at the service. Staff told us that several people went to the same school or college and this gave them an opportunity to meet up in a non-educational setting to have fun and play games.

Support plans were in an easy read format, written in the first person and comprehensive in their content. They had considered who the person was, their background, knowledge and wishes of how they would like to be supported. The support people received was tailored to their individual needs and was designed to be adaptable to the person on the day, to help build a person's confidence in their everyday life. We could see that people, their families, and other healthcare professionals had been involved in the development of the support plans and where people were able to they had signed their support plan. The deputy manager told us and we saw evidence in the care plans that once a person had started to use the support services their needs may change and staff would reassess the support given in line with the person's developing needs.

EnhanceAble Space was also able to offer emergency accommodation at short term notice. In these cases they would gather as much information as possible about the person from other services and then assess the person once they were at the home. This flexibility and awareness of a person's individual needs helped to ensure that people received the support they needed.

Each support plan detailed a person's likes and dislikes, how they communicated, their skills and daily activities. Plans outlined a person's disability and how this affected the support they needed and the personal goals they wanted to achieve.

People were spoken to individually about what activities they would like to do and how they would like to spend their time at the service and staff supported people to do these activities. We heard from one person about the swimming pool they had visited and the water slides they had gone down and on another occasion when they had gone cycling in the park. The person was excited to tell us about these events and how much they had enjoyed them. We saw that some people were having an arts and crafts session and were making pictures to display around the house. Another person with a member of staff was watching a television programme especially designed for people with a learning disability, which they were able to join in with.

In response to a person's request an activity board was on display in the main hall. This detailed who was visiting that day and what activities they were going to participate in. Staff told us and we saw that people could look at the board and see another activity that was happening and change their mind as to what they would like to do. Staff said the service was flexible and could accommodate a person's change of mind at any time.

The provider had arrangements in place to respond appropriately to people's concerns and complaints. There was an easy read version of the complaints procedure and people told us they knew who to make a complaint to and said they felt happy to speak up when necessary. We saw there were no recent complaints logged in the complaints file and the deputy manager told us that any concerns people had, whether about the home, the environment, staff or other people were dealt with promptly and this helped to stop the concern becoming a complaint.

Is the service well-led?

Our findings

We could see that people who used the service knew who all the staff were by name and could freely chat with them at any time. A comment taken from the families survey described the management as, 'Like a second parent. Very efficient, well experienced – heart in the right place.'

The service was led by a manager, who was unavailable on the day of our visit; they were supported by a deputy manager and the CEO. The deputy manager had recently taken up this role but had worked for the provider for some years. It was clear from our discussion they had a good understanding of their management role and responsibilities and the provider's legal obligations with regard to CQC including the requirements for submission of notifications of relevant events and changes.

The manager, deputy and CEO all worked at the home supporting people. This helped to ensure people were supported by staff that were involved in the running of the service and available to people when needed and managers who were aware of what was happening within the service.

The service had policies and procedures in place and these were readily available for staff to refer to when necessary. Staff said they had access to the policies and any changes were discussed at team meetings.

The CEO told us they felt their best achievement was their flexibility to deliver a tailor made, personal service based on what the person wanted. They said this had encouraged staff and people to think for themselves and this had created a great atmosphere in the home. We witnessed this ourselves, with people and staff chatting freely to one another and being adaptable to change during the day. We saw the minutes of the last two team meetings. Discussion points were the staff rotas, respecting people's dignity, policy and procedure changes or updates and discussions on people who attend the service and improvements that could be made. These meetings gave the staff team an opportunity to meet together and share information and knowledge.

The provider had systems in place to assess and monitor the quality of the service. They conducted monthly health and safety checks of the home including the environment, people's rooms and equipment. Both types of audits generated action plans detailing what actions needed to be taken and were signed off once completed.

Following on from the annual service users and family's survey the provider organised a one day conferences that everyone was invited to. Also included in the conference were users of EnhanceAble Living. The day consisted of an activity, focus groups and lunch time discussion groups. To aid communication easy read questions and surveys, Makaton signing and IPads were used. People using the service were asked for their views on the day, either with individual questionnaires or with group discussion. A comment taken from the family survey said "My life has been turned around, because of EnhanceAble, they are completely reliable."

The provider conducted a staff survey in January 2015 and following this they held a one day staff conference. The agenda of the day was based on the results of the survey, so that any concerns could be addressed and good practice celebrated. Staff said the day gave them a chance to step back and think how else they could support people as individuals and work together as a team.