

Avenues South East

# Avenues South East - 288 Shipbourne Road

## Inspection report

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## Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

# Summary of findings

## Overall summary

Avenues South East – 288 Shipbourne Road provides accommodation, care and support for up to six older people with a learning disability. Five people were using the service at the time of our inspection.

We carried out a comprehensive inspection of Avenues South East – 288 Shipbourne Road on 27 May 2016 at which we found a breach of regulation. At this inspection, we found people lived in an environment that was not always clean and well maintained. This included equipment, bathrooms, a toilet and commodes that were not clean. The garden fence had a fallen panel that needed to be repaired. A retaining wall was not secure whilst the upper patio was inaccessible due to an uneven surface.

We undertook a focused inspection on 8 March 2017 to check that the service now met the legal requirements. This report only covers our findings in relation to this. You can read the full report from our last comprehensive inspection, by selecting the 'all reports' link for 'Avenues South East – 288 Shipbourne Road' on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

At this inspection, we found the registered manager and provider had taken sufficient action to address the concerns raised at our last inspection. The provider had ensured repairs were carried out on the fence panel. The landlord who was responsible for the maintenance of the premises, flooring and the general décor of the service. They had redecorated the building to a good standard. The provider maintained the decoration of people's rooms.

The work on the retaining wall and the uneven surface on the upper patio of the garden was scheduled for July 2017. The registered manager and provider continued to work with the landlord to ensure repairs at the service were addressed in a timely manner to improve the experiences of people living at the service.

People lived in a clean environment. Staff understood and applied infection control procedures to minimise the risk of spread of infection. The cleanliness and maintenance of the service was subject to regular checks and monitoring.

## 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. The provider had ensured people had access to safe premises. The landlord was scheduled to complete the works as requested by the provider to ensure the safety of people using the service. The service had been redecorated and new furniture bought.

People were protected from the risk of infection. The premises and equipment were clean. The registered manager carried out regular checks on the cleanliness of the service and made improvements when necessary.

# Avenues South East - 288 Shipbourne 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.

We undertook a focused inspection of Avenues South East - 288 Shipbourne Road, on 8 March 2017. This inspection was carried out to check that improvements to meet legal requirements planned by the registered manager and the provider after our comprehensive inspection on 27 May 2016 had been made. We inspected the service against one of the five questions we ask about services: Is the service safe? This is because the service was not meeting some legal requirements in relation to this question.

The inspection was undertaken by one inspector. Before our inspection, we reviewed the information we held about the service. This included the registered manager and provider's action plan in relation to the shortfalls identified at our previous inspection, which set out the action they would take to meet legal requirements. We also reviewed the information we held about the service including any statutory notifications received. A statutory notification is information about important events which the provider is required to send us by law. We used this information to help us plan the inspection.

During our inspection, we spoke with three people, the registered manager, and three members of the care staff. We looked at quality monitoring arrangements including staff meeting minutes, risk assessments included environmental and premises assessments, health and safety checks and quality assurance records. We also undertook general observations around the service.

# Is the service safe?

## Our findings

At our previous inspection in May 2016, we found the premises were not always well maintained.

At this inspection of 8 March 2017, we saw the provider had taken steps to resolve the issues at the service to help people keep safe. The landlord was responsible for the premises maintenance, flooring and the general décor of the service whilst the provider maintained the decoration of people's rooms. The provider had repaired and secured part of the fence panel that had fallen down, making it safe for people. The registered manager told us and records confirmed that they had made the landlord aware of the health and safety concerns in relation to the repairs and maintenance issues identified. The landlord had now included the repairs in a planned maintenance programme for the 2017/2018 financial year and had confirmed to the registered manager that the repairs would be carried out in July 2017.

Despite this, people were not at risk as staff had guidance on how to support them to access parts of the garden that were secure. This had ensured people were not at risk of falls or trips in the garden. Furthermore, people required assistance with their wheelchairs to access the garden, which reduced further the risk of injury in the garden. People told us and records showed they were supported to access the lower section of the garden and patio during the summer for barbeques and the greenhouse to grow vegetables. Staff told us the registered manager had advised them to use the lower patio of the garden whilst they waited for the major repair works planned for the upper level. Staff confirmed to us they were aware of the risks to people because of the retaining wall and the uneven surface. Team meeting minutes confirmed the registered manager had discussed with staff about the concerns raised at our previous inspection and how staff were to support people to keep safe in the garden.

At our previous inspection in May 2016, we found the premises were in need of redecoration.

At this inspection of 8 March 2017, we found the premises were decorated and well maintained. One person showed us their room and made signs to indicate they were happy with the redecoration. The landlord had carried out the repairs needed on the inside walls and had redecorated and painted the service with matching colours. The provider had replaced two people's recliner chairs and bought new dining room furniture. These changes made the service homely and created a pleasant atmosphere for people to live in.

Repairs were carried out to improve the experience of people living at the service. Staff had a contact numbers of the landlord for reporting emergency faults such as loss of heating and routine repairs like minor plumbing leaks. The registered manager used a 'maintenance tracker' to ensure faults and repairs reported to the landlord were carried out in a timely manner. For example, a fault reported on 24 January 2017 on a damaged door was dealt with in line with the landlord's response times.

At our previous inspection in May 2016, we found equipment and premises were not always well maintained and cleaned appropriately.

At this inspection of 8 March 2017, we found the registered manager had taken action to ensure people were

living in a clean environment. A member of staff told us, "We are allocated duties for cleaning and discuss this at handover to ensure we have done that." There was a cleaning rota that highlighted areas such as the kitchen, bathrooms, toilets, communal areas and equipment that needed cleaning and the frequency. For example, commodes were to be cleaned at least once a day and after use. Cleaning records showed this was done as planned. The staff team at the beginning of each shift received hand over and the shift leader checked to ensure this had been done. Records were signed by the member of staff responsible for the cleaning to show they had carried out their task. Staff carried out deep cleaning of bathrooms every week which had kept them free from stains and odours. The registered manager carried out regular checks on the cleanliness of the home and ensured staff maintained high standards of hygiene. Where shortfalls were identified with the cleaning, the registered manager raised the issue with the member of staff and wrote in the communication to make the team aware of what needed to be done. Records of regular checks and audits of health and safety and the environment showed action was taken to maintain good hygiene standards and to reduce the risk of infection.

During our inspection, we observed the premises including people's bedrooms, communal areas, corridors, toilets and bathrooms were clean and free from odours. The broken toilet lids had been replaced and loose ones secured. We observed the radiator in the toilet was fixed and the showers had been refurbished. The clinical waste bin had been replaced and there was a new one in place and lined with the appropriate yellow bag. The registered manager had appointed a member of staff as a lead to ensure infection control concerns were identified and addressed promptly. Three team meeting minutes showed the registered manager had discussed infection control, hand-washing techniques and use of protective clothing.

People were supported by staff who understood how to minimise the risk of infection. One member of staff told us, "We use gloves and dispose any protective clothing used in a person's room to reduce the risk of cross contamination." Staff were able to tell us how they followed safe practices such as washing of hands before and after handling medicines and food and storage of raw meat and other foods in the fridge. Staff knew how to use protective equipment such as gloves and aprons when providing personal care to people. Records showed staff had received training in infection control to gain knowledge on good hygienic practices. Staff had guidance on how to clean equipment. For example, a member of staff told us they used a red cloth once and disposed it after cleaning a commode. Records confirmed this and other infection control procedures staff had to follow to keep equipment clean. We observed staff using the correct wipes in the kitchen to clean table surfaces and different colour coded mops to clean toilets and the kitchen floor. The provider had an up to date infection control policy and procedure in place which staff were aware of and had guidance on general precautions such as treating cuts, use of gloves, aprons, hand-washing and washing of soiled clothing. The registered manager ensured there were sufficient supplies of protective clothing such as gloves, aprons and hand gels for staff to use when supporting people.