

Avondalecare (Kent) Limited

Avondale House

Inspection report

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Summary of findings

Overall summary

Avondale House provides accommodation and support for up to seven people with mental health needs. The service is located in a residential area in Westgate-on Sea and is walking distance to local shops and the beach. There are good public transport links with bus stops and a train station nearby. At the time of the inspection there were seven people living at the service.

At the last inspection, the service was rated Good overall and Requires Improvement in the Safe domain.

We carried out an unannounced comprehensive inspection of this service on 28 June and 01 July 2016. A breach of legal requirements was found. After the comprehensive inspection the provider wrote to us to say what they would do to meet legal requirements in relation to the breach of Regulation 19(1)(a) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014, Fit and Proper Persons. We undertook a 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 Avondale House on our website at cqc.org.uk.

At this inspection we found the service remained Good and is now rated Good in the Safe domain.

The service had improved since the last inspection. Recruitment checks were being consistently completed to make sure staff were honest, trustworthy and reliable to work with people.

People told us they felt safe living at Avondale House and said they would speak with staff if they had any worries or concerns. They were confident that their concerns would be listened to and that action would be taken. There were enough staff on each shift to keep people safe.

Risks to people were identified and assessed and guidance was provided for staff to follow to reduce risks to people. People received their medicines safely and on time. Regular health and safety checks were carried out on the environment.

Staff knew about abuse and knew what to do if they suspected any incidents of abuse. Staff were aware of the whistle blowing policy and how to take concerns to agencies outside of the service. Staff were confident that any concerns they raised with the management team would be investigated to ensure people were kept safe.

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.

We found that action had been taken to improve safety.

Recruitment processes were followed to make sure staff employed were of good character. There were enough staff to meet people's needs.

People felt safe living at Avondale House. Risks to people were assessed and there was guidance for staff on how to reduce risks. Staff knew how to keep people safe and how to recognise and respond to abuse.

People received their medicines safely and on time. Medicines were stored, managed and disposed of safely.

Good ●

Avondale House

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 checked 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.

The inspection took place on 17 February 2017 and was unannounced. This inspection was carried out by one inspector. This was because the service was small and additional inspection staff would be intrusive to people's daily routines. The inspection was carried out to check that improvements to meet legal requirements planned by the provider after our last inspection in June 2016 had been made. We inspected against one of the five questions we ask about services: Is the service safe? This is because the service was previously not meeting one of the legal requirements.

Before the inspection the provider completed a Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. We reviewed the information included in the PIR along with other information we held about the service. We looked at previous inspection reports and notifications received by CQC. Notifications are information we receive from the service when a significant events happen, like a death or a serious injury.

We looked around all areas and grounds of the service and talked with people who lived there. Conversations took place with people in their own rooms and in communal areas. During our inspection we observed how staff spoke with and engaged with people. We spoke with four staff and the registered manager. We looked at how people were supported throughout the inspection with their daily routines and activities and assessed if people's needs were being met. We reviewed care plans and associated risk assessments. We looked at a range of other records, including safety checks, staff files and records about how the quality of the service was monitored and managed.

We last inspected Avondale House in June 2016 when a breach in regulation was identified.

Is the service safe?

Our findings

People told us they felt safe living at Avondale House and that staff supported them to keep safe and well. People said, "I feel very safe living here. I would talk to any of the staff if I was worried and they would help", "They [staff] explain things to me so I can understand and stay safe" and "I'm safe here".

At the last inspection in June 2016 the provider failed to ensure people employed were of good character and had not followed their recruitment policy. At this inspection staff files were stored securely and organised. The provider's recruitment policy was being followed. Staff files contained proof of identity, health questionnaires and equal opportunity checks. Checks to make sure staff were honest, trustworthy and reliable to work with people were completed. These checks included references and a full employment history. Disclosure and Barring Service (DBS) criminal record checks had been completed before staff began working at the service. The DBS helps employers make safer recruitment decisions and helps prevent unsuitable people from working with people who use care services. The breach in regulation found at the previous inspection had been met.

Staffing levels were constantly monitored by the registered manager to make sure there were enough staff, with the right skills, on each shift to meet people's needs and keep them safe. People told us there were enough staff and they could always speak with them when they needed to. Staff said there were consistent numbers of staff on each shift and that staffing levels were planned around what support people needed for things such as activities and appointments. The staff duty rotas confirmed there were consistent numbers of staff working each day. An on-call system was in place to make sure staff had management contact in case of an emergency.

People were protected from the risks of abuse and discrimination. Staff knew what to do if they suspected any incidents of abuse. Staff were aware of the provider's whistle blowing policy and the ability to take concerns to agencies outside of the service if they felt they were not being dealt with properly. Staff were confident the registered manager would listen to their concerns and take the appropriate action to make sure people were protected and kept safe. Staff had completed training about keeping people safe and this was confirmed by the training records. The registered manager knew what should be reported in line with current guidance. When there had been notifiable incidents these had been consistently reported to CQC and / or the local authority.

During the inspection the registered manager and staff spoke with people to give them reassurance. For example, when a person became anxious staff sat with them, talked about their worries and suggested different options to reduce their concern. The person visibly relaxed and told staff they understood and felt better. Risks were explained to people in a way they could understand. Risk assessments detailed potential risks and gave staff guidance on how to reduce risks and keep people safe. These were regularly reviewed to make sure they were up to date. People were encouraged and supported to take risks and were given relevant information so this could be done as safely as possible. For example, some people had a '12 step challenge' in place on different areas of life, such as, 'Manage relationships and build new relationships in your social circle'. People's progress was reviewed with them each week to see what they had struggled

with and what they had learnt. People's comments were positive about this system and included, "This is helping me to improve parts of my life". Staff told us this helped people safely self-manage areas of their life. Some people chose to complete the same training staff undertook to help with their safety. This included topics such as fire awareness, first aid and hand hygiene. People proudly showed us their training certificates.

Staff knew how to keep people safe and understood their responsibilities for reporting accidents and incidents to the registered manager. Any accidents, incidents or near misses were reviewed by the registered manager and, when needed, concerns were raised with the relevant authorities in line with guidance. The registered manager analysed accidents to look for any trends. When a pattern or theme was identified action was taken to refer people to health professionals, such as, community nurses and mental health specialists, for advice and to reduce further risks and keep people safe.

Each person had a personal emergency evacuation plan which set out their specific physical and communication needs, and any special equipment they needed, to ensure they could be safely evacuated from the service in an emergency. A business continuity plan contained plans in the event of a major incident, such as, a gas leak or flooding. Emergency contingency arrangements were in place for people to be moved, if needed, to keep people in a safe environment.

Regular health and safety checks were carried out on the environment. For example, electrical and gas appliances were checked to make sure they were safe and water temperatures were checked to make sure they did not exceed the recommended safe temperature.

People received their medicines safely and on time. Staff were trained in how to manage medicines safely. Staff were observed supporting people with their medicines, by the registered manager, to check they remained competent to do so. Medicines were managed, stored and disposed of safely and in line with guidance. Medicines were securely stored in a locked cupboard which met legal requirements. Medicines were checked and rotated to make sure they did not go out of date. The medicines given to people were accurately recorded. Some medicines were prescribed on an 'as and when' basis, such as pain relief. There were guidelines for staff to follow about when to give these medicines. People's medicines were reviewed by their doctor to make sure they were suitable.