

# Shine Partnerships Ltd

# Ashford Lodge

## Inspection report

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## 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

We undertook this unannounced inspection on 11 August 2015. Ashford House is a supported living service. At this inspection the service was providing care and support for 4 people with mental healthcare needs.

At our last inspection on 11 June 2013 the service was found to be meeting the regulations we looked at. The service has a registered manager. Like registered providers, registered managers are 'registered persons'. Registered persons have legal responsibility for meeting the requirements of the Health and Social Care Act and associated Regulations about how the service is run.

People who used the service informed us that they were satisfied with the care and services provided. They said that they were treated with respect and they felt safe when cared for by the service.

People's needs were carefully assessed. Risk assessments had been carried out and these contained guidance for staff on protecting people. Staff prepared appropriate and detailed care plans with the involvement of people and their representatives. The service carefully monitored people's physical and mental healthcare needs to ensure that they were well cared for and remained stable

# Summary of findings

mentally. The arrangements for the recording, storage, administration and disposal of medicines were satisfactory. The service had an infection control policy and staff were aware of good hygiene practices.

Staff had been recruited with care to ensure they were suitable and able to care for people. There was a comprehensive training programme for staff to equipped staff in their roles. Staff had the necessary support and supervision from their manager and managing director. The registered manager and her staff knew how to recognise and report any concerns or allegations of abuse.

There were enough staff to meet people's needs. We noted that there was no buzzer or alarm that staff could use when they needed to summon assistance in an emergency. The provider responded promptly and ordered the necessary equipment.

People's preferences were recorded and arrangements were in place to ensure that these were responded to. Staff were knowledgeable regarding the individual care needs and preferences of people. Regular reviews of care had been carried out so that people could express their views and experiences regarding the care provided. Staff supported people with their meals and encouraged them to have healthy diets.

The service responded well to the needs and choices made by people. Concerns or complaints were promptly responded to. There were comprehensive arrangements for quality assurance. Regular audits and checks had been carried out by the registered manager, senior staff and the director. We saw a record of compliments received and these indicated that people concerned were satisfied with the quality of care provided. Social and healthcare professionals informed us that the service maintained good communication with them and people received a high quality of care.

# Summary of findings

## 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. The service had a safeguarding procedure and staff had received training and knew how to recognise and report any concerns or allegation of abuse.

Risk assessments contained action for minimising potential risks to people. There were suitable arrangements for the management of medicines. There were arrangements to ensure that the service had sufficient staff to meet people's needs.

The service had an infection control policy and staff were aware of good hygiene practices.

Good



### Is the service effective?

The service was effective. People who used the service were supported by staff who were knowledgeable and understood their care needs.

People's mental and physical healthcare needs had been closely monitored and the service worked closely with professionals involved in people's care. Staff encouraged people to have healthy diets.

Staff were well trained and supported to do their work. There were arrangements for supervision and appraisals.

Good



### Is the service caring?

The service was caring. Arrangements were in place to ensure that staff treat people with respect and dignity. The service had a policy on ensuring equality and valuing diversity. People's privacy were protected.

Staff supported people in a professional and pleasant manner and were responsive to their needs. Feedback from people and social and healthcare professionals indicated that staff made effort to support people and develop positive relationships.

When needed, people's consent had been obtained and they were involved in decisions about their care and support.

Good



### Is the service responsive?

The service was responsive. Care plans were comprehensive and addressed people's individual needs and choices. People and their representatives were satisfied with the services provided.

The service carried out regular reviews of care to enable people to express their views and make suggestions. People knew how to make a complaint if they needed to. Complaints and concerns were taken seriously and promptly responded to.

Good



### Is the service well-led?

The service was well-led. The quality of the service was carefully monitored by the registered manager and managing director.

The results of a recent satisfaction survey and feedback from people and relatives indicated that there was a high level of satisfaction with the services provided.

Good



# Summary of findings

Staff were aware of the values and aims of the service and this included delivering a high quality, ensuring that people were treated with dignity and promoting their independence. Social and healthcare professionals told us that the service worked well with them and people were well cared for.

# Ashford Lodge

## 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 11 August 2015 and it was announced. We told the provider two days before our visit that we would be coming. We gave the provider notice of our inspection as we needed to make sure that someone was at the office in order for us to carry out the inspection. Two inspectors carried out this inspection.

Before we visited the service we checked the information that we held about the service and the service provider

including notifications about significant incidents affecting the safety and wellbeing of people who used the service. The provider also completed a Provider Information Return (PIR). The PIR 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. The PIR also provides data about the organisation and service.

We spoke with two people who used the service. We also spoke with four staff, the registered manager and the managing director of the service. We contacted and received feedback from three health and social care professionals.

We reviewed a range of records about people's care and the service was managed. These included the care records for three people, four recent recruitment records, staff training and induction records. We checked the policies and procedures and quality monitoring records of the service.

# Is the service safe?

## Our findings

The service had suitable arrangements in place to ensure that people were safe and protected from abuse. One person said, "I feel safe here. I have my freedom. I am happy here." Another person stated that they had been well treated by staff.

The registered manager and her staff knew the importance of safeguarding people they cared for. They had received training in safeguarding people. When asked, they could give us examples of what constituted abuse and they knew what action to take if they were aware that people who used the service were being abused. They informed us that they would report their concerns to their registered manager or managing director. They were also aware that they could report it to the local authority safeguarding department and the Care Quality Commission.

Staff were aware of the provider's safeguarding policy. The service also had a whistleblowing policy and staff said if needed they would report any concerns they may have to external agencies such as the Police or the safeguarding team.

People's needs had been carefully assessed prior to services being provided. Risk assessments had been prepared with the help of people and their representatives. These contained action for minimising potential risks such as risks associated with illicit drug use, antisocial behaviour and self neglect. Care plans had been signed by people to indicate they agreed to them. People said staff had consulted with them regarding important issues affecting their care and their consent had been obtained when it was needed.

We looked at the staff records and discussed staffing levels with the registered manager. She stated that the service

had enough staff to meet the needs of people. This was reiterated by staff and people we spoke with. People informed us that staff were able to attend to their needs and they had opportunity to speak with staff.

We examined a sample of four staff records. We noted that staff had been carefully recruited. Safe recruitment processes were in place, and the required checks were undertaken prior to staff starting work. This included completion of a criminal records disclosure, evidence of identity, permission to work in the United Kingdom and a minimum of two references to ensure that staff were suitable to care for people.

There were suitable arrangements for the administration and recording of medicines. People told us that they had received their medicines from staff. Records indicated that staff had received training on the administration of medicines and knew the importance of ensuring that administration records were signed and medicines were administered. We noted that there were no gaps in the medicines administration charts examined. There was a comprehensive policy and procedure for the administration of medicines. The home had a system for auditing medicines. This was carried out internally by the registered manager and senior staff.

The service had an infection control policy which included guidance on the management of infectious diseases. Staff were aware of infection control measures and said they had access to gloves, aprons other protective clothing. People informed us that staff observed hygienic practices and washed their hands if needed.

We noted that there was no buzzer or alarm that staff could use when they needed to summon assistance in an emergency. The provider responded promptly and ordered the necessary equipment.

# Is the service effective?

## Our findings

People who used the service informed us that staff were knowledgeable and able to support them with their healthcare and dietary needs. One person stated “If I felt unwell I would contact staff and they would contact the doctors”. Another stated that staff had provided them with guidance regarding healthy eating. A healthcare professional stated that in their experience, the service was good and the staff were knowledgeable regarding the needs of people kept them informed. A social care professional stated that the service was able to meet the complex needs of people referred to them.

The care records of people were well maintained and contained essential information regarding medical conditions and mental health needs people may have. Where agreed with people or their representatives, the service supported people to with their healthcare needs and appointments. The records of people contained evidence of recent appointments with healthcare professionals such as people’s GP and psychiatrist.

One person who had a medical condition that required a special diet informed us that staff were knowledgeable and understood his condition. We noted that staff were knowledgeable regarding the needs of this person, medicines they needed and their special dietary needs. Staff knew how to care for people with challenging or antisocial behavioural and gain their co-operation. From examining the records and feedback from professionals we noted that they had taken appropriate action to deal with difficult situations and enable people to achieve goals they set for themselves.

People informed us that they did their own shopping and could purchase food they like to eat. They also cooked their own food with support and assistance from staff when needed. They told us that they were happy with the arrangements for meals and had access to the kitchen in the supported living accommodation. Staff were aware of the importance of healthy eating and we observed that

information regarding healthy diets was on display in the reception area. Care staff were aware of action to take if a person lost a significant amount of weight. This included informing medical staff involved.

Staff had been provided with appropriate training and support. They stated that there was good team work. One staff said, “The manager is approachable. Management is understanding and they have been flexible when needed”. Another staff stated that management was supportive and the registered manager was available when they needed advise. Staff said they had received induction when they started working with the service. Regular monthly staff meetings had been held when staff could discuss the care of people and make suggestions. Records we saw indicated that staff had been provided with essential training to ensure they had the skills and knowledge to meet people’s needs. A training matrix was available and contained the names of all staff currently working at the service together with relevant training they had completed. Training included essential areas such as safeguarding people, care of people with mental health needs and the administration of medicines. Staff also confirmed that they had training in managing their personal safety and how to respond to challenging behaviour and aggression in people.

The registered manager stated that she and the managing director were always available or on call for staff should they experience difficulties or needed support. The registered manager carried out supervision and annual appraisals. Staff we spoke with confirmed that this took place and we saw evidence of this in the staff records.

The registered manager and her staff were knowledgeable regarding the Mental Capacity Act 2005 (MCA) and the Deprivation of Liberty Safeguards (DoLS). There was guidance on MCA and DoLS. These policies were needed so that people were protected and staff were fully informed about their responsibilities. The registered manager informed us that all people they were caring for had capacity to make decisions for themselves. We noted that all people in this supported living accommodation could go out unaccompanied when they chose to.

# Is the service caring?

## Our findings

People who used the service indicated that staff were caring and communicated well with them. They stated that staff were helpful and treated them with respect and dignity. One person stated, "I can talk to staff. They understand my culture. They listen to me." A second person stated, "Staff are respectful. They knock on the bedroom door before they come in." A healthcare professional stated that staff were able to form good relationships with people and sometimes staff went beyond what was expected of them in order to help people.

We observed that staff were pleasant and greeted people in a friendly manner. Staff interacted well with people and people appeared relaxed and comfortable around staff. Staff were aware that all people who used the service should be treated with respect and dignity. They were also aware of the importance of protecting people's privacy. We saw that the registered manager respected the privacy of people and knocked on bedroom doors to ask permission before entering bedrooms.

The service had a policy on ensuring equality and valuing diversity and staff had received training in this topic. It

included ensuring that the personal needs and preferences of all people were respected regardless of their background. These values were included in the induction of new staff. The care records of people contained information regarding their personal history, background, capabilities and any special needs they may have. One person stated that they bought purchase and cook food from their particular ethnic background.

People were involved in the running of the home and could express their views and participate in the deciding their care arrangements. We saw the minutes of monthly meetings and noted that people discussed with staff issues such as communal cooking with other people who used the service, activities and the management of the home. People informed us that staff had responded to suggestions they made at meetings.

People stated that they were involved in the creation of their support plans and their wishes and goals were taken into consideration and it was a joint effort in creating their care and support plans. Care plans were up to date and been signed by either people or their representatives to indicate they approved of them.

## Is the service responsive?

### Our findings

The service provided care which had been individually planned to meet the special needs and preferences of people. This was confirmed by people and staff we spoke with. People said staff discussed their abilities and hopes with them and supported them to achieve their goals as stated in their care plans. One person stated that they had been able to have a part time job locally while another stated that staff had helped them find a placement where they could do some office work.

People informed us that they were encouraged to be as independent as possible. This was confirmed by social and healthcare professionals involved. One social care professional stated that the service provided an excellent level of care and accommodation for people who used the service.

The registered manager stated that before providing care, she assessed each person and discussed their care with them and their representatives. We noted in the care records that these assessments were detailed and comprehensive. They contained information regarding people's social background, what their individual care needs were, what abilities and disabilities they had, how many staff were needed, their preferences and choices.

Individual care plans were then prepared and they addressed areas such as people's personal care, what tasks needed to be done each day, time of visits, people's nutritional needs and how these needs were to be met. The manager stated that new people who used the service were reviewed after a few weeks to ensure that the care provided met their requirements. Thereafter they were reviewed six monthly to ensure that people's changing needs were noted and any necessary adjustments made. The care package was then reviewed regularly with people and their representatives and these reviews were recorded and kept in people's files. This was evidenced in the records we examined and confirmed by people we spoke with.

Concerns were taken seriously by the service and we noted that when a serious complaint had previously been brought to the attention of the registered manager, she had responded appropriately and promptly. The service had a complaints procedure. This was on display in the reception area of the home. There was a record of complaints received. We examined a sample of recent complaints received since the last inspection. We noted that complaints we examined had all been promptly to in accordance with the procedure of the service. Staff knew what action to take if they received a complaint. They said they would inform their manager so that it could be responded to. They also stated that complaints needed to be recorded.

# Is the service well-led?

## Our findings

People informed us that the service was well managed and they received a good quality of care. One person said, “I have improved my life. It’s all perfect- no suggestions.” Another person stated that they had completed a satisfaction survey and staff had listened to suggestions made by people who used the service. A social care professional stated that it was worth paying more as the service provided was safe and staff kept them informed of people’s progress.

Audits and checks of the service had been carried out by the registered manager and the managing director of the company. These included checks on care documentation, administration of medicines, care documentation and condition of the premises.

The service had a system for improving the quality of care provided. This included an annual satisfaction survey of people and their representatives. A survey had been carried out this year. We saw that the feedback was positive. An action plan was in place to address issues and suggestions highlighted.

Records necessary for the running of the service were well maintained. Care documentation was up to date and comprehensive. The service had a range of policies and procedures to ensure that staff were provided with appropriate guidance to meet the needs of people. These addressed topics such as complaints, infection control, safeguarding and whistleblowing. Staff we spoke with were knowledgeable regarding these procedures.

The service worked well with professionals involved in the care of people and maintained good liaison with them. One healthcare professional stated that feedback from their client was positive and the service was well managed. A social care professional stated that senior staff from the service always attended meetings with them and communicated well with them.

The service held monthly meetings for care staff to ensure that staff were updated regarding management and care issues. Management and care staff were aware of their roles and responsibilities. Staff knew the values and aims of the service which included delivering a high quality service, ensuring that people were treated with dignity and promoting their independence.

The service had a record of compliments received. These compliments included the following:

“Thanks for the well organised Disney trip. It was a great experience for our service users and do thank your staff for their communication /liaison and work with our clients since their discharge from hospital.”

“I am really pleased to see my client doing so well in Ashford Lodge. I was his Social Worker and he was never that well.”

“You have made all the necessary arrangements for my client’s safety and the safety of others. I am impressed that you were willing to discuss physical alterations to the building with the landlord to ensure their needs are met.”