Care Quality Commission

# Annual service review

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| **Name of Service:** | Marion House |

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| The quality rating for this care home is: | two star good service | | | | | | | |
| The rating was made on: | | | | | | | | |

A quality rating is our assessment of how well a care home, agency or scheme is meeting the needs of the people who use it. We give a quality rating following a full review of the service. We call this review a 'key' inspection

We do an annual service review when there has been no key inspection of the service in the last 12 months. It does not involve a visit to the service but is a summary of new information given to us, or collected by us, since the last key inspection or annual service review.

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| **Has this annual service review changed our opinion of the service?** | No |

You should **read the last key inspection report for this service** to get a full picture of how well outcomes for the people using the service are being met.

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| The date by which we will do a key inspection: | | | | | | | | |

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| Name of inspector: | Date of this annual service review: | | | | | | | |
| Annie Foot | 2 | 3 | 0 | 7 | 2 | 0 | 0 | 9 |

## Information about the service

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| Address of service: | 40 The Avenue<br>Moordown<br>Bournemouth<br>Dorset<br>BH9 2UW |
| Telephone number: | 01202521985 |
| Fax number: | 01202519002 |
| Email address: | manager.mhb@prospects-uk.org |
| Provider web address: | |

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| Name of registered provider(s): | Prospects for People with Learning Disabilities | |
| Conditions of registration: | | |
| Category(ies) : | Number of places (if applicable):<br>Under 65 | Over 65 |
| learning disability | 8 | 0 |

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| Conditions of registration: |
| The maximum number of service users who may be accommodated is 8. |
| The registered person may provide the following category of service only: Care home only - Code PC to service users of either gender whose primary care needs on admission to the home are within the following category: Learning disability (Code LD) |

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| Have there been any changes in the ownership, management or the service's registration details in the last 12 months? | No |
| If yes, what have they been: | |

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| Date of last key inspection: | | | | | | | | |
| Date of last annual service review (if applicable): | | | | | | | | |

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| Brief description of the service |
| Marion House is a large detached house in a quiet residential district of Bournemouth known as Moordown. The local area includes a wide range of shops, churches and community services, and is served by local bus services. The home accommodates up to eight adults of both sexes who have learning disabilities and some additional disabilities such as visual impairment. Each resident has their own bedroom; seven are on the first floor and the eighth on the ground floor. A Day Opportunities service is attached to the property but is separated from the care home by a locked door and has |

its own entrance at the rear of the property. The home comprises of a lounge, a dining room, a quiet room, a laundry and a kitchen. There are three bathrooms with toilets, three shower rooms with toilets, and two other separate toilets. Outside there are attractive grounds that include a fountain, sensory garden and pergola.  The home is staffed 24 hours a day and there is a designated key worker for each service user. PROSPECTS have been involved in the support of people with learning disabilities since 1975 and operate various services across the U.K. It is an organisation rooted in Christian principles and the ethos of the home reflects this. There is however no requirement for anyone to engage in religious activity whilst they are supported by PROSPECTS. The weekly fees are from £750.00. For further information on fees and contracts the office of fair trading website is helpful: www.oft.gov.uk

## Service update since the last key inspection or annual service review:

What did we do for this annual service review?

We looked at all the information that we have received, or asked for, since the last key inspection which took place on 11 July 2008. This included:

The annual quality assurance assessment (AQAA) that was sent to us by the service. The AQAA is a self-assessment that focuses on how well outcomes are being met for people using the service. It also gave us some numerical information about the service. Surveys returned to us by people using the service and from other people with an interest in the service.

Information we have about how the service has managed any complaints.

What the service has told us about things that have happened in the service, these are called 'notifications' and are a legal requirement.

The previous key inspection and the results of any other visits that we have made to the service in the last 12 months.

Relevant information from other organisations.

What other people have told us about the service.

What has this told us about the service?

The home sent us their annual quality assurance assessment (AQAA) when we asked for it. It was clear and detailed and gave us all the information we asked for.

We also received 4 completed surveys from people living at the home. 2 people had received help from their key worker to complete the forms.

Everyone said they received enough information about the home before making a decision to move in. Service users say that the staff always listen to them and act on what they say. They say that their care and support needs are always met. One person reported that there is 'lots of good food - freshly cooked every day with a choice', others say the home does 'everything' well. From the surveys received it is clear that people living at the home know who to talk to if they any concerns or wish to make a complaint.

The AQAA tells us that everyone is actively involved in the running of the home. Service users are encouraged to participate in redecoration work and some of the service users have changed the style of their bedrooms.

Service users decide the meals and are involved in cooking what they are going to eat with plenty of healthy variety menus to choose from.

Activities and holidays are chosen through the house and key worker meetings. Staff tell us that a variety of activities are provided to meet individual needs and that there

is good communication between staff and residents to enable participation.

The home has an open attitude to complaints. Complaints are seen as a way of improving practice. During the last year 2 complaints were received and resolved within the procedures timescale of 28 days. 1 safe-guarding referral was received.

We received 3 completed surveys from health care professionals. One of the surveys tells us that the home responds well to advice from professionals in a timely manner, although say that 'the management does not always appear to be particularly pro-active'. Another tells us that staff 'follow needs identified in the care plan and work hard to ensure that the client receives the best possible care, and the manager keeps professionals fully informed of any changing needs for service users'.

12 care staff are employed at the, 4 are bank staff. 4 of the permanent staff have achieved an NVQ level 2 or above in care. Staff receive training during induction and ongoing training in relation to equal opportunities. Job descriptions have been reviewed during the last year. There is a full staff team in place and no permanent staff have left since May 08. Staff are allocated with specific responsibilities for specific areas of work.

Health care professionals say that staff may benefit in further training on communication with people with learning disabilities. Staff say that the working environment is 'very nice' , the residents 'are happy' and that the home ' supports all residents really well'. Several comments were received from staff appreciating the manager's regular support and helpful attitude Some staff would like see more opportunities for 1:1 working with the residents.

As a result of listening to what service users say, additional temporary waking staff are employed to meet changing needs of some service users. Service users are involved in recruitment and selection of staff by having the candidate round for dinner asking them questions and giving feedback to the interview panel.

Policies and procedures in operation at the home are regularly reviewed.

The home continues to provide a high standard of care and there is no evidence to indicate that outcomes for people who use the service have changed since the last inspection of the service.

## What are we going to do as a result of this annual service review?

We are not going to change our inspection plan, and will do a key inspection by 10 July, 2010.

However, we can inspect the service at any time if we have concerns about the quality of the service or the safety of the people using the service.

## Reader Information

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| Document Purpose: | Annual service review |
| Author: | CQC |
| Audience: | General Public |
| Further copies from: | 0870 240 7535 (national contact centre) |

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