Review of compliance

Community Homes of Intensive Care and Education Limited Heronsmede	
Region:	South East
Location address:	88-90 Straight Road Old Windsor Berkshire SL4 2RX
Type of service:	Care home service without nursing
Date of Publication:	November 2011
Overview of the service:	Heronsmede is owned and managed by Choice Ltd, and they provide personal care and accommodation for younger adults with a learning disability, some of whom have associated challenging behaviour. The home is situated on the main road in Old Windsor, with access to local shops and facilities. The home is a detached bungalow with a large

	garden and outbuildings, offering extra space for leisure activities.

Summary of our findings
for the essential standards of quality and safety

Our current overall judgement

Heronsmede was meeting all the essential standards of quality and safety but, to maintain this, we have suggested that some improvements are made.

The summary below describes why we carried out this review, what we found and any action required.

Why we carried out this review

We carried out this review as part of our routine schedule of planned reviews.

How we carried out this review

We reviewed all the information we hold about this provider, carried out a visit on 21 October 2011, checked the provider's records, observed how people were being cared for, talked to staff, reviewed information from stakeholders and talked to people who use services.

What people told us

People at this home have very individual communication needs and therefore we were not able to carry out detailed interviews with them. We did however speak with three residents, assisted by staff, and made observations throughout the day when we met most of the eight residents who live at Heronsmede.

People told us they were happy living at this home and agreed they were given choices about how they wished to spend their time. We noted positive interactions between staff and residents, with residents approaching staff for assistance when they needed support.

What we found about the standards we reviewed and how well Heronsmede was meeting them

Outcome 01: People should be treated with respect, involved in discussions about their care and treatment and able to influence how the service is run

Heronsmede has arrangements in place to ensure that people who receive assistance understand the care and support options available to them, and that they receive assistance in a respectful way.

Overall, we found that Heronsmede was meeting this essential standard.

Outcome 04: People should get safe and appropriate care that meets their needs

and supports their rights

People who live at this service have their care, treatment and support needs met. This is because the home has systems in place to ensure their care needs and preferences are assessed, that risks are managed, and that their care needs are kept under review.

Overall, we found that Heronsmede was meeting this essential standard.

Outcome 07: People should be protected from abuse and staff should respect their human rights

People feel safe living at this service and staff are trained and should be able to respond appropriately if it is suspected that any abuse has occurred.

Overall, we found that Heronsmede was meeting this essential standard.

Outcome 08: People should be cared for in a clean environment and protected from the risk of infection

We found Heronsmede to be clean and fresh throughout, and they had suitable arrangements in place to maintain good hygiene and prevent the spread of infection.

Overall, we found that Heronsmede was meeting this essential standard.

Outcome 14: Staff should be properly trained and supervised, and have the chance to develop and improve their skills

Residents at this home have their health and welfare needs met by staff who are properly trained and supported in their roles.

Overall, we found that Heronsmede was meeting this essential standard.

Outcome 16: The service should have quality checking systems to manage risks and assure the health, welfare and safety of people who receive care

People who live at this home benefit by the quality assurance arrangements which ensure they get effective care, treatment and support. However, further improvements are needed to ensure that any shortfalls in service quality are identified and remedied in a timely way.

Overall, we found that Heronsmede was meeting this essential standard, but to maintain this, we suggested improvements were made.

Actions we have asked the service to take

We have asked the provider to send us a report within 28 days of them receiving this report, setting out the action they will take to improve. We will check to make sure that the improvements have been made.

Where we have concerns we have a range of enforcement powers we can use to protect the safety and welfare of people who use this service. When we propose to take

enforcement action, our decision is open to challenge by a registered person through a variety of internal and external appeal processes. We will publish a further report on any action we have taken.

Other information

Please see previous reports for more information about previous reviews.

What we found for each essential standard of quality and safety we reviewed

The following pages detail our findings and our regulatory judgement for each essential standard and outcome that we reviewed, linked to specific regulated activities where appropriate.

We will have reached one of the following judgements for each essential standard.

Compliant means that people who use services are experiencing the outcomes relating to the essential standard.

A **minor concern** means that people who use services are safe but are not always experiencing the outcomes relating to this essential standard.

A **moderate concern** means that people who use services are safe but are not always experiencing the outcomes relating to this essential standard and there is an impact on their health and wellbeing because of this.

A **major concern** means that people who use services are not experiencing the outcomes relating to this essential standard and are not protected from unsafe or inappropriate care, treatment and support.

Where we identify compliance, no further action is taken. Where we have concerns, the most appropriate action is taken to ensure that the necessary improvements are made. Where there are a number of concerns, we may look at them together to decide the level of action to take.

More information about each of the outcomes can be found in the *Guidance about compliance: Essential standards of quality and safety*

Outcome 01:
Respecting and involving people who use services

What the outcome says

This is what people who use services should expect.

People who use services:
* Understand the care, treatment and support choices available to them.
* Can express their views, so far as they are able to do so, and are involved in making decisions about their care, treatment and support.
* Have their privacy, dignity and independence respected.
* Have their views and experiences taken into account in the way the service is provided and delivered.

What we found

Our judgement

The provider is compliant with Outcome 01: Respecting and involving people who use services

Our findings

What people who use the service experienced and told us
People who were able to answer this question agreed that staff were nice to them, and that they liked living at this home.

Other evidence
We spoke with, and gave questionnaires to three staff members. We had further conversations with other staff and made observations of staff and resident interactions during our visit.

Staff told us that they ensured people's privacy and dignity was respected by ensuring they followed care plans and service user guidelines. They gave examples of how they treated residents with respect, for example knocking on doors before entering. Care plans contained sections entitled 'What do other people like and admire about me' and 'What is important to me'; this ensures residents' individual personal qualities and preferences are taken into account by others.

We observed that staff treated people respectfully and promoted their independence. The guidelines we saw in people's care plans were, as far as we could tell, being followed. People had been given choices and had had their preferences taken into account. Some residents at this home have challenging behaviours and staff were

knowledgeable on individual resident's needs; we saw that they managed some potentially difficult situations very sensitively during our visit.

Our judgement
Heronsmede has arrangements in place to ensure that people who receive assistance understand the care and support options available to them, and that they receive assistance in a respectful way.

Overall, we found that Heronsmede was meeting this essential standard.

Outcome 04:
Care and welfare of people who use services

What the outcome says

This is what people who use services should expect.

People who use services:
* Experience effective, safe and appropriate care, treatment and support that meets their needs and protects their rights.

What we found

Our judgement

The provider is compliant with Outcome 04: Care and welfare of people who use services

Our findings

What people who use the service experienced and told us
People who were able to answer questions about their care agreed that they were happy with the care they received at Heronsmede, and said they were given choices in their daily lives.

Other evidence
Staff told us that they were involved with people's care plans. We saw, on the three care plans we sampled, that these were signed by each member of staff to ensure everyone was familiar with the individual preferences of each resident. There were communication passports in place for each resident to ensure staff could engage with them effectively. We saw risk assessments and management plans to support staff in dealing with resident's challenging behaviours; this ensured a safe environment for both staff and residents.

Care plans contained goals which residents were working towards, and we saw that these plans had been regularly reviewed. We saw detailed information about how resident's health needs were identified and met. For example, one person whose health needs required a medical examination had a specialist plan in place, including a record of how this subject had been broached and explained to the resident to help them through the process.

Our judgement
People who live at this service have their care, treatment and support needs met. This is because the home has systems in place to ensure their care needs and preferences

are assessed, that risks are managed, and that their care needs are kept under review.

Overall, we found that Heronsmede was meeting this essential standard.

Outcome 07:
Safeguarding people who use services from abuse

What the outcome says

This is what people who use services should expect.

People who use services:
* Are protected from abuse, or the risk of abuse, and their human rights are respected and upheld.

What we found

Our judgement

The provider is compliant with Outcome 07: Safeguarding people who use services from abuse

Our findings

What people who use the service experienced and told us
Those people who were able to answer the question about safety, agreed that they did feel safe living at Heronsmede.

Other evidence
Safeguarding adults had been taken seriously at this home. CQC records showed that even minor concerns were reported to the local authority, according to the home's own policy, which dovetails with the local authority's safeguarding adults' procedures. Training records confirmed that staff had attended safeguarding of vulnerable adults training, and this enabled them to understand the aspects of safeguarding which are relevant to them.

Staff who completed our questionnaire showed they had a good knowledge of safeguarding people from abuse. Staff knew how to recognise the signs of abuse and knew that they must report all cases of concern to the appropriate person.

The manager confirmed that they worked collaboratively with the local authority to safeguard and protect the welfare of people who used the service by reporting any concerns and attending any safeguarding meetings. We checked this with the local authority and were told that this was the case; we were also told there were no outstanding safeguarding adults' investigations relating to this home.

Our judgement
People feel safe living at this service and staff are trained and should be able to

respond appropriately if it is suspected that any abuse has occurred.

Overall, we found that Heronsmede was meeting this essential standard.

Outcome 08:
Cleanliness and infection control

What the outcome says

Providers of services comply with the requirements of regulation 12, with regard to the Code of Practice for health and adult social care on the prevention and control of infections and related guidance.

What we found

Our judgement

The provider is compliant with Outcome 08: Cleanliness and infection control

Our findings

What people who use the service experienced and told us
People who were able to answer our question about whether the home was kept clean and fresh, agreed that it was, and we noted some residents assisted staff, for example in keeping their own bedroom clean.

Other evidence
We looked in the communal areas, including the new walk-in shower room, and in one bedroom. We found the home to be clean and fresh throughout with no unpleasant odours. Staff told us they were responsible for the cleaning. We saw that there were cleaning schedules and records in place to show what needed doing, and staff signed to confirm when this had been done. We saw personal protective clothing was available for staff, and there were good hand washing facilities throughout the home.

The manager had a copy of the latest version of the Department of Health's Hygiene Code, and told us she was the designated person for managing hygiene and infection control at the home. The home had its own policy and procedure in place, and we were told this was due to be reviewed and would include reference to more recent legislative changes. Discussions with the manager and area manager identified that they needed to do some more work on recording how they were monitoring the environment and this is discussed further under outcome 16.

Following this inspection we were sent details of a hygiene and infection control audit tool that the home had introduced following our visit. We were also sent a copy of their annual infection control statement which showed that 80% of staff were up to date with their training, and that there was a rolling programme of training at the home.

Our judgement
We found Heronsmede to be clean and fresh throughout, and they had suitable arrangements in place to maintain good hygiene and prevent the spread of infection.

Overall, we found that Heronsmede was meeting this essential standard.

Outcome 14:
Supporting staff

What the outcome says

This is what people who use services should expect.

People who use services:
* Are safe and their health and welfare needs are met by competent staff.

What we found

Our judgement

The provider is compliant with Outcome 14: Supporting staff

Our findings

What people who use the service experienced and told us
People were not able to comment on whether staff were well trained for the work they were being asked to perform, but those residents we spoke with and observed showed they had confidence in the staff who were supporting them.

Other evidence
The home had a central training record in place, and the manager completed a monthly management report to head office on the progress with staff training. Any shortfalls were recorded, together with any remedial action. We noted that most staff were up to date with their training relating to safeguarding adults, infection control, and medication training.

We were told that there was a rolling programme of training in place to ensure all staff were appropriately trained. The company provides more specialist courses for staff, mainly relating to the needs of residents, for example training relating to epilepsy and autism. The company also provides training and development opportunities for people who wish to advance into management positions within the company. The programme is designed to equip people with the right skills and knowledge to become managers or deputy managers.

The three staff we spoke with had all completed NVQ qualifications in care, and on their questionnaires they reported that they felt sufficiently well trained for their current roles. Some had done training in specialist communication tools such as Makaton, and all had completed training in positive approaches to behaviour management.

During this inspection we noted a number of instances where staff were seen to be putting this training into practice. Staff had a good understanding of individual resident's communication needs. We observed that they knew how to manage potentially risky situations when these arose due to the sometimes unpredictable behaviour of residents.

Our judgement
Residents at this home have their health and welfare needs met by staff who are properly trained and supported in their roles.

Overall, we found that Heronsmede was meeting this essential standard.

Outcome 16:
Assessing and monitoring the quality of service provision

What the outcome says

This is what people who use services should expect.

People who use services:
* Benefit from safe quality care, treatment and support, due to effective decision making and the management of risks to their health, welfare and safety.

What we found

Our judgement

The provider is compliant with Outcome 16: Assessing and monitoring the quality of service provision

Our findings

What people who use the service experienced and told us
People we spoke with were not able to comment on the overall quality of the service but did tell us they liked living at this home, and they enjoyed the facilities, for example the summerhouse.

Other evidence
The manager outlined the company's quality assurance processes. This included monthly management reports on issues such as an up-date on the welfare of each resident, any safeguarding adults' referrals or complaints, and a review of staffing. We were told that the area manager then used this report when he carried out his monthly visit to each home. We also saw user satisfaction surveys, and evidence of some auditing and checking to ensure that the service is running well.

However, there were some areas where there appeared to be gaps in monitoring the service, for example there was no environmental audit to check that hygiene and infection control procedures were being followed, and there was no documented auditing of care plans which would have identified some areas for improvement with regard to key worker meetings with residents. The manager and area manager subsequently sent us copies of new auditing tools that they intended to use to address both these issues; they also said that they would review their quality assurance arrangements to see if further improvements were needed.

Our judgement
People who live at this home benefit by the quality assurance arrangements which

ensure they get effective care, treatment and support. However, further improvements are needed to ensure that any shortfalls in service quality are identified and remedied in a timely way.

Overall, we found that Heronsmede was meeting this essential standard, but to maintain this, we suggested improvements were made.

Action
we have asked the provider to take

Improvement actions

The table below shows where improvements should be made so that the service provider **maintains** compliance with the essential standards of quality and safety.

Regulated activity	Regulation	Outcome
Accommodation for persons who require nursing or personal care	Regulation 10 HSCA 2008 (Regulated Activities) Regulations 2010	Outcome 16: Assessing and monitoring the quality of service provision
	Why we have concerns: People who live at this home benefit by the quality assurance arrangements which ensure they get effective care, treatment and support. However, further improvements are needed to ensure that any shortfalls in service quality are identified and remedied in a timely way. Overall, we found that Heronsmede was meeting this essential standard, but to maintain this, we suggested improvements were made.	

The provider must send CQC a report about how they are going to maintain compliance with these essential standards.

This report is requested under regulation 10(3) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010.

The provider's report should be sent to us within 28 days of the date that the final review of compliance report is sent to them.

CQC should be informed in writing when these improvement actions are complete.

What is a review of compliance?

By law, providers of certain adult social care and health care services have a legal responsibility to make sure they are meeting essential standards of quality and safety. These are the standards everyone should be able to expect when they receive care.

The Care Quality Commission (CQC) has written guidance about what people who use services should experience when providers are meeting essential standards, called *Guidance about compliance: Essential standards of quality and safety*.

CQC licenses services if they meet essential standards and will constantly monitor whether they continue to do so. We formally review services when we receive information that is of concern and as a result decide we need to check whether a service is still meeting one or more of the essential standards. We also formally review them at least every two years to check whether a service is meeting all of the essential standards in each of their locations. Our reviews include checking all available information and intelligence we hold about a provider. We may seek further information by contacting people who use services, public representative groups and organisations such as other regulators. We may also ask for further information from the provider and carry out a visit with direct observations of care.

When making our judgements about whether services are meeting essential standards, we decide whether we need to take further regulatory action. This might include discussions with the provider about how they could improve. We only use this approach where issues can be resolved quickly, easily and where there is no immediate risk of serious harm to people.

Where we have concerns that providers are not meeting essential standards, or where we judge that they are not going to keep meeting them, we may also set improvement actions or compliance actions, or take enforcement action:

Improvement actions: These are actions a provider should take so that they **maintain** continuous compliance with essential standards. Where a provider is complying with essential standards, but we are concerned that they will not be able to maintain this, we ask them to send us a report describing the improvements they will make to enable them to do so.

Compliance actions: These are actions a provider must take so that they **achieve** compliance with the essential standards. Where a provider is not meeting the essential standards but people are not at immediate risk of serious harm, we ask them to send us a report that says what they will do to make sure they comply. We monitor the implementation of action plans in these reports and, if necessary, take further action to make sure that essential standards are met.

Enforcement action: These are actions we take using the criminal and/or civil procedures in the Health and Social Care Act 2008 and relevant regulations. These enforcement powers are set out in the law and mean that we can take swift, targeted action where services are failing people.

Information for the reader

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