Review of compliance

Community Integrated Care (CIC) Morningside	
Region:	North West
Location address:	4 Newton Road Penrith Cumbria CA11 9FA
Type of service:	Care home service without nursing
Date of Publication:	August 2011
Overview of the service:	Morningside is a small care home for 5 people with learning difficulties. It is run by Community Integrated Care, a large national organisation, which provides a range of services to people with learning difficulties. It is a purpose built bungalow with ensuite bedrooms, and is designed to meet the needs of people who may need to use wheelchairs or have limited mobility.

	It is set on the outskirts of Penrith, and is convenient for shops and many local facilities.

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

Our current overall judgement

Morningside was meeting all the essential standards of quality and safety.

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 28 June 2011, 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 were observed speaking up and making requests from staff and this was obviously a regular occurrence that they felt comfortable with. They said they could talk to the staff and they were kind and helped them.

People have good access to other services and advocates, and they are part of the community. This means they are not isloated and it gives them opportunities to speak up and express themselves if they are unhappy or are concerned about the care they receive.

Socialworkers we contacted said they had been impressed with how the home had developed peoples involvement with the local community. They reported improved care plans which helped people to develop new skills, and that risk assessments supported people to try out new activities.
People living at the home told us about how staff had helped them to make new friends and to keep in contact with their families.

What we found about the standards we reviewed and how well Morningside 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

People are supported in a way that maximises their involvement and ensures that they have control over their lives.

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

People receive support from a skilled and experienced staff team that is appropriate to each person's individual needs and allows them to have meaningful and active life.

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

People's human rights are promoted and protected, by the policies and procedures the home has in place, and they are protected from abuse, or the risk of abuse.

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

Staff skills and knowledge are assessed and suitable training provided to support and guide their practice in promoting a good quality of life for each person living in the home.

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 receive a service which is carefully monitored and checks are in place to promote the well being of people living there.

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
Based on our discussions with people who use the service and staff, people's rights and choices are being respected, with staff having a good understanding about their role and responsibilities.
Staff were observed providing support in a sensitive and supportive manner. People were relaxed and obviously felt comfortable with the staff that were supporting them. Much of the care was carried out in a way that supported and prompted people to maintain and develop their independence.
Some behaviours that were more challenging were also handled in a way that displayed a good level of skill and understanding from the staff team. Staff were observed picking un non-verbal prompts from people as well to ensure that people were receiving the right level of support and interaction.

Other evidence
People are issued with a statement of purpose and have their needs assessed at the start of a contract. This ensures they are provided with suitable information about the aims, objectives and purpose of the service and can be confident the service can meet their individual needs. Based on these needs assessments detailed support plans are developed to guide staff in providing a personalised service. These are regularly monitored with formal reviews taking place, this includes involving the individual at all

stages appropriate to their abilities and capacity to understand. In addition daily care notes are monitored on an ongoing basis by the supervisory team ensuring issues or concerns are dealt with promptly and the standard of the service maintained.
The manager described how staff take on an enabling role by helping people to maintain their independence, which was confirmed by the people who use the service. It was clear that the views and experiences of people who use services are central to the work at Morningside and care is taken to fully explore with the person not only their views on how to live their life on a day to day basis but also to seek out their aspirations.
Risk assessments are completed as part of the initial needs assessment and on an ongoing basis when hazards are identified. Staff we spoke to confirmed they had completed risk assessment training. The service provides a 24 hour on call service to deal with emergencies and concerns as they arise.
These measures ensure that people are fully engaged with the support and care delivered to them and this maintains their dignity and respects their wishes.

Our judgement
People are supported in a way that maximises their involvement and ensures that they have control over their lives.

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
Socialworkers we contacted said they had been impressed with how the home had developed peoples involvement with the local community. They reported improved care plans which helped people to develop new skills, and that risk assessments supported people to try out new activities.
People living at the home told us about how staff had helped them to make new friends and to keep in contact with their families.

Other evidence
We saw evidence that personalised care plans are developed and agreed with the person or their representative. Feedback from people who use the service and the staff that support them confirmed that people's views are sought and their wishes respected. People had been involved in their care plans and the plans reflected their individual needs.
People are given the support to promote their involvement and engagement in a way that is meaningful to them and has direct positive results to their lives.
Plans were seen whereby people had been supported to develop detailed person centred plans that were unique to each individual. These had been strengthened by having more detailed and robust risk assessments and by staff having clearer instructions and systems for recording and reporting changes or problems. The organisation continues to roll out these improvements across all people receiving services, and the staff team stated that to do this in a person centred way each one takes time and careful planning to ensure all the relevant people have been involved, and that the pace is right for each person.

The organisation also supports people to be involved in consent issues in all aspects of their life, for e.g. in health treatment giving them information and options that they can understand. A number of people have health passports that assist in both the giving and the receiving of care in a more co-ordinated way and effective way.

Some plans demonstrated very detailed pieces of work that had enabled people to play full and active parts in their local community. With staff support some people had gone on holiday for the first time, and had been helped to chose and plan, and then go on a trip away. For some people this had involved detailed risk assessments and a careful build up to ensure that the pace and the level of support was at the right level to ensure success.
Staff receive training that enables them to safely support people who may at times exhibit challenging behaviours. This ensures that people can be supported to engage in activities and the local community in a meaningful and constructive way.

Our judgement
People receive support from a skilled and experienced staff team that is appropriate to each person's individual needs and allows them to have meaningful and active life.

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
People were observed speaking up and making requests from staff and this was obviously a regular occurrence that they felt comfortable with. They said they could talk to the staff and they were kind and helped them.
People have good access to other services and advocates, and they are part of the community. This means they are not isolated and it gives them opportunities to speak up and express themselves if they are unhappy or are concerned about the care they receive.

Other evidence
Staff training records showed all staff are up to date with safeguarding training, and this is set up as a refresher course as well as being incorporated into staff meetings. Staff demonstrated a good understanding of abuse and their role in protecting people. Staff also have access to e-learning materials if it is felt that they need extra support or top up training, as identified by a line manager.
We contacted social workers who work with the home and they reported that staff at Morningside had improved the reporting of incidents and handling of abuse allegations and they felt confident in the homes ability to protect people.
There are clear procedures that are followed in practice about decision making for people who are unable to give, or have limited capacity to understand the care and support that is offered. The organisation is careful to devise ways of assessing each person's ability to understand and will support them to make informed decisions.

They involve people by using information that is readily understandable and use

different formats to engage people. Where some people's capacity to make decisions is impaired other people such as relatives and professionals are consulted.

In discussion with the manager and staff they demonstrated a good understanding of the legislation and good practice guidance for ensuring peoples rights are protected and promoted. For example they had received training on the Mental Capacity Act and on using deprivation of liberties tools. Evidence was also found in people's files that were decisions are made on behalf of people they were done in their best interest, and all the relevant people had been involved.

People are also made aware of additional support services including independent advocacy services, in addition to the organisations own support networks and focus groups set up to give channels of communication for feedback on the care received.

These measures demonstrate the ways in which the service ensures that people's rights are promoted and protected, and that they are protected from abuse, or the risk of abuse.

Our judgement
People's human rights are promoted and protected, by the policies and procedures the home has in place, and they are protected from abuse, or the risk of abuse.

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
Staff were observed supporting people in appropriate ways: they were calm, supportive and guiding. Staff acted and responded in ways as set out and agreed in peoples care plans. They were obviously knowledgeable about how to support people in a way that enabled people to take part in activities and engage in the local community.
One person was away on a holiday for the first time, and this had been possible through the careful planning and risk assessments put in place by the staff team.

No concerns were raised in relation to the suitability and capability of staff.

Other evidence
During our discussions with the management and staff it was evident sound systems are in place to ensure the training and development needs of staff are assessed at the start of their employment and they are provided with suitable training for their role. The manager and staff provided examples of recent training they have undertaken to make sure they have appropriate skills and knowledge. In addition to specific 'core skills' training courses and specialist training, the organisation also provide NVQ training qualifications for staff that reinforces and supports good practice.

One area of training that staff reported had been particularly helpful to their role was how to support people who display challenging behaviours.They said this had helped them to look for triggers and to identify ways to avoid issues becoming a problem. This had resulted in supporting people to engage in many more activities, particularly in the local community and to go away on holidays.

Our judgement
Staff skills and knowledge are assessed and suitable training provided to support and guide their practice in promoting a good quality of life for each person living in the home.

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 were seen to receive a service that was carefully monitored by the systems that were in place. This is designed to ensure that people living in the home not only receive care that meets their needs, but also ensures that the environment is safe and well run.

Other evidence
The organisation that runs Morningside, CIC regularly review the existing quality monitoring system, which includes regular visits from a senior manager. During the visits various audits are undertaken to ensure the service is compliant with CQC essential standards of safety and quality.
Morningside was recently audited by Cumbria County Council's contract team and was assessed as being fit to continue to contract with.
CIC also have an electronic accident/incident reporting system. These reports are completed as necessary, and include: accidents to staff and service users; incidents, such as medication errors or any near misses;and they are reported using this system. All information entered is automatically sent to Health & Safety, a Service Manager and the Clincial Governance Manager to follow up.

The risk assessment file held by the home was examined, and details of how risk are minimised were checked. These assessments look at potential risks within the home and identify control measures to reduce risk. Each assessment is scored either high, medium or low risk. This is done by rating the hazard probability and multiplying the hazard severity. All risk assessments are available for staff to read and understand. Any changes are communicated through the communication book, supervisions and

staff meetings.

The company also has a complaints procedure in place which has been cascaded to relatives and a copy held in individuals' files. Quality of care is monitored via checks on care plans and by reviews of progress to meet any actions, as well as by surveying relative, professionals and people living in the home for their views.

Our judgement
People receive a service which is carefully monitored and checks are in place to promote the well being of people living there.

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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Author	Care Quality Commission
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