Review of compliance

Scope Warrington Road	
Region:	North West
Location address:	102-108 Warrington Road Halton View Widnes Cheshire WA8 0AS
Type of service:	Care home service without nursing
Date of Publication:	February 2012
Overview of the service:	Warrington Road is a care home providing personal care to 12 people with a physical disability. It provides support to people that have complex needs and require a high level of personal care. The home has its own transport to enable people living at the care home to access community facilities easily.

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

Our current overall judgement

Warrington Road 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 25 January 2012, talked to staff, reviewed information from stakeholders and talked to people who use services.

We were supported on this review by an expert-by-experience who has personal experience of using or caring for someone who uses this type of care service.

What people told us

We were accompanied by an expert by experience on this visit. The expert concluded: 'In summary, I feel the properties demonstrate a very good example how personalised support that promotes realistic independent living can be provided within a regulated environment for a generation of disabled people where their life experiences would make full independent living unrealistic. I did not observe anything which raised any concerns'.

The expert by experience noted that people who could only communicate non verbally did not give any impression of any concerns about the service and appeared to be satisfied with the support they received.

We spoke with a number of people. They commented:

'We get privacy and are respected by staff'
'I feel safe'
'I know exactly what is in my care plan'
'Staff are very good and they listen to me'
'Staff always act on what I say'
'staff listen to us'
'Their support is very personal'
'I am happy here'
'It is great'
'There are always enough staff here both day and night'

What we found about the standards we reviewed and how well Warrington Road 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

The provider is compliant with this outcome and as a result the people who use the service are respected and are involved in their support.

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

The provider is compliant with this outcome and as a result the needs of individuals living at Warrington Road are met.

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

The provider is compliant with this outcome and as a result people are protected from abuse.

Outcome 09: People should be given the medicines they need when they need them, and in a safe way

The provider is compliant with this outcome and as a result the people who use the service have their health and safety promoted by the safe management of medicines.

Outcome 13: There should be enough members of staff to keep people safe and meet their health and welfare needs

The provider is compliant with this outcome and as a result there are sufficient staff on duty during the day and night to meet the needs of the people using the service.

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

The provider is compliant with this outcome and as a result the people who use the service benefit from having the quality of the support they receive monitored.

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
We spoke to many individuals using the service. In all cases, people felt that they were involved in the support they received, felt respected by the staff team and were able to maintain their privacy when they wished.

Other evidence
For the purposes of our visit, we were accompanied by an expert by experience. These experts are individuals with experience of the provision of support within such services and provide a lay person's view of the support provided. The expert concluded: 'During my visit to Warrington Road, I met and spoke with most of the people who used the service as well as a number of the staff. I could immediately observe choice and the control people had being exercised on many levels. Bedroom areas were all individually decorated and personalised within communal areas as well as people's own rooms and reflected a homely environment where the necessary items of a registered care home was kept to minimal interference of being a home'.

The expert further stated 'I clearly observed that people's decisions were respected in an age and culturally appropriate way. I observed both people and staff were comfortable in meeting impairment specific needs, like wearing a bib at meal times, as well as specific lifestyle choices, like having a can of Guinness with their lunch. People

appeared to have a huge input in their daytime activities, although I was unsure if the main daycare service offered to people truly met the needs and wishes of people'

We made observations of staff interactions with individuals. Interactions were positive and friendly with staff clearly demonstrating a service user-centred approach to their work. The people we spoke with have their communication needs taken into account. Many people were able to verbally express their views while others used non verbal cues to make their needs known to staff who have worked there long enough to know what people want. Some communication aids are used by people.

We looked at the role of advocacy within the service. Information is available to individuals on accessing advocacy services. One person currently has links with an advocate.

Our judgement
The provider is compliant with this outcome and as a result the people who use the service are respected and are involved in their support.

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
We spoke to individuals who used the service. In all cases, people were aware of their plan of care and stated that they knew what was contained within it. People stated that they were well in themselves but on occasions needed access to medical care which was provided straight away.

People were particularly complimentary of the staff team emphasising their willingness to support them as well as listening and acting upon what they said.

Other evidence
The expert by experience who accompanied us on this visit concluded:

'People demonstrated a very good rapport with all the staff and this is observed through the level of appropriate banter between people and staff, and the many broad wry genuine smiles from people who were non-verbal'

'I felt from my observations all the staff had a very good understanding of the needs, wishes, desires and aspirations of people as individuals and they are able and comfortable to advocate for people when that was needed. I also observed appropriate and professional friendships between people and staff, which assisted in the personal development of both parties. I was informed that one staff member was assisting a person to access facebook which had provided them opportunities to make contact with family members they had lost contact with. I also directly observed people had linked with their community by the fact they were known and respected by their local

accessible taxi driver'.

We looked at four care plans with the permission of individuals. In all cases, care plans provided an individual and personalised summary of the support provided for each person. Invitations were available on the front of care plans signed by individuals for people to have a look at care plans so that an indication of the aspirations of individuals would be enjoyed by other people. Care plans are accompanied by monthly reviews. These are recorded and indicate that such reviews involve the individual and keyworker where general support provided can be discussed. Care plan reviews were in place for each month and provided a commentary on health issues, activities and general progress. Care plans are backed up by detailed daily records maintained by staff.

We looked at the health records related to individuals. These provided an ongoing commentary of how the health needs of people are met. These included details of appointments and general outcomes. Records confirmed that people have their health needs met and provide evidence that medical interventions are proactive rather than reactive.

We looked at how the service acknowledges the risks faced by people in their daily lives. Risk assessments are in place for each person and provides information on the unique risks people face in relation to finances or activities they pursue as well as general risks posed in assisting people to mobilise or use the environment safely. All risk assessments are reviewed and updated when appropriate.

Our judgement
The provider is compliant with this outcome and as a result the needs of individuals living at Warrington Road are met.

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 we spoke with told us they felt safe living in the service. This extended to the security of the premises as well their confidence that staff would be available to meet their needs.

Other evidence
We looked at our own records and noted that an incident of safeguarding had been raised by the service during 2011. This had not been substantiated yet provided us with evidence of the efficiency of the service in raising this and co-operating with any subsequent investigation.

We interviewed staff members. In all cases, the staff were able to confirm that they had received adult protection training. Staff demonstrated a clear understanding of the whistleblowing process and stated that they had information available in order to raise concerns if they needed to.They confirmed that they had the contact numbers of the Care Quality Commission and understood our role in whistleblowing. Information was also available to them in order to report any instances of abuse. Training records confirmed that staff had received adult abuse training over the past few months.

The service displays, in an office area, information on safeguarding and this includes reference to the Local Authority's reporting procedure as well as Scope's own procedures. Included within care plans, service users have access to easy read documents in relation to 'keeping people safe' which has been devised by Scope. This information includes reference to raising concerns.

Our judgement
The provider is compliant with this outcome and as a result people are protected from abuse.

Outcome 09:
Management of medicines

What the outcome says

This is what people who use services should expect.

People who use services:
* Will have their medicines at the times they need them, and in a safe way.
* Wherever possible will have information about the medicine being prescribed made available to them or others acting on their behalf.

What we found

Our judgement

The provider is compliant with Outcome 09: Management of medicines

Our findings

What people who use the service experienced and told us
We spoke with the people who use the service about medication. In all cases, people said that they relied on the staff team to manage medication although the staff had looked at each person's ability to manage medication. Individuals told us that they received their medication on time and did not have to wait for their medication. People were aware of what medication they received and what it was for.

Other evidence
We looked at the way the service manages medication. In the first instance the ability or otherwise of people to manage their own medication is assessed and a conclusion made on whether it is safe to enable people to do this. Our discussions with people confirmed that at present, the staff manages all medication.

We looked at the way medication is stored. All medications are stored in a lockable and secure cabinet located discreetly in each person's room. Contained within each cabinet is medication as well as records. We looked at records and found that they had been completed appropriately. There was evidence that medications had been counted when received and signed for.

We observed two people receiving medication. This was done in a satisfactory manner. Staff confirmed that all medications are double checked by other staff members and records confirming this were viewed. We interviewed staff about medication. They confirmed that they had had medication training and also their ability to manage

medication was subject to a competency check. Again this was confirmed through training records and personal files.

A returned medication book is in operation and this has been completed appropriately.

Our judgement
The provider is compliant with this outcome and as a result the people who use the service have their health and safety promoted by the safe management of medicines.

Outcome 13:
Staffing

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 sufficient numbers of appropriate staff.

What we found

Our judgement

The provider is compliant with Outcome 13: Staffing

Our findings

What people who use the service experienced and told us
People who use the service told us that there was always staff on duty during the day and night and that they were pleased with the quality of the support provided by the staff as well as the positive and friendly way they adopted.

Other evidence
We interviewed staff members. In all cases, staff stated that they considered that there were enough staff on duty within the service to meet the needs of the people living there. Discussions with the person responsible for staff within the service informed us of a change that had been made in the rotas within the service. Given that there are four bungalows which provide the accommodation, staff rotas had been devised so that two bungalows are paired up and the staffing is spread between the two. Staff commented that this change had been beneficial and enabled service users to pursue the activities they wanted and be supported in any appointments.

We looked at staff rotas. They showed that where individuals needed support in accessing the community, this had been identified on rotas. In addition to this any training staff were due to attend had been identified with appropriate cover form other staff brought in.

Our judgement
The provider is compliant with this outcome and as a result there are sufficient staff on duty during the day and night to meet the needs of the people using the service.

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
We spoke with people who use the service. All people confirmed that the staff team take the time to meet with them in order for them to express their views on the quality of the support provided. People stated that they have the chance to meet with keyworkers on a monthly basis and that they had had the chance to express their views through questionnaires. Individuals felt confident that they were listened to and that the staff acted upon what they said.

Other evidence
We looked at the way the service monitors the quality of the support it provides. The service received a visit from the Local Authority contracts team in September 2011 and it was rated as good. Improvement actions were raised yet there was evidence that these had been addressed.

The service encourages individuals to complete questionnaires in relation to all aspects of their support. We looked at all of them and found that in the main, people were happy with the support they received. In those instances where improvements were identified, the service is duty bound to produce an action plan by the end of January 2012 to respond to these. Questionnaires from families and friends have also been made available to these people.

As part of care plan reviews, each key worker has individual meetings with each person every month. Records suggested that this provided the opportunity for individuals to comment on their support and to influence it. Reviews had taken place consistently

every month and provided a record of activities, health issues and other factors affecting each person on a personal level.

The service is subject to peer reviews. This allows an individual employed by Scope but not working in this region to visit on a monthly basis and check for compliance with a number of aspects of the support provided. Where action is required this is identified and acted upon.

Our judgement
The provider is compliant with this outcome and as a result the people who use the service benefit from having the quality of the support they receive monitored.

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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