

Review of compliance

East Riding of Yorkshire Council Supported Housing

Region:	Yorkshire & Humberside
Location address:	94 Mill Lane Beverley East Riding of Yorkshire HU17 9DH
Type of service:	Domiciliary care service
Date of Publication:	May 2012
Overview of the service:	The East Riding of Yorkshire Council (ERYC) Supported Housing provides 24 hour domiciliary care and support to people in the community. It is based at the Millers Centre, Mill Lane Beverley. Support workers provide a service to people living in either supported living scheme properties or in private properties.

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

Our current overall judgement

Supported Housing was meeting all the essential standards of quality and safety inspected.

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 23 April 2012, observed how people were being cared for, looked at records of people who use services, talked to staff and talked to people who use services.

What people told us

We spoke with five people about the way they were involved in their care and we asked if they made their own decisions. They told us they were very well supported by the agency staff and that they were given many opportunities to make their own decisions and informed choices.

People told us they liked the staff and had good relationships with them. They said, "I am supported with my finances and shopping and my carers give me all the help I need."

People told us they had support plans that met their personal and individual needs. One person said, "I helped to make my support plan and know what it says."

Another person said, "I have done the person-centred planning course so I know what's involved in care plans."

People also told us they felt safe and knew who to talk with if they were worried about anything. They had copies of complaint procedures in written and pictorial format.

One person said, "I have a security alarm system and a fire alarm as well, so I feel safe."

Other people told us they managed their own finances where possible.

What we found about the standards we reviewed and how well Supported Housing 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's views and experiences were taken into account in the way the service was provided and delivered in relation to their care. Their privacy, dignity and independence were respected. The provider was meeting this standard.

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

People experienced care, treatment and support that met their needs and protected their rights. The provider was meeting this standard.

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

People that used the service were protected from the risk of abuse, because the provider had taken reasonable steps to identify the possibility of abuse and prevent abuse from happening. The provider was meeting this standard.

Outcome 12: People should be cared for by staff who are properly qualified and able to do their job

People were supported by suitably qualified, skilled and experienced staff. The provider was meeting this 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

The provider had an effective system to regularly assess and monitor the quality of service that people received. The provider was meeting this standard.

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.

Where we judge that a provider is non-compliant with a standard, we make a judgement about whether the impact on people who use the service (or others) is minor, moderate or major:

A minor impact means that people who use the service experienced poor care that had an impact on their health, safety or welfare or there was a risk of this happening. The impact was not significant and the matter could be managed or resolved quickly.

A moderate impact means that people who use the service experienced poor care that had a significant effect on their health, safety or welfare or there was a risk of this happening. The matter may need to be resolved quickly.

A major impact means that people who use the service experienced poor care that had a serious current or long term impact on their health, safety and welfare, or there was a risk of this happening. The matter needs to be resolved quickly.

Where we identify compliance, no further action is taken. Where we have concerns, the most appropriate action is taken to ensure that the necessary changes are made.

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 with five people about the way they were involved in their care and we asked if they made their own decisions. They told us they were very well supported by the agency staff and that they were given many opportunities to make their own decisions and informed choices.

People told us they liked the staff, had good relationships with them and got on very well with them. They said, "I am supported with my finances and shopping and my carers give me all the help I need."

Other evidence

We spoke with the manager and staff about involving people in their care and respecting them and we observed relationships between people and the support staff.

People who used the service were given appropriate information and support regarding their care. People expressed their views and were involved in making decisions about their care and they were supported in promoting their independence and community involvement.

Staff told us they understood their responsibilities regarding involving and including

people. They said the service manager and senior staff had completed Mental Capacity Act (MCA) training, but not support workers, as their level of responsibility did not require it. They said assessments had been carried out using the MCA and 'Best Interest' meetings would be held if required.

'Best Interest' meetings involve care professionals, health care professionals, relatives and other interested parties who help make a decision about a person's life when they are unable to make a decision for themselves.

None had been held by the service but some people using the service had been involved in 'Best Interest' meetings because they accessed other services from East Riding of Yorkshire Council (ERYC).

We saw people being asked to make choices and decisions in their daily lives and we saw support workers encouraging them to be independent. We saw that their privacy and dignity was upheld.

Our judgement

People's views and experiences were taken into account in the way the service was provided and delivered in relation to their care. Their privacy, dignity and independence were respected. The provider was meeting this 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 we spoke with told us they had support plans that met their personal and individual needs. One person said, "I helped to make my support plan and know what it says."

Another person said, "I had a review with my care co-ordinator a few weeks ago and I might be having 'direct payments' arranged for me, for part of my funding. Then I can decide how I want to spend my money and decide who I want to go out with on activities."

One person said, "I have done the person-centred planning course so I know what's involved in care plans."

People explained different aspects of their support plans and told us what they did each day as a matter of routine.

Other evidence

We spoke with the staff about care and welfare of people and we looked at support plans. We also saw how support workers assisted people with their decisions and life skills.

People's needs were assessed and care was planned and delivered in line with their individual support plan.

Staff told us individual support plans were produced after carrying out assessments of need and risk assessments in applicable areas and after consulting people about the support they required. Staff said they treated people as individuals at all times.

We looked at two case files for people that used the service and saw that people had a document recording key information and that there was a support plan, a care review record, a list of medication, diary sheets and information regarding health care needs.

Peoples' files also contained NHS correspondence and a skills assessment report. There was also a safety management plan, copies of other department review minutes and details of current medical conditions and such as occupational therapist reports. Files also contained hospital discharge letters and details of reviews of needs assessments and support plans.

Support plans were written in either the third or first person text and showed peoples' wishes, preferences and likes. They covered areas that were relevant to people's individual needs.

Risk assessment documents were also in place in relation to finances, accessing hot water, buying and eating food, wearing appropriate clothing for the season, managing memory loss, maintaining tenancy, attending health appointments and general health and safety in the home.

We saw diary notes which recorded the support that had been given to people, including how and when. There were also other documents relating to referrals for care and reviews of needs.

Our judgement

People experienced care, treatment and support that met their needs and protected their rights. The provider was meeting this 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

People we spoke with told us they felt safe and knew who to talk with if they were worried about anything. They had copies of complaint procedures in written and pictorial format.

One person said, "I have a security alarm system so that if I feel callers or visitors are not nice people I can press it. It is linked to the Piper Lifeline. I have to remember to tell them if I am going to be out late because they would contact me if my door alarm went off late at night." They also said, "I have a fire alarm as well, so I feel safe."

Other people told us they managed their own finances where possible or received some minor support.

Other evidence

We spoke with the staff about safeguarding adults from harm and we looked at the records kept concerning safeguarding issues.

People who used the service were protected from the risk of abuse, because the provider had taken reasonable steps to identify the possibility of abuse and prevent abuse from happening. The provider responded appropriately to any allegation of abuse.

Staff told us they understood their responsibilities in respect of safeguarding people and they demonstrated this when describing what abuse was and how they would refer it to

the ERYC Safeguarding Adults' Team.

Staff told us they had completed safeguarding training at the required level; the manager had completed the registered manager's course and the 'train the trainers' course and support staff had completed basic safeguarding awareness training each year. Staff also had access to e-learning systems of training and used the computers in the service office whenever it was necessary. We saw evidence of training on the staff training matrix and record.

We saw a policy on supporting people with and on handling peoples' finances, which staff had access to. There was also a procedure to follow when dealing with finances that involved recording money in and out of a person's cash tin, keeping receipts of expenditure and maintaining a record of all transactions.

Our judgement

People that used the service were protected from the risk of abuse, because the provider had taken reasonable steps to identify the possibility of abuse and prevent abuse from happening. The provider was meeting this standard.

Outcome 12: Requirements relating to workers

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 staff who are fit, appropriately qualified and are physically and mentally able to do their job.

What we found

Our judgement

The provider is compliant with Outcome 12: Requirements relating to workers

Our findings

What people who use the service experienced and told us

We spoke with the people using the service but their feedback did not relate to this standard.

Other evidence

We spoke with manager about recruitment procedures and practices and we looked at staff recruitment files.

There were effective recruitment and selection processes in place. Appropriate checks were undertaken before staff began work.

The manager told us there had been no new staff recruited in the last twelve months, though four vacancies had recently been created due to changes in peoples' needs and a change in how these were to be met. The most recently recruited staff had been two people already working for the ERYC. They had also been given temporary contracts with the Supported Housing scheme.

We saw the recruitment files for these people and they contained details of enhanced Criminal Records Bureau (CRB) checks dated March and November 2010. There was an ERYC 'change of details' form for one staff whose contract had been renewed 14/12/11. There were also ERYC 'e-form' safeguarding and job application forms for both staff, which constituted part of their application for the position.

We also saw copies of additional on-line information that had been submitted, relating

to the post they were applying for. Neither of the two staff had references in their files, but the manager explained that because they both already worked for ERYC their original references would have been held at headquarters, along with their previous job applications. We asked for a third staff file and saw evidence of two references.

We also saw evidence of staff interviews that had taken place in the form of interview questions asked and answers given for all three staff.

Our judgement

People were supported by suitably qualified, skilled and experienced staff. The provider was meeting this 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

We spoke with the people using the service but their feedback did not relate to this standard.

We looked at the service survey results that had been collated from the last quality monitoring exercise and we saw that responses were very positive with 97% satisfaction among people that used the service.

Other evidence

We spoke with the manager and staff about quality assuring the performance of the service and we looked at results of the last 'service user survey' carried out.

The provider had an effective system in place to identify, assess and manage risks to the health, safety and welfare of people using the service and others.

Staff told us people that used the service, family members, care co-ordinators and workers at the Community Team for Learning Disability (CTLTD) had all been surveyed in December 2011. We saw that results had been collated and feedback had been given to people and stakeholders in the form of a brief statement. Results had been positive with a minimum of 97% satisfaction for people that used the service and 100% for stakeholders.

Information obtained in people's reviews of care and from complaints as well as outcomes of monthly staff meetings were also used to inform the quality monitoring

systems of the performance of the service.

Our judgement

The provider had an effective system to regularly assess and monitor the quality of service that people received. The provider was meeting this standard.

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.

Where we judge that providers are not meeting essential standards, we may set compliance actions or take enforcement action:

Compliance actions: These are actions a provider must take so that they **achieve** compliance with the essential standards. 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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Care Quality Commission

Website	www.cqc.org.uk
Telephone	03000 616161
Email address	enquiries@cqc.org.uk
Postal address	Care Quality Commission Citygate Gallowgate Newcastle upon Tyne NE1 4PA