

Review of compliance

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| Autism Care UK Limited The Farmhouse | |
| Region: | East Midlands |
| Location address: | Heath Farm, Heath Road, Scopwick, Lincolnshire. LN4 3JD |
| Type of service: | Accommodation for persons who require nursing or personal care. |
| Publication date: | 8 April 2011 |
| Overview of the service: | <p>The Farmhouse is registered to provide accommodation for up to eight people who require personal care only. The service specialises in care and support for people with severe autistic spectrum needs, and is offered to both ladies and gentlemen.</p> <p>It is situated in a village location, as part of a larger site comprising of five other care homes.</p> <p>Accommodation is provided in a one story building, and service users have their own bedrooms, some of which are en-suite.</p> |

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

What we found overall

We found that The Farmhouse was meeting all the essential standards of quality and safety we reviewed.

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

Why we carried out this review

We carried out this review because concerns were identified in relation to:

- Care and welfare of people who use services
- Cleanliness and infection control

How we carried out this review

We reviewed all the information we hold about this provider, carried out a visit on 5 April 2011, observed how people were being cared for, talked with staff, checked the provider's records, and looked at records of people who use services.

What people told us

People were not able to tell us about their experiences. However we saw that they were being supported to take part in daily routines and individual activities of their choice. We saw that they have a wide range of activities to choose from.

They live in clean and comfortable surroundings, and are able to personalise the surroundings with things that they like.

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

Outcome 4: People should get safe and appropriate care that meets their needs and supports their rights

- Overall, we found that The Farmhouse was meeting this essential standard.

People receive personalised care, which is appropriate to their needs and wishes.

Outcome 8: People should be cared for in a clean environment and protected from the risk of infection

- Overall we found that The Farmhouse was meeting this essential standard.

The home is regularly cleaned and staff are trained and able to take action to minimise the risk of cross infection.

Action we have asked the service to take

We have not asked the provider to take any action at this time.

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 4: 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 4: Care and welfare of people who use services.

Our findings

What people who use the service experienced and told us

We saw that people living at The Farmhouse were very active and that they were dressed in a clean, personalised way and that they were clean for the day. We observed people taking part in daily routines and individual activities of their choice with support from staff where this was needed.

Other evidence

During our visit one person was being supported to use the shower facility and we observed that support was given in a safe and sensitive way. Throughout our visit people were receiving individual support from staff members and one staff member told us that "we never leave people on their own unless they ask us for quiet space and then we support them to do this safely. Each person has their own routine and when someone is identified as having a high need for quiet space we have identified a 'safe zone' to be used so that individuals are given space and protected from any identified risks."

We saw that service users had individual care plans that contained a range of detailed information about their personal history and background and about how each aspect of their care needs should be met.

Care plans contained presenting physical needs and overall objectives, which had been negotiated and clearly set out with each person when putting the original care plan together. The records showed that individuals had the chance to communicate their needs, wishes and overall aims. Where people needed support with communication, family members had been included in the creation of care plans.

We know that care plans are reviewed monthly by staff, and there are also monthly audits by managers from other homes, who set action plans if there is a need to improve recording. Risk assessments were available on the care plan, which showed that they are reviewed regularly and that a formal six monthly review is organised and undertaken with the person and their family at the centre of the process.

The care plan also included detailed information about the activities that people had chosen to undertake. We saw that one person had been supported to take part in a range of activities, including swimming, bowling, horse riding and relaxation through aromatherapy. The person had also identified goals for the year which included; theatre trips, open college attendance, brewery visits and a holiday. Information showed that these plans were made with the full support of family members.

Care plan information also showed that family members are encouraged to keep in touch where appropriate and one care plan showed that contact with parents was maintained by weekly telephone calls, letters and planned home visits.

We also saw that care plans contained a section on culture and spirituality and that this had been used to ensure any specific needs regarding diet or other special support needs can be considered.

We talked to one of the senior staff members and the manager of the home about how staff support people. We know that there are currently eight people living at the service. One person receives one to one support and the other people receive support on a ratio of one to half a staff members time. One staff member said that "this usually works well, people are never left on their own or for long and we ensure that everyone gets the support they need". We saw that there was an established staff team who knew about the people who lived at the home and how their needs should be met. Information on care plans showed how staff time is managed to make sure each individual has some one to one support time.

We also looked at how people are supported during the night. One staff member told us that there is a waking night team available all night and that visual and audible checks are completed every half an hour throughout the night. We looked at the night staff chart during our visit, which showed when the checks were carried out and if there was any changes to individual sleep patterns.

Our judgement

People receive personalised care, which is appropriate to their needs and wishes.

Outcome 8: 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 8: Cleanliness and infection control

Our findings

What people who use the service experienced and told us

During our visit we undertook a tour of the building and saw that the home was clean and tidy throughout.

We looked at two rooms that people lived in and saw that they were very clean and personalised in the way each person wished. Two rooms had en-suite facilities. We looked at these and saw that they were clean. The communal bathing areas were also clean and tidy.

Other evidence

We know that the home provides training and support for staff to attend infection control training and during our visit one staff member told us that some staff were undertaking a training session on the day of our visit. We were told that staff members were aware of the hygiene code and policies and procedures are in place for staff to follow.

One staff member told us that staff who work during the night make sure the home is cleaned each night so that it is ready for the next day.

During our visit we observed staff members wearing appropriate protective clothing when undertaking tasks that were linked to infection control management. We also looked at the laundry area for the home, which is used to cover the laundry needs of the other homes within the group at Heath Farm. The laundry area was very clean

and a one staff member confirmed that they were employed to undertake the daily laundry tasks at the home. The staff member told us that clothes were washed daily and colour coded buckets were being used to ensure clothing was not mixed up, clothes were being separated and labelled and hygiene procedures were being followed to minimise the risk of cross infection.

We know that the laundry area also contains a separate room for people who live at the home to undertake washing of their own clothes, with support when needed. We looked at this area and saw that it was also clean and tidy.

We also know that there is a focus on ensuring people are supported with their personal hygiene. Care plans showed that there are personal hygiene plans and routines in place and a staff member told us that "this is to make sure the right support is given at the right time".

Our judgement

The home is regularly cleaned and staff are trained and able to take action to minimise the risk of cross infection

Action

we have asked the provider to take

We have not asked the provider to take any action at this time.

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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Care Quality Commission

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| 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 |