Review of compliance

Aitch Care Homes (London) Limited Arundel House - Frinton-on-Sea	
Region:	East
Location address:	34 Harold Road Frinton-on-Sea Essex CO13 9BE
Type of service:	Care home service without nursing
Date of Publication:	March 2012
Overview of the service:	Arundel House is a small residential care home for up to 10 people with a learning disability.

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

Our current overall judgement

Arundel House - Frinton-on-Sea 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 and carried out a visit on 6 February 2012.

What people told us

People told us that they really liked living at Arundel House and felt supported by the staff. One person said "I feel safe here and the staff help me." People were enabled by the staff to make choices and decisions about everyday tasks and activities and things that were important to them. One person told us "I like the pictures in my care plan as they help me understand hard words." People appeared relaxed and comfortable in their home.

What we found about the standards we reviewed and how well Arundel House - Frinton-on-Sea 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. People were supported to make decisions about their care, involved in how they liked things done and staff respected their privacy and individuality.

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

The provider is compliant with this outcome. People using the service receive appropriate care and support that meets their needs.

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

The provider is compliant with this outcome. People living at Arundel House receive safe care through proper procedures and practice being in place.

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

The provider is compliant with this outcome. People using the service are cared for by staff who have been safely recruited.

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. The home regularly assesses and monitors the quality of the service it provides to ensure that people receive a good quality service.

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 told us that they were involved in going out shopping and in choosing the meals. We saw that people made choices and decisions about day to day tasks and activities.

Other evidence
The manager told us that people were fully involved in discussions and agreements about their care and support, what went into their care plans and how they liked everyday tasks carried out. This ensured that people were able to maintain their independence, learn new skills and be more confident.

We saw that the staff were engaged with people using the service and were respectful, sensitive and kind. They spent time explaining what was going on in an encouraging way and didn't rush people.

The care plans included details of people's emotional and sexual needs, and personal relationships. This showed that the service was able to be open and honest when talking about sex. However, the manager agreed to raise more awareness with the staff and people who use the service to ensure that a person's sexual orientation was taken into account in terms of their preference and lifestyle.

Group discussions were held to talk about menus, meals and activities so that everyone had their own choices. We saw notes of regular meetings that had been held with people who use the service and these showed that issues of importance to people were discussed and solutions found.

Our judgement
The provider is compliant with this outcome. People were supported to make decisions about their care, involved in how they liked things done and staff respected their privacy and individuality.

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 saw that people knew what was in their care plans and they had been involved in updating them. One person told us that they liked the pictures in the care plans and this helped them talk about their family.

Other evidence
During our visit in February 2012 we looked at three care plans. These contained clear information about the person including a section called 'All about me', which was written by them with support. There was a full assessment of their needs including how they communicated, their medication, daily living and personal care needs, support in the community, activities, relationships and things that mattered to them. We also saw that people had a health action plan to ensure their health was looked after. These care plans showed that people's care and support was person centred and coordinated.

The risk assessments we saw included help with money, independent living, keys, healthy eating, medication, being in the community, using the kitchen, dealing with anxious behaviour and accessing vehicles.

The care plans, risk assessments and health action plans were in an accessible format, had been signed by people themselves, where they were able, and were reviewed regularly by the key workers. The daily diaries we saw provided an up to date record of how people felt, their activities, moods and behaviour on any given day.

People did a range of activities in the home as well as in the community including

college, day centres and clubs, shopping, outings, going to the theatre, games and art and craft.

Our judgement
The provider is compliant with this outcome. People using the service receive appropriate care and support that meets their needs.

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 appeared relaxed and comfortable at Arundel House. One person said "I feel safe here and the staff help me."

Other evidence
The manager told us that they had in place the Southend, Essex and Thurrock safeguarding adults from abuse guidance along with their own safeguarding policy which was due to be reviewed. A safeguarding concern had been raised with us and we found that the manager had systems in place to deal with this effectively.

All staff had received training in the safeguarding of vulnerable adults from abuse. The service also ran a safeguarding awareness programme which involved people who used the service. This went through what abuse was and how to complete the necessary forms and processes. The staff we spoke to told us that the training they had done was really informative and eye opening and they knew what to do if they suspected abuse of any kind.

A discussion session had been held with people who use the service and staff about different types of abuse and how to protect themselves. Information about safeguarding people from abuse was in accessible formats to ensure people understood their rights to being kept safe.

Where it was necessary, people had Mental Capacity Act assessments in place which were kept in their care plans. This ensured that people's rights and wishes were dealt

with in an appropriate way.

Our judgement
The provider is compliant with this outcome. People living at Arundel House receive safe care through proper procedures and practice being in place.

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
On this occasion, we did not ask people about the recruitment of staff.

Other evidence
We looked at the recruitment records for three staff. The necessary checks had been undertaken prior to appointment and included identification, an application form with an employment history, criminal records bureau check, references, medical fitness, job description and offer of employment.

All staff had undertaken an induction programme which covered all aspects of care. This included training in safeguarding of vulnerable adults from abuse, medication, moving and handling people, food hygiene, inclusive communication, health and safety, epilepsy care and challenging behaviour. In the staff files, we saw that the manager had undertaken competency checks for staff in medication and moving and handling people which ensured that people got the right medication and were assisted to move safely.

The staff confirmed that their recruitment had been thorough and
their induction had been a good experience which gave them the skills to do the job.

We saw records of regular supervision sessions and yearly appraisals which had been signed by the staff member and the manager. This ensured that the necessary support processes were in place and that staff were skilled and knowledgeable about the needs of people using the service.

Our judgement
The provider is compliant with this outcome. People using the service are cared for by staff who have been safely recruited.

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 told us that they liked filling in the surveys and helping to make things better at Arundel House.

Other evidence
The manager told us that they had a number of ways of monitoring the quality of the service. The last survey completed was in July 2011 when they received the views of professionals, staff, families and advocates. We saw a survey for people who use the service which was in pictures and easy words which gave them the opportunity to complete it themselves if they could.

Monthly house meetings and menu planning meetings with people who use the service were held. The notes of the meetings were in pictures and easy words, saying who had been there, what they had talked about, what had happened and what had been agreed. Picture cards were used to help people communicate their views and wishes.

Staff meetings took place monthly and staff had signed the notes to say they had read them so that they were kept up to date about people's quality of care. Quality audits about all the essential standards the home should have in place were completed monthly and an action plan provided a way of checking that improvements had been completed for people who use the service.

A number of checks were made including spot checks at night to ensure the night staff were doing their job well and fire safety, infection control and environmental health visits

had been made to ensure the home was keeping people safe and well.

Our judgement
The provider is compliant with this outcome. The home regularly assesses and monitors the quality of the service it provides to ensure that people receive a good quality service.

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

Document purpose	Review of compliance report
Author	Care Quality Commission
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