

Annual service review

Name of Service: Trelowen

The quality rating for this care home is:	two star good service								
The rating was made on:	1	1	1	1	2	0	0	8	

A quality rating is our assessment of how well a care home, agency or scheme is meeting the needs of the people who use it. We give a quality rating following a full review of the service. We call this review a 'key' inspection

We do an annual service review when there has been no key inspection of the service in the last 12 months. It does not involve a visit to the service but is a summary of new information given to us, or collected by us, since the last key inspection or annual service review.

Has this annual service review changed our opinion of the service? No

You should **read the last key inspection report for this service** to get a full picture of how well outcomes for the people using the service are being met.

The date by which we will do a key inspection:

Name of inspector:	Date of this annual service review:								
Alan Pitts	1	5	1	0	2	0	0	9	

Information about the service

Address of service:	1 Blowinghouse Lane St Austell Cornwall PL25 5AT
Telephone number:	0172665366
Fax number:	0172666775
Email address:	
Provider web address:	www.hft.org.uk

Name of registered provider(s):	HF Trust Ltd		
Conditions of registration:			
Category(ies) :	Number of places (if applicable):		
	Under 65	Over 65	
learning disability	7	0	
Have there been any changes in the ownership, management or the service's registration details in the last 12 months?	Yes		
If yes, what have they been:	None		

Date of last key inspection:	1	1	1	1	2	0	0	8
Date of last annual service review (if applicable):								

Brief description of the service
<p>Trelowen is a care home registered to provide personal care and accommodation for up to 7 adult service users with a learning disability. The home is in a residential area of St. Austell and conveniently placed for service users to access community facilities. The Home Farm Trust have recently completed building work at the home to provide 2 additional ground floor bedrooms and additional communal space. Service users are accommodated in single rooms on the ground and first floors, the new rooms have en suite bathrooms and toilet facilities, with over head tracking to assist service users with additional physical disabilities.</p>

Service update since the last key inspection or annual service review:

What did we do for this annual service review?

We looked at all the information that we have received, or asked for, since the last key inspection or annual service review. This included: the annual quality assurance assessment (AQAA) that was sent to us by this service (the AQAA is a self-assessment that focuses on how well outcomes are being met for people using the service, and it also gave us some numerical information about the service); Surveys returned to us by people using the service and from other people with an interest in the service; Information we have about how the service has managed any complaints; What the service has told us about things that have happened in the service, these are called 'notifications' and are a legal requirement; The previous key inspection and random inspection.

What has this told us about the service?

This service sent us their annual quality assurance assessment (AQAA) when we asked for it. It was clear and gave us the information we asked for. We looked at the information in the AQAA and our judgement is that the care home is still providing a good service and that they know what further improvements they need to make.

The AQAA told us the home does the following to incorporate the views of people that use the service:

An initial assessment of the needs and risks of a potential support person is completed prior to a service being offered. This allows us to formulate a support plan in a person centred way to ensure we meet the needs of the prospective supported person and to assess their compatibility with existing support person. The assessment includes information from all other relevant agencies and professionals. The assessment identifies all supported person needs and how the supported person wishes to be supported and includes social, physical spiritual and emotional needs coupled with communication needs. The potential supported person is introduced to the Service and the existing supported person using an individually defined plan and actions taken accordingly. Supported persons currently using the service have ongoing assessments and have recently been assessed using the SPARS, Support Planning Assessment Recording System, paperwork.

As a service provider, HFT has CORE values, Care, Opportunity, Respect, and Empowerment, that respects everyone's contribution and uniqueness. This is supported by a framework of policies, procedures and standards that underpin our practice. These include DDA, Disability Discrimination Act, policy learning, person centred approaches/practice, diversity policy, recruitment and development policies.

The majority of people supported at Trelowen have limited verbal skills. One person has no verbal communication. Through the close relationship that staff have developed with the people they support they have become more skilled at recognising non-verbal communication gained via non-verbal responses and reactions to in order to obtain individual views.

The people we support at Trelowen have Keyworkers who work on an individual basis to ensure needs are met and a continuity of care maintained. Individuals are encouraged to be part of the day to day running of the house and to take some responsibility for their household chores. Each supported person has different day to day tasks and are supported to continue these and widen their independence.

Trelowen have home meetings where the supported peoples views are sought and individuals are encouraged to speak to staff or their Key Worker if they are unsure or have questions about anything.

Trelowen offers choice of menus and encourages the support person in preparing the menu.

Evidence-

Each individual has a SPARS, support planning assessment recording system.

Evidence can be obtained from reports and documents held within the service.

At Trelowen the people we support are provided with a complaints process. This is also on the notice board for the people we support to see. This is produced in a variety of formats. It is important to review this area with people on a regular frequency to help and support access when required.

In line with HFT operational standards Trelowen undertakes a QA system that includes the views of the people it supports. The information comes from a variety of sources, monthly provider audits, observations with the people we support, assessments of current support plans, views of other agencies, families, and keyworkers and other professionals.

The Annual Quality Assurance Assessment also told us the home made the following changes as a result of listening to people that use the service:

Through SPARS and a person centred approach, people we support at Trelowen have communicated that their day services are not always meeting their needs so Trelowen are starting to offer a range of opportunities to meet individual's needs.

HFT hold an annual Support Person Conference. Representatives from each service contribute to the development of the organisation.

Support person holidays are planned individually in response to individual needs and interests. This includes not going on holiday if they prefer.

Trelowen hold person centred meetings where the people we support are encouraged to participate in the operation of the service delivery.

A computer for a supported person has been installed in the quiet room and another for staff is being installed in the office/sleeping room enabling the supported people to have access to IT and the internet.

The back garden is now an area where the supported person can sit and enjoy it. A

greenhouse has been erected so that the supported persons can grow their own plants. Garden furniture has been purchased allowing any one person we support to be able to eat outside in the summer months and to have quiet space if required.

The AQAA also informed us that staff recruitment, retention, and training is a priority. Reviews of policies and procedures occur. The AQAA also told us that they have received one complaint since the last service review, which was resolved within 28 days.

What are we going to do as a result of this annual service review?

We are not going to change our inspection plan, and will do a key inspection by 10th November 2010. However we can inspect the service at any time if we have concerns about the quality of the service or the safety of the people using the service.

Reader Information

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