

Review of compliance

Leeds Jewish Welfare Board Cranmer Scheme	
Region:	Yorkshire & Humberside
Location address:	Lynda Cohen House 1 Cranmer Road Leeds West Yorkshire LS17 5PX
Type of service:	Care home service without nursing
Date of Publication:	February 2012
Overview of the service:	The Cranmer Scheme is a care home without nursing. The care provider the Leeds Jewish Welfare Board is registered to provide accommodation for up to 16 persons who require personal care. This is where a person who needs personal care lives and is cared for on a day-to-day basis.

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

Our current overall judgement

Cranmer Scheme 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 20 January 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

The people we spoke with told us that they were happy at the home or smiled, nodded and answered 'yes' when we asked if they liked the home and the staff who supported them.

They said they had regular house meetings where they discuss what they like to do, menus and anything that might be bothering them. They also said they met regularly with their key worker to discuss all aspects of their care and support needs.

One person said, "Staff ask us if everything is alright for us."

They also told us if they had any concerns or if they were not getting on with someone they would speak to their key worker, manager or relative.

Relatives said they were made very welcome at the home and kept well informed on the welfare of their relative. One said, "Communication is very good, first class."

People who use the service and relatives we spoke with said they were very satisfied with the care provided. Their comments included:

"I have every confidence in them, they make sure people are well looked after."

"(name of person) always looks clean with clothes all beautifully ironed."

"They make sure we have what we need."

What we found about the standards we reviewed and how well Cranmer Scheme 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 are treated with respect and involved in discussions about their care and treatment and able to influence how the service is run.

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

People who use this service receive safe and appropriate care that meets their needs and supports their rights

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

People who use the service are protected from abuse and staff respect their human rights.

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

People are safe and their health and welfare needs are met by sufficient numbers of appropriate staff.

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 service has quality checking systems to manage risks and assure the health, welfare and safety of people who receive care.

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 could communicate verbally with some people who use the service to find out their views and experiences. They said they were happy at the home or smiled, nodded and answered 'yes' when we asked if they liked the home and the staff who supported them. We saw that people who use the service were comfortable and at ease with staff and had good interaction with them. It was clear that staff knew the people they were supporting very well.

People who use the service said they had regular house meetings where they discuss what they like to do, menus and anything that might be bothering them. They also said they met regularly with their key worker to discuss all aspects of their care and support needs.

One person said, "Staff ask us if everything is alright for us."

We also spoke to relatives who were visiting the home. They said they were asked their opinion on the service at meetings. They also said they were made very welcome at the home and kept well informed on the welfare of their relative. One said, "Communication is very good, first class."

We saw that people were supported to make choices such as what to eat and drink and whether to be involved in activity. On the day of our visit there was a keep fit session organised. Some people chose not to be involved and this choice was respected.

Other evidence

On the day of our visit we saw staff interacting with people in a respectful, positive and caring manner. They showed warmth, patience and thoughtfulness when giving support to people.

We saw that information was presented in ways that people who use the service could better understand. For example, people had easy read and pictorial timetables for their activities and menus and the staff rota was done in photograph format.

The manager spoke of the pre-admission assessment procedure. She said they base it on people's individual needs and usually have contact with previous provider's of care for people, families and advocates. She said they try to involve the person as much as they are able to gain their opinions on what they want from the service. This was supported by review of a recent pre - assessment record.

Other members of staff told us that "they give as much choice as possible" and choice is included in everything from what people who use the service wear, eat or participate in.

We looked at two care plans which were clear, detailed and individualised to the needs of the person using the service. Evidence of the involvement of the person and their relatives was clearly seen.

Minutes of the weekly residents meetings clearly displayed the input from people who use the service in decision making about how the home is run. This included decisions about meals and the activities being planned ranging from tasks around the home to community activities.

Relatives also participated in these meetings, monthly.

Our judgement

People are treated with respect and involved in discussions about their care and treatment and able to influence how the service is run.

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 who use the service and relatives we spoke with said they were very satisfied with the care provided. Their comments included:

"I have every confidence in them, they make sure people are well looked after."

"(name of person) always looks clean with clothes all beautifully ironed."

"They make sure we have what we need."

We saw that care practices were good. Staff were kind and supportive to people, they treated people as individuals. They spoke with sensitivity and discretion when addressing people or assisting them with any care needs.

People looked very well cared for, clean and tidy, had clean clothes and were dressed with thought for their individuality.

People we spoke with said they enjoy a wide range of activity and are supported to have an active social life and keep in touch with family and friends. They spoke of college courses and centres they attend.

People also told us how they liked to get involved in preparing the Shabbat dinner. This is a meal that is arranged every Friday evening in a traditional Jewish style.

Other evidence

We looked at some care records and found that care was clearly planned and regularly

reviewed.

Staff told us that if they were unsure of people's care needs the plans were available to them and stated "I definitely believe that when they can the residents are involved in the care plan, this is also done on a daily basis."

We saw in the records that regular reviews by other health professionals were recorded, including visits or input from the community psychiatric nurse, optician and dentist.

Our judgement

People who use this service receive safe and appropriate care that meets their needs and supports their rights

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

We saw that people were happy and comfortable with staff in their interaction with them. There was positive interaction, good eye contact and staff spoke with sensitivity for people's individual needs.

We saw that people who use the service were comfortable with each other and chose to spend time with each other. They told us if they had any concerns or if they were not getting on with someone they would speak to their key worker, manager or relative.

During our visit, we saw that a person using the service wanted to raise a concern. This was managed appropriately and the person concerned was given the support they needed to do this.

Other evidence

We looked at the care provider's safeguarding policy which was appropriate.

Staff we spoke to were aware of safeguarding procedures.

Our judgement

People who use the service are protected from abuse and staff respect their human rights.

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 and relatives we spoke with said there were always enough staff. Comments we received included:

"They are very well looked after here."

"The carers are always on hand and very kind."

We saw that people had enough staff to meet their needs and staff responded promptly when people needed any assistance. For example, a request for a drink or assistance with mobility.

Other evidence

The manager of the service said rotas were worked out flexibly to make sure staff were available when people needed them. There were no set numbers for any particular time of the day, rotas correlated directly with the needs of individuals taking into account any activities. This approach ensured they always have enough staff to meet care needs.

Staff we spoke to felt that they always have enough staff and said "Sometimes we have more staff, which is good as it allows more time to give residents more. "

Our judgement

People are safe and their health and welfare needs are met by sufficient numbers of appropriate staff.

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 who use the service and relatives we spoke with said they thought the home was well managed and that they had confidence in the manager and staff.

One person said, "They ask us what we think, keep us involved and then you are not frightened to mention things if needs be".

Other evidence

The manager told us of the systems in place to check standards and the quality of care being provided. Senior managers from the organisation visit the home on a regular basis. During these visits they talk with people who use the service, staff and the manager. They make records of these visits, highlighting good practice and any action that may need to be taken to improve the service.

The manager said that they gain feedback on people's satisfaction with the service through house meetings, key worker meetings and their observation of people and their individual ways of communicating their needs and satisfaction.

There are also regular meetings for the relatives and friends of people who use the service. This gives them the opportunity to give feedback on the service, air their views and get together with other relatives.

We looked at accident reporting and health and safety checks which were very comprehensive. The incidents are reviewed centrally by the organisation's human

resources team and any findings reviewed with the manager.

We looked at the health and safety records which were clear and showed that regular checks are completed. Fire drills were undertaken regularly when there were any changes within the home

The manager utilised the CQC's 'provider compliance assessment' to monitor their compliance.

Our judgement

The service has quality checking systems to manage risks and assure the health, welfare and safety of people who receive care.

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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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