

# Review of compliance

Liaise Loddon Limited Cornfields	
<b>Region:</b>	South East
<b>Location address:</b>	Roman Road Winklebury Basingstoke Hampshire RG23 8HD
<b>Type of service:</b>	Care home service without nursing
<b>Date of Publication:</b>	January 2012
<b>Overview of the service:</b>	<p>Cornfields is a care home which provides personal care and accommodation for three young adults who have a learning disability. It is owned by Liaise Loddon Ltd.</p> <p>The home is a three bedroom detached house with a communal lounge and conservatory /dining room that opens out to a paved</p>

	<p>patio area and enclosed rear garden. Cornfields is located within a residential area of Basingstoke, close to local shops and within a five minute car journey to Basingstoke's main shopping centre.</p>
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# Summary of our findings for the essential standards of quality and safety

## Our current overall judgement

**Cornfields 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 8 November 2011, checked the provider's records, observed how people were being cared for, looked at records of people who use services and talked to staff.

### What people told us

People who lived at Cornfields had complex needs and were not able to tell us what they thought about the care and support provided. We spent time in their company in the lounge observing the support they received. We saw that staff were friendly and respectful and that they were quick to respond if anyone appeared unhappy or distressed.

### What we found about the standards we reviewed and how well Cornfields 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 who used this service were treated with dignity and respect.

Overall, we found the service to be compliant with this outcome.

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

People who used this service were given safe and appropriate care.

Overall we found the service to be compliant with this outcome.

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

People were protected from the risk of harm or abuse because the provider had made suitable arrangements to keep people as safe as possible. Overall, we found the service to be compliant with this outcome.

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

People who lived at Cornfields were well supported by sufficient numbers of competent staff.

Overall we found the service to be compliant with this outcome.

**Outcome 16: The service should have quality checking systems to manage risks and assure the health, welfare and safety of people who receive care**

There were appropriate systems in place to monitor and improve the quality of the service provided at Cornfields.

Overall we found the service was compliant with this outcome.

**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 who lived at Cornfields had complex needs and were not able to tell us what they thought about the care and support provided. During our visit, we observed what life was like in the home and how staff interacted with people who lived there. Staff were clearly very skilled at engaging with people in a way that was meaningful to them. We observed that staff always spoke with people before they carried out any task and that they respected people's decisions if they did not want to do what had been suggested.

##### Other evidence

The manager sent us a self-assessment which had been completed for the outcome of respecting and involving people who used services. It was very comprehensive and described in detail what was done to ensure that people were involved in decisions about their care, treatment and support. The information in the self-assessment accurately reflected our findings during our visit.

Conversations we had with staff illustrated that they were very keen to ensure that people's choices were promoted. It was clear that a great deal of consideration and thought had gone into this process. Staff were encouraged to provide feedback on what they had observed that people had liked or disliked and to suggest any ideas about

what they may like to do. There was a daily timetable for staff to follow to provide clarity and structure during the day, however we observed that this was interpreted flexibly to reflect people's changing moods and needs.

We saw that people's support plans were written so that staff would understand, for example, which people were important in the person's life, how they communicated their feelings, and things that they liked and were good at.

There was a lot of information for staff about how people chose to communicate. Staff we spoke with were very clear about how they communicated with each person and we saw that they used picture prompts to good effect when suggesting an activity to a resident.

We saw records of a recent monitoring visit which had been carried out by a senior member of staff. It was clear from this that people's ability to make choices and decisions for themselves was considered and that the need to respect people's privacy and dignity was paramount.

Some of the needs of the current residents were such that they required close supervision to keep them safe. Staff recognised that this could have an impact upon their privacy. Where this was the case, action had been taken to ensure that this was done in the least intrusive way.

#### **Our judgement**

People who used this service were treated with dignity and respect.

Overall, we found the service to be compliant with this outcome.

## 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 were unable to tell us their views about the care and support they received so we cannot report what they said.

However, we observed that staff responded quickly and calmly when a person needed their help. Staff demonstrated that they had a good understanding of what was required to ensure that this person's health needs were attended to.

##### Other evidence

The self- assessment concluded that the home was compliant with this outcome.

People who lived at Cornfields had been there for many years and the support plans that we saw were very detailed. We spoke with staff who had a very good understanding of what was needed to meet people's health and care needs.

All the files we saw contained information which had been reviewed regularly and had been updated where necessary. Staff had signed all people's care notes that we saw to confirm that they had read and understood the information they contained.

We saw a number of examples where staff had followed the guidance contained within people's plans of care, for example, when they were supporting people to carry out activities. At the same time, staff worked flexibly, for example, although there was a daily timetable, this was interpreted flexibly and was dependent upon each person's mood and wellbeing.

Where people lacked the ability to make decisions for themselves, a mental capacity assessment had been undertaken in line with accepted protocols and the home had involved people's nearest relatives and health care professionals to ensure that any decision made was in the person's best interests.

People's health care needs were documented in their records and any contact with an external health care professional was recorded. Changes in people's health, behaviour and medication had been closely analysed to establish what impact they had had upon people's wellbeing.

**Our judgement**

People who used this service were given safe and appropriate care.

Overall we found the service to be compliant with this outcome.

## 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 could not ask people how safe they felt in the home so cannot report what they said. However, we observed that people who lived at Cornfields reacted to staff in a positive way.

##### Other evidence

The home's self-assessment said that they were compliant with this outcome. The information contained in this document demonstrated that there was a very good understanding of safeguarding protocols and procedures. The self-assessment clearly explained how staff were trained in adult protection and how they were also trained how to support people through times of a behavioural crisis. Policies and procedures were in place to ensure that staff managed people's money safely.

During our visit we spoke with staff who understood what to do if they were concerned about the wellbeing of any person who lived at the home. Staff told us they felt confident that any concerns they had would be acted upon and said that they were able to discuss issues with any senior member of staff.

Relatives also provided feedback that staff were approachable.

Staff told us that they had been trained in how to safeguard people, and records we saw confirmed this. Records we saw also indicated that safeguarding and whistleblowing issues were discussed during team meetings and at supervision sessions.

**Our judgement**

People were protected from the risk of harm or abuse because the provider had made suitable arrangements to keep people as safe as possible. Overall, we found the service to be compliant with this outcome.

## 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

We did not ask people what they thought about staffing levels and skills so cannot report what they said. However, we observed that each person was being supported effectively in their daily routines

##### Other evidence

The completed self-assessment from the manager declared compliance in the outcome area of staffing. It detailed how the home ensured that there were always sufficient numbers of staff on duty to support people. It also described how the organisation enabled staff to have the right skills and competencies to meet the needs of the people they supported. The evidence that we gathered during our visit was consistent with this information.

At the time of our visit, there were six staff on duty to support three people. This included one cleaner/housekeeper. Staff told us that, in their view, there were always enough staff on duty to support people with their care and support needs. Rotas we saw also indicated that there was a sufficient number of staff on duty and showed that staffing levels had been altered where necessary, for example, to ensure that there was sufficient cover to support a person to attend a medical consultation.

Staff told us that they felt that they had the skills and knowledge needed to meet the needs of people who lived at Cornfields. They also said that they were well supported by senior staff. One person said that they had been made to feel really welcome when they had joined the organisation.

Records we saw confirmed that staff had regular supervision sessions and that they had attended training in both mandatory health and safety courses and in more specialised areas to reflect the needs of the people they supported, for example in autism and in epilepsy.

The manager and the staff team were also regularly supported by senior workers who were employed to provide specialist advice, for example, with people's health or educational needs.

**Our judgement**

People who lived at Cornfields were well supported by sufficient numbers of competent staff.

Overall we found the service to be compliant with this outcome.

## 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 did not discuss the quality of service provision with people who lived at Cornfield and so cannot report on what they said.

##### Other evidence

The manager's self-assessment declared compliance with this outcome and described how the quality of service provision was monitored. This included, for example, how people's plans of care and any risks identified were monitored and reviewed to ensure that they remained accurate and relevant. The assessment also described how all aspects of running the home were monitored and how any area of possible non-compliance with the Health and Social Care Act 2008 would be addressed.

The information contained in this and in the self-assessments for all other outcome areas that we requested was comprehensive, detailed and was consistent with the evidence that we gathered during our visit.

Staff told us that there had been no complaints made relating to the service but confirmed that there was a procedure in place should someone wish to raise a concern.

We saw records of adverse incidents and accidents that had occurred and these had been completed appropriately. Records we saw showed that people had regular meetings to review their care and that family members and any involved professionals were invited to attend.

Staff had been given copies of an easy guide to the Essential Standards of Quality and Safety to help them to understand the legislation and how to comply with the regulations of the Health and Social Care Act 2008.

Relatives and visitors provided regular written feedback about what they thought about the service provided. We saw recent feedback from relatives which was all positive. During our visit, staff described a wide range of measures that they used to ensure that the quality of the service was maintained. This included regular visits made by senior managers, and very detailed audits of people's files to ensure that they contained all the necessary information and that they were accurate. Records we saw confirmed that these audits were done thoroughly and at regular intervals.

**Our judgement**

There were appropriate systems in place to monitor and improve the quality of the service provided at Cornfields.

Overall we found the service was compliant with this outcome.

# 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

<b>Document purpose</b>	Review of compliance report
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