

# Review of compliance

<p>Ellershaw House Limited Ellershaw House Limited</p>	
<b>Region:</b>	Yorkshire & Humberside
<b>Location address:</b>	<p>Bramley Grange Grewelthorpe, Ripon North Yorkshire HG4 3DJ</p>
<b>Type of service:</b>	Care home service without nursing
<b>Date of Publication:</b>	January 2012
<b>Overview of the service:</b>	<p>Ellershaw House is registered to provide residential social and personal care for 12 adults with learning disabilities in a therapeutic environment, which, along with other therapies offers riding, rebound therapy, music and drama. The registered providers are Mr. and Mrs. Kreutzer- Brett and the registered manager is Mrs Kreutzer- Brett.</p>

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

## Our current overall judgement

**Ellershaw House Limited 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, observed how people were being cared for, talked to staff and talked to people who use services.

### What people told us

We spoke to the people who live at the home and they confirmed that they make their own decisions about how they want to be supported from day-to-day.

For example they said they were asked about what activities they wanted to be involved in during the week. Some wanted to go horse riding, attend cookery lessons whilst others worked in the local community.

People told us that they were supported by the staff to plan activities around what interested them and how they wished to maintain and develop their independence. They also told us about contact and visits to their families and holidays they had enjoyed and also of those planned for the future.

We were invited to look at their bedrooms and they confirmed that they decided how their bedrooms were decorated the colour schemes and what they wanted to have in their rooms such as: music systems, televisions, posters, pictures and other items to personalise their rooms.

Staff worked in a positive and enabling way with individuals and it was evident that they knew people they were supporting very well. Staff asked people what they wanted to do and offered people appropriate support.

### What we found about the standards we reviewed and how well Ellershaw House Limited 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 use services can express, and are involved in, decisions about their care, treatment and support. Overall, we found that Ellershaw was meeting this essential standard.

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

People living at the home receive safe and good quality care that meets their needs and protects their rights. Overall, we found that Ellershaw was meeting this essential standard.

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

Suitable arrangements are in place to make sure people are safeguarded against the risk of abuse. Overall, we found that Ellershaw was meeting this essential standard.

## **Outcome 14: Staff should be properly trained and supervised, and have the chance to develop and improve their skills**

People who use services are safe and their health and welfare needs are met by competent staff. Overall, we found that Ellershaw was meeting this essential standard.

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

People benefit from a safe and good quality service, because good, effective quality monitoring takes place which ensures they are always consulted. Overall, we found that Ellershaw was meeting this essential standard.

## **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 we spoke to told us that they made choices about what they wanted to do from day-to-day. They said that they decided how they wanted to spend their time.

#### Other evidence

We talked to the staff who told us that they have a good understanding of people's individual wishes and their likes and dislikes. They told us that they always supported people in the way they preferred and knew people well enough to support them in the way that they would want.

We saw in the care records that people were involved and had given their consent to the decisions made within their assessments and care plans. Where they were not able to make decisions they were supported by staff, and relatives to do so.

People told us that they did as much as they could for themselves and that this was encouraged by the staff; they wanted to be independent with as little help from staff as possible.

People living at the home met regularly and discussed the issues that affected them, we saw the minutes recorded from these meetings and these were available for

everyone to see.

We observed that staff understood individuals and their different methods of communicating. Staff were respectful and patient; people were not rushed and were able to complete tasks at their own pace. People observed were at ease and comfortable with staff.

**Our judgement**

People who use services can express, and are involved in, decisions about their care, treatment and support. Overall, we found that Ellershaw was meeting this essential standard.

## 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 spoke to people who told us that they decided how they wanted to spend their day. They told us that they decided and planned what they wanted to do and often tried out new activities for instance they enjoyed experiencing holidays in new and different places. They told us that in the last year they had been on safari to South Africa and had holidays planned to 'Oasis', in the Lake District.

##### Other evidence

Staff discussed the care planning process and the systems they have in place to make sure people's needs are identified and met. They understand their responsibilities for assessing and delivering care.

Staff we spoke to recognise the importance of their role in enabling and supporting people and they told us that they felt it was important not to undermine people's independence.

We looked at some of the care records. The records were written in a way that indicated the skills people already had and emphasised the support people needed to manage other tasks. The assessments were good and identified individual needs. We also saw evidence that the documents were person centred. This meant that decisions were made by the individual and that their support would be in the way that they wanted and preferred.

The care plans covered morning and evening routines and how individuals preferred

their care to be provided. In some individual's care plans the daily activities were in a pictorial format to support them in their communication.

We also saw that the care documents were regularly updated and reviewed, this was important to make sure that changing needs were not overlooked.

We saw that people had many opportunities to take part in activities that interest them and staff encouraged people to live fulfilling lives. Individuals told us they have opportunities to pursue other interests outside of the home such as, horse riding, shopping, theatre trips and pub outings. They also enjoyed activities based at their home such as playing music, craft activities, rug making.

During our visit people were rehearsing for a "carol concert", which individuals told us that they had invited friends and family to later in the week.

We joined people for the tea time meal and they told us that they all helped plan and cook the food in the home. We saw that they all participated in the setting of the tables and washing up and clearing away at the end of the meal. The atmosphere at meal time was relaxed and unhurried; people discussed their day time experiences and their plans for the evening.

#### **Our judgement**

People living at the home receive safe and good quality care that meets their needs and protects their rights. Overall, we found that Ellershaw was meeting this essential standard.

## 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 told us that if they had any concerns they talked to the staff or the manager of the service. They confirmed that they found the manager and staff easy to talk to and that they felt their opinions were respected.

##### Other evidence

We saw staff records that confirmed they had completed safeguarding training. The staff said they had received training in how to protect vulnerable people. They were able to describe the different types of abuse and say what action they would take if they suspected abuse or had an allegation of abuse made to them. This was important to protect people who may be vulnerable and made sure staff knew what action to take to ensure people's safety.

We observed that staff were patient and gave people the opportunities to express themselves. We saw that staff were reassuring and gentle and had a good understanding of people's individual needs.

We saw that the service recorded all accidents and incidents and that staff were aware of the procedures for keeping people safe.

We talked to staff about how they managed behaviour that may be challenging; staff told us that they had had extra training to manage certain behaviour. They confirmed that there was a policy of minimum restraint in operation within the home and the manager explained that staff are expected to use de-escalation skills wherever possible

and only use minimum restraint where no alternative is possible. Staff have been guided in this approach by the restraint training that they have all completed. Staff however explained that they always worked with people, calming and reassuring them if they were restless or distressed. We observed that staff were patient and gave people the opportunities to express their distress; staff were reassuring and gentle and had a good understanding of people's individual needs.

We spoke to care management from NYCC (North Yorkshire County Council) who said that they were happy with the care at the home and that they had no concerns.

**Our judgement**

Suitable arrangements are in place to make sure people are safeguarded against the risk of abuse. Overall, we found that Ellershaw was meeting this essential standard.

## Outcome 14: Supporting staff

### 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 competent staff.

### What we found

#### Our judgement

The provider is compliant with Outcome 14: Supporting staff

#### Our findings

##### What people who use the service experienced and told us

We talked to people living at the home who told us that they always had staff support when they needed it.

##### Other evidence

The manager provided a copy of the staff rotas and explained that staffing levels were increased depending on the activities people were engaged in.

We looked at the rotas and saw that staffing levels were good and planned throughout the week to effectively meet the needs of individuals.

We looked at how the staff were supported to do their job. Staff told us that they were well supported by the manager and the deputy manager and confirmed that they had regular supervision and attended team meetings. We looked at the staff files and meeting minutes to see how they had been supported whilst they worked at the home. We saw from the records that the supervision and regular team meetings were in place.

We talked to staff about their training and they told us that the training had made them feel confident to do their work and deepened their understanding. All the staff files that we saw confirmed that the staff had completed induction training that met the required standard and that ongoing training for staff was recorded. The training staff had completed included specialist training such as Autism, rebound therapy and diabetes. This shows that the training is important to the service, and that staff are trained to meet the specialist needs of individuals in the home in a safe and competent way.

**Our judgement**

People who use services are safe and their health and welfare needs are met by competent staff. Overall, we found that Ellershaw was meeting this essential standard.

## 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 living at the home did not comment about this outcome.

##### Other evidence

We saw that care plans were person centred and people had consistent consultation about the care they received at the home.

We saw that the service held regular, "house meetings" and staff meetings, this made sure people living at the home and the staff have the opportunity to have their opinions heard and contribute to decisions made in the home.

The manager told us that there were annual quality surveys sent out to people using the service, their families and advocates. The results from this were used to improve the care and service provided at the home,

We saw the care records and confirmed that these were regularly audited. We looked at the audit records and found they were completed monthly and action taken where concerns were raised.

Staff also told us that the Health and Safety of the home was regularly monitored and that they were all responsible for making sure the home was safe. We looked at the Health and Safety audits at the home, including fire assessments, gas and electrical safety and found they were up to date and complete.

**Our judgement**

People benefit from a safe and good quality service, because good, effective quality monitoring takes place which ensures they are always consulted. Overall, we found that Ellershaw was meeting this essential standard.

# 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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## Care Quality Commission

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