Review of compliance

Hamra Associates Limited Cana Gardens Residential Home	
Region:	East Midlands
Location address:	174 Scraptoft Lane Leicester Leicestershire LE5 1HX
Type of service:	Care home service without nursing
Date of Publication:	December 2011
Overview of the service:	Cana Gardens Residential Home is owned and managed by Hamra Associates Limited. It is a service providing support for up to 8 adults with a learning disability under the following regulated activity:- Accommodation for persons who require nursing or personal care.

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

Our current overall judgement

Cana Gardens Residential Home 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 to check whether Cana Gardens Residential Home had made improvements in relation to:

Outcome 04 - Care and welfare of people who use services
Outcome 07 - Safeguarding people who use services from abuse
Outcome 16 - Assessing and monitoring the quality of service provision

How we carried out this review

We reviewed all the information we hold about this provider, carried out a visit on 28 November 2011, looked at records of people who use services and talked to staff.

What people told us

When we inspected Cana Gardens in June 2011 we were told by someone who lived at the home that they had been on holiday and were involved in activities at a day centre they attended. We were unable to gather the views of people who were at the home when we visited in November 2011 as they were not able to communicate verbally.

What we found about the standards we reviewed and how well Cana Gardens Residential Home was meeting them

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

Care plans provided information as to the support and care people needed along with information about the involvement of health care professionals.

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

Staff had been provided with information about the rights of people who in some instances may not be able to make an informed decision for themselves.

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 had further developed its quality assurance system which had been documented.

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 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
When we inspected Cana Gardens in June 2011 a person who lived at the home told us that they had been on holiday. They also told us that they'd been to hospital and were better now. The person told us they attended day care and that they took part in a range of activities. We found that person centred plans which detailed what was important to people living at the home were not dated. We also found that care plans in some instances had not been reviewed to reflect the recommendations of health care professionals.

We inspected Cana Gardens to find out whether the compliance action which resulted from our inspection in June 2011 had been addressed.

We spoke briefly to someone living at the home who told us that they were well. We saw the person go outside and they told us they enjoyed spending time in the garden. We were unable to gain the views of other people living at Cana Gardens as they are able to communicate verbally.

We looked at the care plans, person centred plans and other supporting records of two people living at the home. We found that care plans and person centred plans had been reviewed and were dated. The care plan for one person reflected the communication passport which had recently been developed with the involvement of a speech and language therapist. The communication passport included pictures of a range of items which the person could use to indicate to staff what they wanted. The care plan of someone else included information from a range of health care

professionals who were currently involved in the persons care.

Other evidence
The manager had notified the care quality commission of events within the home which affect the care and welfare of people.

Our judgement
Care plans provided information as to the support and care people needed along with information about the involvement of health care professionals.

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
When we inspected Cana Gardens in June 2011 we were not able to find out whether people felt safe as they were unable to communicate verbally.

We found that risk assessments were in place for people who were at risk of financial abuse and exploitation and that the issues raised were monitored well by the manager.

Other evidence
When we inspected Cana Gardens in June 2011 staff we spoke with told us about there responsibilities in reporting any suspicions of abuse. Records showed that staff had received training on the safeguarding of vulnerable adults from abuse. We found that staff had not received training on the Mental Capacity Act. The Mental Capacity Act is designed to protect people who can't make decisions for themselves or lack the mental capacity to do so on a permanent or temporary basis.

We inspected Cana Gardens to find out whether the improvement action which resulted from our inspection in June 2011 had been addressed.

The manager by talking with us was able to evidence that they had a good understanding of the mental capacity act including best interest assessments which are undertaken when a person does not have the capacity to make an informed decision for themselves.

The manager told us that in the team staff meeting held in September 2011 they had

discussed with staff the booklets which the home had about the Mental Capacity Act. The minutes of the staff meeting confirmed this. We saw that a meeting which had taken place between the registered manager and manager had identified that training for staff in the mental capacity act would be planned for.

Our judgement
Staff had been provided with information about the rights of people who in some instances may not be able to make an informed decision for themselves.

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
When we inspected Cana Gardens in June 2011 we found that people who used the service and their relatives were sent questionnaires which sought their views about the service provided by Cana Gardens. We found that the information from questionnaires was not collated or the outcome shared with those who took part.

We found that meetings had taken place with people living at the home and that minutes were written which had included pictures and symbols to help people understand what had been talked about.

We inspected Cana Gardens to find out whether the compliance action which resulted from our inspection in June 2011 had been addressed.

Other evidence
The manager had collated the information gathered from questionnaires. We found that any comments made by people had been addressed which had including the decorating of the lounge and the purchasing of new sofas.

The manager told us that they had frequent conversations with relatives of people living at Cana Gardens which included responding to any comments they raised.

Minutes of the staff meeting held in September 2011 recorded that the manager had undertaken an audit of medication and daily records and that their findings had been discussed with the staff team, which included areas for improvements.

Our judgement
The service had further developed its quality assurance system which had been documented.

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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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