

# Review of compliance

Education and Services for People with Autism  
Limited  
Garden Lodge

<b>Region:</b>	North East
<b>Location address:</b>	Maureen Terrace Seaham Co Durham SR7 7SN
<b>Type of service:</b>	Care home service without nursing
<b>Date of Publication:</b>	July 2012
<b>Overview of the service:</b>	Garden Lodge is registered with the Care Quality Commission for the regulated activities of accommodation for persons who require nursing or personal care. The home does not provide nursing care but community based nurses can visit to treat people with these needs. The home was a purpose-built house

	<p>and has eight single bedrooms, two living rooms, a dining room and sunroom. It is set in its own gardens in a residential area, near to public transport routes and local shops.</p>
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# Summary of our findings for the essential standards of quality and safety

## Our current overall judgement

**Garden Lodge was meeting all the essential standards of quality and safety inspected.**

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 12 June 2012, observed how people were being cared for, looked at records of people who use services, talked to staff, reviewed information from stakeholders and talked to people who use services.

### What people told us

We used a number of different methods for example observing how people were cared for to help us understand the experiences of people using the service. This was because we were not always able to get people's direct comments about the care they received.

The assistant manager told us that most people who lived at this home could find it difficult to express their overall views about the service directly. To overcome this they had carried out surveys (in a format that people could understand) with the people who lived at the home and their relatives and / or advocates.

The most recent survey found that, Everyone said that they were happy at Garden Lodge, they said that the staff team helped them take part in activities they liked. They liked the food, they were warm and they liked their home.

Relatives said that the homes strengths were training, dedicated staff and management, staff team work, well maintained premises, good staff ratio, good activities and holidays, and good healthcare and diets

People were happy with the support they received with their care and welfare.

During our visit we saw that staff respected people's privacy and dignity. They were friendly and very polite and they knocked on bedroom doors before entering. One person who lived at the home told us, "I'm going horse riding now." Another said, "Yes I'm fine here."

Relatives said that staff and the manager had a really good understanding of their relative's likes and dislikes and the home supported people to have good healthcare.

One relative said, "(Persons name) is fed better than I could ever provide at home."

Other relatives had made comments about staff. They said things like,

"Staff have a sense of humour, I think it's important."

"Staff acted on (my request) immediately"

Another relative said, "The key worker is the most conscientious and caring person I know."

## **What we found about the standards we reviewed and how well Garden Lodge 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**

The provider was meeting this standard. People's privacy, dignity and independence were respected.

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

The provider met this standard. People experienced care, treatment and support that met their needs and protected their rights.

### **Outcome 09: People should be given the medicines they need when they need them, and in a safe way**

The provider met this standard. People were protected against the risks of unsafe use or management of medicines because the provider had appropriate arrangements in place.

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

People were cared for by staff who were supported to deliver care and treatment safely and to an appropriate 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**

The provider had an effective system to regularly assess and monitor the quality of service that people receive.

## **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.

Where we judge that a provider is non-compliant with a standard, we make a judgement about whether the impact on people who use the service (or others) is minor, moderate or major:

A minor impact means that people who use the service experienced poor care that had an impact on their health, safety or welfare or there was a risk of this happening. The impact was not significant and the matter could be managed or resolved quickly.

A moderate impact means that people who use the service experienced poor care that had a significant effect on their health, safety or welfare or there was a risk of this happening. The matter may need to be resolved quickly.

A major impact means that people who use the service experienced poor care that had a serious current or long term impact on their health, safety and welfare, or there was a risk of this happening. The matter needs to be resolved quickly.

Where we identify compliance, no further action is taken. Where we have concerns, the most appropriate action is taken to ensure that the necessary changes are made.

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 spoke with several people who lived at the home.

One person told us, "I'm going horse riding now."

Another said, "Yes I'm fine here."

The assistant manager told us most people who lived at this home found it difficult to express their overall views about the service directly. To overcome this she had carried out surveys with the people who lived at the home and their relatives and/or advocates.

The most recent survey carried out found that,

People living at the home were happy, liked the food and liked their home.

People who lived at the home said the staff team helped them and some people were able to say what activities they liked and what they would like to do more of.

Relatives and advocates said their views were listened to and acted upon by staff and the service.

**Other evidence**

People who use the service were given appropriate information and support regarding their care or treatment.

The assistant manager said there was an up-to-date Service User Guide which told people about how the home made sure their right to privacy was respected. For example, people's rooms were considered to be private areas with locks on doors and staff treating these areas respectfully by knocking to check that it was alright to go in.

People's diversity, values and human rights were respected. We spoke with carers who were able to provide good examples of how they respected people's choices, privacy and dignity. We observed this being put into practice throughout the inspection. For example, we saw staff treating people with respect, maintaining their dignity actively listening to them and responding to their requests appropriately.

The manager told us the people living at Garden Lodge had capacity to make decisions in some areas of their lives. For those who did not or for more complex issues they consulted families, care managers, key workers, staff and advocates to make decisions in the person's best interests.

The manager told us all staff had undertaken specialised training to support each individual to make their needs known i.e. visual aids, signing and gestures.

The manager told us that they had developed 'visual boards', timetables, and structure to help people to predict timescales and routines that they may need to lead a meaningful lifestyle. This had helped people to use this information on their own throughout the day, promoting people's independence.

We saw staff encouraged people to give their views and support people to make choices and decisions. People were asked about things like activities they would like to do and meal preferences, which staff then supported. We also saw people who lived at this home asserted their views and preferences and were empowered and encouraged to say what they thought.

We looked at care plan records and saw some of these were written in ways which helped people to understand and take part in them. Some people were keen to show their care plans to us and had signed them to show that they had been involved in agreeing them. Care plans showed the opportunities people had and the choices that they had made.

When we visited Garden Lodge we saw people living at the home were treated with respect by staff who knew them well. Relationships between people and with staff were relaxed, friendly and informal which helped them to feel comfortable. People appeared to be relaxed and happy with the support they got from staff. All of these measures showed that people were treated with respect and involved in making decisions about their care.

**Our judgement**

The provider was meeting this standard. People's privacy, dignity and independence were respected.

## 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

The assistant manager told us that most people who lived at this home found it difficult to express their overall views about the service directly. To overcome this she had carried out surveys with the people who lived at the home and their relatives and or advocates.

The most recent survey carried out by the manager found that:-

Relatives said that staff and the manager had a really good understanding of their relative's likes and dislikes and the home supported people to have good healthcare.

One relative said, "(Persons name) is fed better than I could ever provide at home."

##### Other evidence

Care and treatment was planned and delivered in a way that ensured people's safety and welfare.

When we visited the home there were seven people living there. We spent time talking with them, and watching how staff gave them support and care. We then looked at their records with staff to see how peoples care was to planned, monitored and co-ordinated.

We spoke with two of the staff who told us that every person who lived at the home had a care plan. They described to us in detail how staff at the home made sure that people

were properly cared for and how this was written in their care plans.

We saw each person's needs had been assessed, and plans of care written to describe how each area of need was supported. The assessments we looked at provided very detailed information about people's condition which had been reviewed and updated by senior staff. We looked at examples of how peoples' needs were to be met by staff. We found that every need had clear descriptions of the actions that staff were to take, and these had been written in detail so staff would know what they had to do.

Some of the people who lived at this home found it difficult to say what their needs and preferences were. To help others understand their important requirements, preferences and background, each person had a document called "About Me". This told staff, in detail, all about that person's needs and preferences, using pictures and photographs.

Where people were at risk, there were assessments which described the actions that staff were to take to reduce the likelihood of harm.

When we talked to staff we found they had an excellent understanding of people's histories, needs and preferences which they needed to support people. From their records we saw staff also worked closely with other community-based health and social support staff to make sure people's wider needs were supported. The way that care plans were written showed how they were to be supported and there were reviews to see if their needs had changed. There was evidence in care plans that a great deal of thought, consideration and care had gone into this process. For example, there were descriptions about how people were to be supported to take risks to help them to be independent whilst reducing the likelihood of harm. All of these measures showed that people were receiving appropriate care, support, treatment and specialist support when this was needed.

### **Our judgement**

The provider met this standard. People experienced care, treatment and support that met their needs and protected their rights.

## Outcome 09: Management of medicines

### What the outcome says

This is what people who use services should expect.

People who use services:

- \* Will have their medicines at the times they need them, and in a safe way.
- \* Wherever possible will have information about the medicine being prescribed made available to them or others acting on their behalf.

### What we found

#### Our judgement

The provider is compliant with Outcome 09: Management of medicines

#### Our findings

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

We spoke with people using the service, but their feedback did not relate to this standard.

##### Other evidence

Prescribed medicines were given to people appropriately.

When we visited the home, we looked at the medication records held on behalf of people who lived there.

We checked to see if medication was safely handled and saw, for example records of staff signatures were kept so that the person who had been responsible for administration was clear. A copy of the homes policy and procedure for the administration of medicines was included in the records. This meant staff could check they were giving medication properly. All the controlled drugs held in the home were stored securely, correct amounts were held in stock, with clear records kept. All of the controlled drugs held were stored correctly.

We checked the management of other medicines and found stock levels and records were accurate. This was the case for both medicines supplied in a 'monitored dosage system' and 'loose' stocks. The monitored dosage system is where medicines are supplied in blister packs prepared by the pharmacist. This meant the people had received the treatment they had been prescribed.

The assistant manager told us she had received accredited medication training. She said this included training in the medication administration system used at the home and specific training had taken place with the homes pharmacist. All of these measures ensured that people who lived at the home were given the medicines that they had been prescribed.

**Our judgement**

The provider met this standard. People were protected against the risks of unsafe use or management of medicines because the provider had appropriate arrangements in place.

## 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 spoke with several people who lived at the home.

One person told us, " Tonight I'm going to the disco with (staff)."

The acting manager told us that most people who lived at this home found it difficult to express their overall views about the service directly. To overcome this she had carried out surveys with the people who lived at the home and their relatives and/or advocates.

The most recent survey carried out by the manager found that, people who lived at the home said they were happy with the way the staff team helped them. Relatives made positive comments about staff training and their communication with staff; some said it was excellent. All relatives who responded to the survey said the quality of care and support from staff was 'good' or 'excellent'.

Relatives made comments about the way that staff worked, they said,

"Staff have a sense of humour, I think it's important."

"Staff acted on (my request) immediately"

"The key worker is the most conscientious and caring person I know."

"The staff are excellent."

"Staff have excellent communication with families."

### **Other evidence**

Staff received appropriate professional development.

When we visited the home we saw care workers were well organised with shift patterns that reflected the demands of people living at the home and records showed sufficient numbers of people had been working there. The assistant manager told us the staffing ratio within Garden Lodge was always high because people who lived there needed significant support. She told us only permanent staff were employed and there was a low turnover of new staff which helped to make sure that care was consistent.

The assistant manager told us that all staff at Garden Lodge received an annual appraisal and six supervisions each year to review their performance and set targets. She told us the provider had its own training department which supported staff to gain the skills and knowledge they needed to support the people who use services. Records showed there was an extensive programme of induction training for all staff, which included Common Induction Standards with courses in Autism Awareness, Communicating with people with Autism Spectrum Conditions, Sign Language, First Aid, Manual/People Handling, Food Hygiene, Fire Safety and An Introduction to Behaviour. There was also a 'Service Development Plan' for the home each year which included a review of job roles, job specifications and training requirements to make sure that training was up to date and relevant to the people who lived at the home. All staff working in Garden Lodge had received relevant training which included National Vocational Qualifications (NVQ) in care and promoting independence.

The manager told us staff were supported to achieve relevant qualifications and access training to provide 'continuous professional development' including courses such as, Diploma in Health and Social Care, Diploma in Health and Social Care L4 Management, Accredited Behaviour Training and Autism Spectrum Conditions Training.

When we visited the home we saw staff demonstrated 'in depth' knowledge of people's needs and the strategies and approaches they used to support them. Staff showed that they were competent in their role as care practitioners and this was reflected in their care practice.

The assistant manager told us there were regular staff meetings and when we visited the home we saw copies of team meeting minutes which showed this had been thorough and a variety of relevant areas had been discussed. All these measures showed that people were cared for by staff who were supported to deliver care to an appropriate standard.

### **Our judgement**

People were cared for by staff who were supported to deliver care and treatment safely and to an appropriate 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

We spoke with several people who lived at the home. One person told us, "Garden Lodge.....good."

The acting manager told us most people who lived at this home could find it difficult to express their overall views about the service directly. To overcome this she had carried out surveys with the people who live at the home and their relatives and / or advocates.

In the most recent survey relatives said,

"If all (ESPA) services are run as well (as Garden Lodge) I will be amazed."

"(Service user) safety is paramount to the staff."

"The home has a warm feeling as soon as you enter the building."

##### Other evidence

People who use the service, their representatives and staff were asked for their views about their care and treatment and they were acted on.

The acting manager said they had monitored the quality of service at Garden Lodge by using surveys. We looked at records which showed us that these had been sent to people who lived at the home, relatives and staff. Information gathered from the surveys had helped to show where changes could be made. An example was that

relatives and staff felt that Garden Lodge needed more space to improve the quality of life and provide more privacy, choice and space for people living there. As a result of listening to people they had improved the service by building an extra room; and further building work had been planned to the layout of the home.

When we visited the home, staff told us they had consulted and supported the people who live there, to raise any concerns they may have had in relation to their care and preferences. This had influenced a change in the way things were done. For example, staff time was prioritised so that peoples' usual daily and weekly routines were maintained. Where leisure or social activities were not available these were substituted so that everyone's usual routine was maintained as far as possible.

The assistant manager told us they carried out monthly recorded checks of care plans, risk assessments, medication, people's nutrition, health and safety, fire safety, and the environment. When we visited the home and looked at these records we saw that there was an extensive number of checks and audits had been taking place. The assistant manager showed us how she and other senior staff used these, along with their daily presence amongst residents and staff at the home to make sure the home was functioning well and that progress towards identifiable and measurable targets was being met. This was very well organised and managed. All of these measures ensured that the performance of the service was effectively monitored and assessed.

#### **Our judgement**

The provider had an effective system to regularly assess and monitor the quality of service that people receive.

# 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.

Where we judge that providers are not meeting essential standards, we may set compliance actions or take enforcement action:

**Compliance actions:** These are actions a provider must take so that they **achieve** compliance with the essential standards. 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
<b>Author</b>	Care Quality Commission
<b>Audience</b>	The general public
<b>Further copies from</b>	03000 616161 / <a href="http://www.cqc.org.uk">www.cqc.org.uk</a>
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