

Review of compliance

<p>Extrafriend Limited The Willows</p>	
<p>Region:</p>	<p>East</p>
<p>Location address:</p>	<p>Corders Farm Bury Road, Lawshall Bury St Edmunds Suffolk IP29 4PJ</p>
<p>Type of service:</p>	<p>Care home service without nursing</p>
<p>Date of Publication:</p>	<p>August 2012</p>
<p>Overview of the service:</p>	<p>The Willows is a residential care home which provides care and support for to 25 older people. The Willows is registered to provide accommodation for people who require personal care.</p>

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

Our current overall judgement

The Willows 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 to check whether The Willows had taken action in relation to:

Outcome 01 - Respecting and involving people who use services

Outcome 04 - Care and welfare of people who use services

Outcome 07 - Safeguarding people who use services from abuse

How we carried out this review

We reviewed all the information we hold about this provider, carried out a visit on 3 July 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

We spoke with two people who used the service. People told us that they were involved with their care, support and treatment. One person told us "I'm very happy here. I can just ask for anything I want and they sort it out". They received the appropriate care to meet their needs.

People told us that if they had any concerns they would speak to the manager. They felt confident matters would be resolved. A typical comment was "I feel happy and safe living here. I'm confident that the manager would sort out and problem, but I do not have any".

What we found about the standards we reviewed and how well The Willows 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 views and experiences were taken into account in the way the service was provided and delivered in relation to their care.

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

The provider was meeting this standard. People experienced care, treatment and support that did meet their needs and protected their rights.

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

The provider was meeting this standard. People who use the service were protected from the risk of abuse, because the provider had taken reasonable steps to identify the possibility of abuse and prevent abuse from happening.

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 two people who use the service. People told us that they were involved with their care, support and treatment. One person told us "I'm very happy here. I can just ask for anything I want and they sort it out".

Other evidence

This was a responsive inspection to follow up non compliance. At our last inspection we found that the service did not have suitable arrangements in place to encourage autonomy, independence and community involvement. During our visit on 03 June 2012, we examined three care plans. Each plan was developed to meet the needs and wishes of the individual. We saw evidence in care plans that people were involved in their reviews. We saw copies of letters to relatives involving them in reviews. Therefore people using the service and their representatives were involved in making decisions about their care and treatment. In addition the service had developed a policy in May 2012 that set out how and when to involve people who use the service and their families in care planning and reviews.

We found that people were supported in promoting their independence and community involvement. A newsletter was widely distributed with in the service and advertised all the community based activities from church services, library visits, hairdressers, the

recent fete, planned coffee mornings and clothes sales.

We sat in on the residents meeting that was planned that day at 11am in the main lounge. At the meeting there were 12 people who used the service supported by three staff. Discussions and decisions were made about how to spend money raised at a recent fete. meals, activities and the recently introduced afternoon tea were also discussed. Therefore people who use the service not only understood choices available to them, but directly influenced how they should be supported. We also saw previous minutes of residents meetings where by care plans and service user involvement had been discussed.

Our judgement

The provider was meeting this standard. People's views and experiences were taken into account in the way the service was provided and delivered in relation to their care.

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 we spoke with said that they received the appropriate care to meet their needs.

Other evidence

At this responsive review we followed up a previous non compliance relating to a lack of risk assessments and best practice in relation to people living with dementia. Peoples' needs were assessed and care and treatment was planned and delivered in line with their individual care plan. We saw evidence in three individualised care plans based upon extensive assessment and planning involving people who use the service and their families.

Relevant research and guidance was used and appropriate medical professionals were consulted and their recommendation incorporated into care planning. We saw evidence of risk screening and risk management to ensure care and treatment was planned and delivered in a way that ensured people's safety and welfare. Examples included: individualised manual handling assessments and plans and medication risk assessments with potential side effects. All assessments seen were regularly reviewed and up to date.

The service had made progress on implementing best practice guidance in relation to people living with dementia or other memory related problems. The activities program had been revised and reminiscence boxes and books had been obtained and used by staff and people at the service. Ten staff were booked on a specialist course on activities for people living with dementia. We saw that pre course work books had been

completed in anticipation of the course the following day.

There was evidence of regular reviews and updates of care planning that involved people who used the service.

Our judgement

The provider was meeting this standard. People experienced care, treatment and support that did meet their needs and protected 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 spoke with two people using the service and they told that if they had any concerns they would speak to the manager. They felt confident matters would be resolved. A typical comment was "I feel happy and safe living here. I'm confident that the manager would sort out and problem, but I do not have any".

Other evidence

At this responsive review we followed up a previous non compliance. We noted that the provider had suitable arrangements in place to ensure that people were protected against the risk of abuse. We saw evidence that the provider responded appropriately to any allegation of abuse and took concerns seriously.

The service had a copy of the local adult safeguarding policy. We also saw that the service had their own policy and procedure in relation to safeguarding vulnerable people from abuse. We spoke with three staff and they told us they had received training in safeguarding vulnerable people from abuse and whistle blowing. They were able to confirm different types of abuse and what action they would take if they were alerted to a potential abuse situation.

Our judgement

The provider was meeting this standard. People who use the service were protected from the risk of abuse, because the provider had taken reasonable steps to identify the possibility of abuse and prevent abuse from happening.

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

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Author	Care Quality Commission
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