

Review of compliance

DEAF-initely Independent

26 – 28 Warwick New Road

Region:	West Midlands
Location address:	26-28 Warwick New Road Leamington Spa CV32 5JJ
Type of service:	Care home service without nursing
Publication date:	June 2011
Overview of the service:	The home offers accommodation for up to nineteen younger adults who are deaf and have a learning disability. There are adaptations to the property which reflect the needs of the people who live there to enable them to maintain their independence. A number of amenities are located nearby enabling people to access their community.

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

What we found overall

We found that 26 – 28 Warwick New Road was meeting all the essential standards of quality and safety we reviewed.

The summary below describes why we carried out the review, what we found and any action required.

Why we carried out this review

We carried out this review because concerns were identified in relation to:

- 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 May 2011, observed how people were being cared for, talked with people who use services, talked with staff, checked the provider's records, and looked at records of people who use services.

What people told us

People told us that they were happy living in their home and felt safe there. One person said that staff were "good". Due to the complex communication needs of some people who live in the home it was not possible to receive their views, however observation of their interaction with staff showed that they were relaxed and comfortable in their presence.

What we found about the standards we reviewed and how well 26 – 28 Warwick New Road was meeting them

Outcome 7: People should be protected from abuse and staff should respect their human rights

There are policies and procedures in place, as well as staff training to make sure that people are protected from the risk of abuse.

- Overall, we found that 26 – 28 Warwick New Road was meeting this essential standard.

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 7: 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 7: Safeguarding people who use services from abuse.

Our findings

What people who use the service experienced and told us

We spoke to two people who use the service, both of whom commented that they were happy living in their home and felt safe there. We were told that staff were "good".

Other evidence

The service has policies and procedures which instruct staff what to do in the event that abuse is disclosed, suspected or observed. The manager told us that these documents are currently being reviewed by a human resources consultant to make sure that they continue to be robust and reflect both local authority and good practice guidance.

The three staff members we spoke to were able to describe their roles in protecting vulnerable adults, which was in keeping with the adult protection policy provided by the service.

Staff described using written and agreed protocols to support people who may demonstrate behaviour that is challenging and could place themselves or others at risk of harm. The staff members told us that they were mindful of individual guidance so that people would always be treated with respect and protected from risk of harm.

Training records showed that training in adult protection had been provided to all staff within the last two months. Further training for the home's board members is scheduled this month. This should ensure that people working within the service are aware of their roles and responsibilities in recognising and reporting abuse.

Some people living in the home are unable to manage their own finances so they are given assistance by staff. There is a system of recording and auditing individual's finances for their ongoing protection. We were told that there had been no reports of financial errors since our last visit, which indicates that the system is working effectively.

Our judgement

There are policies and procedures in place, as well as staff training to make sure that people are protected from the risk of abuse.



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

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