

# Review of compliance

## Caulfield & Gopalla Partnership Newton House Residential Care Home

<b>Region:</b>	London
<b>Location address:</b>	Newton House, 4 Newton Close Hackney London N4 2RQ
<b>Type of service:</b>	Care home service without nursing
<b>Date of Publication:</b>	July 2012
<b>Overview of the service:</b>	Newton House is a residential care home providing care, support and accommodation for up to nine men with mental health support needs. The home is located in Stamford Hill in Hackney close to local shops and public transport.

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

## Our current overall judgement

**Newnton House Residential Care Home was not meeting one or more essential standards. Action is needed.**

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 26 June 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 three out of nine people who told us that they liked the home. They said the staff were supportive and that they received a good service. They said staff respected them, their needs were met and they felt safe. People said that staff frequently asked them if they were ok and if there was any way their service could be improved. People we spoke with told us that they felt they were developing more independent living skills since they moved into the home. One person said, " It has met my expectations and more. Staff respect and help me." Another said, "Staff help me with what I need.....and I can do more things for myself now."

### What we found about the standards we reviewed and how well Newnton House Residential Care Home 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's privacy, dignity and independence were respected. The provider was meeting this standard.

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

People's needs were assessed and care and treatment was planned and delivered in line with their individual plans. The provider was meeting this standard.

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

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. The provider was meeting this standard.

**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. The provider was meeting this 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. The provider was meeting this 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.

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 three people who lived in the home. Six people were out at the time of the visit. One person told us, "Staff are ok. Staff treat me well. They ask me what I want help with. They knock on the door before they come in. I don't feel I have any cultural needs that the staff aren't helping me with. The staff know what I don't like to eat so they don't give me that food. Most people are Church of England and we celebrate Christmas, Easter and birthdays." The provider may wish to note that this person also said, "Staff are friendly, but they could do with talking to me more because they are busy. They are busy with paperwork or other patients who can't go out by themselves."

The other person we spoke with told us, " I used to visit the home to get used to it a couple of times a week before I came here. It was my decision to come here. It has met all my expectations and more. Staff respect me. It is much better than the place I was in before. There is more support. They help me with shopping and managing my money."

##### Other evidence

We saw positive interaction between staff and people who used the service. Individual plans recorded people's religious and cultural needs. One person told us they preferred to worship together with their family, whom they were able to visit weekly. People's files contained forms that set out the expectations and rules of the house. These were

signed by people to show that they had understood and agreed to the rules. Where possible people were encouraged to be independent and to make their own decisions. For example, some people went out shopping with staff but chose the items they wanted. Everyone in the home had their own cupboard where they kept their own foods and had their own compartments in the fridge. People were encouraged to cook their own preferred meals where able and as part of their individual plans.

**Our judgement**

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

One person said, "Staff support me with what I need. They help me with getting up in the morning. They used to knock on the door to help me to get up when I needed but I can get up myself now. They did things for me if I couldn't do them myself but I can do more things for myself now." Another person told us, "Staff are pretty good."

The other person we spoke with said, " The staff are very supportive. They give me advice and guidance. Now I'm doing better with cooking because the support I've had has helped me along. The staff remind me about appointments and my medication but eventually I will take it myself."

##### Other evidence

People's daily activities varied according to their preferences and all had programmes that were personalised to their needs. People we spoke with attended a day centre where they took part in activities like computing and gardening. People said they also went to the local parks and one person said they went to the gym. People's support needs and their abilities to live independent lives were individually assessed.

At the last inspection the home was found to need improvement in the standard for care and welfare. This was due to the care plans and observation notes not always containing precise enough information to identify mental ill-health warning signs. We found there had been improvements in the quality of care plans and risk assessments in relation to the needs of our people using the service. Care plans had all been renewed and clearly outlined individual support needs. They were updated as a

mimumum once a month or if any changes in need. Care plans covered areas such as medication, budgeting, personal hygiene, support with smoking cessation and physical health issues. Files also contained mental health relapse triggers in risk assessments including management plans. Other risks to individuals were also identified to help support people to live independent lives.

Individual files were well organised and indexed. They contained details of the person's identified key-worker, care coordinator, a Health Action Plan and daily observation records. The daily records recorded the person's progress and activities during the day. They were detailed, clearly recorded and updated three times a day. They included the views of the person in the home and actions taken with them. This was an improvement to the records seen at the last inspection.

Documents and correspondence in files showed that people had access to a range of medical professionals to meet their health needs. We also saw that information leaflets in were available in files about the diagnosed medical conditions of individual people. These were particularly helpful for staff in getting to know and caring for people. We saw evidence that people's needs were monitored in Care Programme Approach reviews. These took place approximately every three months and provided further support for people to achieve their objectives. Some people in the home were required to have regular weekly drug and alcohol tests and records showed that staff complied with these requirements.

People met with their key workers once a month to talk about their progress and discuss their care plan needs. They told us that they found this very helpful. We were able to see that the support offered by staff had a positive impact on people to achieve their aims. One person, for example, had stopped drinking as a result of the support they received.

### **Our judgement**

People's needs were assessed and care and treatment was planned and delivered in line with their individual plans. The provider was meeting this 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

One person told us, "I feel I'm safe. I would tell staff if I had any concerns about abuse. I haven't had any complaints since I've been here but I would talk to the head staff or manager if I did." Another person said, " I feel safe here. I know that if something happened and there was an incident, you go to staff. You don't react to it. But I'm glad to say that has never happened. " A staff member told us, " I would report to my line manager. I'd go to another senior manager if they were not there but they are always there. I would record clearly what happened and what action I've taken."

##### Other evidence

At the last inspection the service was found to be non-compliant with standards in relation to a safeguarding concern raised by a complaint. Since then we found that the service had worked well with the local safeguarding team to address the main issues. The service was visited a number of times by the local council officers as part of the safeguarding investigation that arose at that time. The officers monitored how the service was implementing the action plan that resulted from this safeguarding process. The manager told us that they had achieved all the actions that were identified in the plan and we found evidence of this.

All staff in the home have received safeguarding training. The training included recognising signs of abuse and reporting abuse. The safeguarding policy and procedure had been updated and staff were aware of what action to take if they had any safeguarding concerns. The acting manager and supporting manager both reported that there had been no further safeguarding concerns since the last inspection.

**Our judgement**

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. The provider was meeting this 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 spoke with people using the services but their feedback did not relate to this standard.

##### Other evidence

We spoke with a support worker who worked in the home for several years. They said they enjoyed working in the home and had all their essential checks before starting work. They said when they started they shadowed more experienced colleagues, read the home's policies and got to know people. They said they had monthly recorded supervision meetings and that the management were very approachable, supportive and always available. All the people in the home had a named support worker and had meetings with them to discuss their progress.

We spoke with the manager who said that all staff had either NVQ Level 2 or 3 qualifications. We looked at two staff files and found these to be well organised, the records and documents were clear and easily accessible. Staff had received ongoing training and their certificates available. These included training in medication administration, risk assessments, health and safety, first aid, mental capacity, food hygiene, infection control and in-house for managing challenging behaviour. Staff files included sections on continuous professional development, supervision, appraisal and disciplinary matters. Regular supervision meetings addressed work performance issues, training and support needs for staff to work more effectively. We saw evidence of annual performance appraisals in files. To add to their training, staff completed online E-learning provided by Skills for Care. A member of staff we spoke with had recently completed online training on person centred care. They said they were more

able to understand and meet the needs of people using the service through the training they received.

**Our judgement**

People were cared for by staff who were supported to deliver care and treatment safely and to an appropriate standard. The provider was meeting this 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 told us that staff asked them about their experiences and service. One person said, "We have a meeting each month, like a house meeting, where we are asked if everyone is ok, what they can do better and if anyone wishes to raise anything. It is like a community meeting."

##### Other evidence

A system was in place for regular daily, weekly and monthly audits and checking the quality of service. Senior managers visited to monitor and produce a report about the service every month. We looked at visit reports and these were up to date. As part of these visits interviews took place with people in the home and with staff. People had made positive comments about the service in the reports. Staff said that they were satisfied with their jobs and felt very supported.

Internal and external premises were inspected and we saw audits and reports about these. The services provided to people were also checked, such as their activity programmes, care plans, risk assessments and medication records.

Action plans were produced to address any areas for improvement. Outstanding items from previous visits were addressed and recorded. The latest report noted that one of the outstanding actions was to appoint a registered manager for the service. This was the manager's post was vacant and being covered by the deputy manager and another location's registered manager. We were told that the vacancy was to be advertised shortly once existing issues in relation to the registration of the previous manager were

addressed.

**Our judgement**

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

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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