

Review of compliance

Branksome House Branksome House	
Region:	South West
Location address:	26 Tuffley Avenue Gloucester Gloucestershire GL1 5LX
Type of service:	Care home service without nursing
Date of Publication:	March 2012
Overview of the service:	Branksome House is a small home for up to nine individuals with a learning disability. Accommodation is provided in single rooms with shared facilities such as bathrooms and showers. There is one lounge with separate dining room and secure garden.

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

Our current overall judgement

Branksome House was meeting all the essential standards of quality and safety but, to maintain this, we have suggested that some improvements are made.

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 January 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

Individuals we spoke with who live at Branksome House told us that: "staff are all very kind", "I choose what I do for myself". One person said: "staff are nice to me every day, I like it here" and "its a very good home and I enjoy living here".

Staff we spoke with told us that the good things about the home are: "it is very homely, just like a family", "we try to promote independence and give choice" and "we try to make it as homely as possible".

What we found about the standards we reviewed and how well Branksome House 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

Individuals living at Branksome House have an opportunity to exercise choice and make decisions about their daily lives.

The service upholds the privacy, dignity and independence of those living at Branksome House.

Overall we found that Branksome House was meeting this essential standard.

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

and supports their rights

The service undertakes comprehensive and person centred assessments of individual's health and social care needs.

Individuals living at Branksome House receive effective, safe and appropriate care that meets their needs and protects their rights as individuals. However, there is not always information included in care plans about risks associated with health care.

Overall, we found that Branksome House was meeting this essential standard but, to maintain this, we suggested that some improvements were made.

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

People who live at Branksome House are protected from abuse or the risk of abuse.

Overall we found that Branksome House is meeting this essential standard.

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

Staff receive good support from the manager of the service.

Staff have received the necessary training so that they have the skills and knowledge to meet peoples needs.

Overall we found that Branksome House was meeting this essential 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

There are good arrangements for the auditing and monitoring of the quality of the service.

There is no formal system to seek the views of individuals and others about the quality of care provided at Branksome House.

Overall, we found that Branksome House was meeting this essential standard but, to maintain this, we suggested that some improvements were made.

Actions we have asked the service to take

We have asked the provider to send us a report within 28 days of them receiving this report, setting out the action they will take to improve. We will check to make sure that the improvements have been made.

Where we have concerns we have a range of enforcement powers we can use to protect the safety and welfare of people who use this service. When we propose to take enforcement action, our decision is open to challenge by a registered person through a variety of internal and external appeal processes. We will publish a further report on any

action we have taken.

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 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

Because of the level of disability we were only able to talk with two people living in the home. One person told how they were able to: "choose what I do for myself". They had also asked and were given a key for their room. The other person said: "when I go to bed is my choice". They also told us how they could go to their room when they liked.

Other evidence

We spoke with a member of staff who is the Dignity Champion for the home. They told us how they try to promote respect for individuals and dignity in the home. They said how this is about "giving choice, seeing people as individuals". It was also about promoting independence giving people the opportunity to "do as much as they can for themselves".

Care plans we looked at gave information about how individuals were able to make choices in their daily lives from getting up, going to bed and how they wished to spend their day particularly the activities they liked. They also gave information about how the individual expressed sadness and happiness. We noted that records showed one individual had refused to see a dentist and this decision had been respected.

We had limited opportunity to observe staff because all of those living in the home were going out to play skittles and have a fish and chips lunch. However, we observed a staff member supporting an individual who was distressed. They did so in a supportive and professional manner. On another occasion staff were assisting an individual and did so in a sensitive way. From our observations it was evident that staff have positive relationships with people living in the home. They all spoke with people in a respectful manner, gave choice, responded well to demands from individuals. In one instance staff patiently explained to an individual what was happening that day and what they needed to do.

Our judgement

Individuals living at Branksome House have an opportunity to exercise choice and make decisions about their daily lives.

The service upholds the privacy, dignity and independence of those living at Branksome House.

Overall we found that Branksome House was meeting this essential 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 we spoke with told us that they received: "the help I want" and "staff are all very nice". We asked this person if they needed something what would they do and they told us: "I would tell staff and they would help me".

Another person told us: "I can see the doctor when I want" and when asked about the food said: " its very nice, the staff know what I don't like".

Other evidence

We looked at three care plans. Each had a Person Centre Plan which gave information about the person's history and health. Also included was "things that make me happy and sad" and how that person communicated their feelings. One section identified how to make things better and for one person their wish to attend a local day centre, trips to the pub and into town. For another it was about maintaining their relationships and seeing their family. Health Action Plans had been completed which included, personal care needs behaviour plan, social and leisure, health and medication, daily activities. One individual had been able to sign their Health Action Plan.

For one individual whose mental health had changed the home had made a referral for a mental health assessment and is working closely with the community learning disability team. The home has identified increasing risks associated with the individual's health and behaviour. Protocols have been put in place as part of the increasing risks associated with their changing health.

We looked at the care plan for one individual and it had been reviewed. However, their personal hygiene care plan did not indicate changes. There were no risk assessments relating to their need for a catheter or possibility of choking. There were no specific instructions about how staff were to respond to these risk areas. We spoke with staff about these risk areas specifically about those associated with an individual having a catheter. They were able to illustrate an understanding of those risks and the necessary action to safeguard the individual. We also established that training has been provided to staff about catheter care.

Risk assessments had been completed about individuals taking a bath or shower, leaving the home and their room environment. Medication reviews had taken place. There were records of GP visit to review health and medication and chiropody visits.

Our judgement

The service undertakes comprehensive and person centred assessments of individual's health and social care needs.

Individuals living at Branksome House receive effective, safe and appropriate care that meets their needs and protects their rights as individuals. However, there is not always information included in care plans about risks associated with health care.

Overall, we found that Branksome House was meeting this essential standard but, to maintain this, we suggested that some improvements were made.

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 were not able to talk with people about this standard. However, one person did tell us that they felt safe in the home and how staff: "are always kind to us".

Other evidence

We spoke with one staff member about their understanding of abuse. They gave us good examples of what could be considered as abusive behaviour: neglecting people's hygiene care, verbal abuse, being aggressive or using a patronising tone. They told us that they would "certainly" report any concerns they had about possible abuse. They were aware that they could report concerns to the adult protection team or ourselves.

The three staff members we spoke with had all received adult protection training.

The home has policies and procedures in place about responding to any allegations about abusive behaviour occurring in the home.

Our judgement

People who live at Branksome House are protected from abuse or the risk of abuse.

Overall we found that Branksome House is meeting this essential 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 did not talk with people about this essential standard.

Other evidence

Staff we spoke with told us they were well supported by the manager who they found "approachable". They told us there are staff meeting every six weeks. One staff member said: "communication is good" and that they receive supervision regularly. Records of supervision we looked at showed that staff receive frequent one to one supervision.

We asked staff about the training they had received. They told us that they had undertaken what is considered "mandatory" training i.e. moving and handling, infection control, food hygiene, health and safety and adult protection. One staff member told us that: "training is very helpful". Staff had not undertaken training around dealing with aggressive and challenging behaviour. We were told by the manager that this training is to be arranged for all staff.

Our judgement

Staff receive good support from the manager of the service.

Staff have received the necessary training so that they have the skills and knowledge to meet peoples needs.

Overall we found that Branksome House was meeting this essential 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 did not talk to people about this standard.

Other evidence

We looked at audits the home had carried out. These included health and safety, infection control, environment and equipment. These showed that the home has the necessary policies and procedures in place and there are good practices in these areas. However the hand hygiene audit showed 84% compliant and identified areas for improvement. These related to good practice specifically having paper towels rather than reusable towels and use of foot operated bins for waste which carries the risk of cross infection. The manager has raised these areas with the provider.

Currently there are no arrangements to seek the views of individuals living in the home or others such as relatives about the quality of the care. The manager told us they are attending a learning exchange group and this is an area they are looking at.

We discussed the arrangements for auditing the financial records of individuals living in the home. The provider carries out such audits on records held by the manager relating to individual purchasing of items and services such as taxis. The provider holds accounts for some individuals living in the home. These are not formally regularly audited but are available for inspection by interested parties such as the Benefits Agency or Social Services. They are also with the individuals permission made available to relatives if requested.

We looked at the personal account records and receipts that had been obtained where there were expenditures. Records of expenditures had been double signed.

Our judgement

There are good arrangements for the auditing and monitoring of the quality of the service.

There is no formal system to seek the views of individuals and others about the quality of care provided at Branksome House.

Overall, we found that Branksome House was meeting this essential standard but, to maintain this, we suggested that some improvements were made.

Action we have asked the provider to take

Improvement actions

The table below shows where improvements should be made so that the service provider **maintains** compliance with the essential standards of quality and safety.

Regulated activity	Regulation	Outcome
Accommodation for persons who require nursing or personal care	Regulation 9 HSCA 2008 (Regulated Activities) Regulations 2010	Outcome 04: Care and welfare of people who use services
	Why we have concerns: There is not always information available as part of an individual's care plan about risks associated with their health care.	
Accommodation for persons who require nursing or personal care	Regulation 10 HSCA 2008 (Regulated Activities) Regulations 2010	Outcome 16: Assessing and monitoring the quality of service provision
	Why we have concerns: There are no formal systems to seek the views of individuals and others about the quality of care provided at Branksome House.	

The provider must send CQC a report about how they are going to maintain compliance with these essential standards.

This report is requested under regulation 10(3) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010.

The provider's report should be sent to us within 28 days of the date that the final review of compliance report is sent to them.

CQC should be informed in writing when these improvement actions are complete.

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
Audience	The general public
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