

Review of compliance

Mrs A Jobson
Ardgowan House Residential Care Home (Mrs
Annie Jobson)

Region:	North East
Location address:	4 Middle Street Newsham Blyth Northumberland NE24 4AB
Type of service:	Care home service without nursing
Date of Publication:	March 2012
Overview of the service:	Ardgowan House is a detached house situated in a residential area on the outskirts of Blyth. The home is registered to provide accommodation for up to ten people who require nursing or personal care. Ardgowan does not provide nursing care. Each person has their own bedroom and they share

	<p>communal areas. There is a small front garden and a large back garden. The home is close to local amenities and transport.</p>
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Summary of our findings for the essential standards of quality and safety

Our current overall judgement

Ardgowan House Residential Care Home (Mrs Annie Jobson) was meeting all the essential standards of quality and safety.

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 Ardgowan House Residential Care Home (Mrs Annie Jobson) had made improvements in relation to:

- Outcome 04 - Care and welfare of people who use services
- Outcome 07 - Safeguarding people who use services from abuse
- Outcome 10 - Safety and suitability of premises
- Outcome 21 - Records

How we carried out this review

We reviewed all the information we hold about this provider, 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 spoke with five people who used the service. People told us that they were happy living at Ardgowan. They said the staff were kind and they knew what help they needed. One person said "Staff are very nice and they care for us very well. I am very happy living here."

What we found about the standards we reviewed and how well Ardgowan House Residential Care Home (Mrs Annie Jobson) was meeting them

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

The provider was compliant with this outcome. People received individual care and support that was suited to their needs.

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

The provider is compliant with this outcome. The service has in place systems to protect people from harm.

Outcome 10: People should be cared for in safe and accessible surroundings that support their health and welfare

The provider was compliant with this outcome. The accommodation was well maintained and appropriate for peoples' needs.

Outcome 21: People's personal records, including medical records, should be accurate and kept safe and confidential

The provider was compliant with this outcome. Peoples' records are held securely and remain confidential.

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 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

We spoke with five people who told us that they were satisfied with the care and support they received. People were relaxed and comfortable. They said staff knew what help they needed. One person said " the staff are very kind to me and I like living here. I can choose how I spend my time."

Other evidence

At the last inspection we told the provider "Care plans and risk assessments were not in place to cover all aspects of people's care. Others that were in place were not evaluated regularly to ensure any changes in need were met. People's rights to confidentiality were not fully respected."

We looked at three care plans and saw work was in progress to improve the systems for recording information about individuals' care and support. One care plan had been completed using the new system and this provided clear information about the person's care and support needs. There was evidence in records and from talking to staff that peoples needs were as detailed in their individual plans. Daily routines were identified within the individual records.

The manager confirmed that issues requiring further action were discussed at staff meetings and during planned supervision meetings with care staff. The sample of records we saw described how risks were managed and reviewed. Daily notes were detailed and provided evidence of ongoing assessment and review. The records contained clear plans according to an individual needs and were updated every six

months or when peoples' needs changed.

Our judgement

The provider was compliant with this outcome. People received individual care and support that was suited to their needs.

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

People said that they felt safe at Ardgowan. They said they felt able to speak to staff if they had any problems. One person said if he had a complaint he would feel able to speak to the staff about it.

Other evidence

At the last inspection we told the provider "The system for dealing with people's finances was not robust and did not protect them from abuse."

We looked at four records of money held on behalf of people who lived at Ardgowan and checked these against the money held. We found the balance of money corresponded with the records kept. Money was kept securely locked away and the manager confirmed she had responsibility for this. The money and the records were checked regularly by the manager and we saw evidence of this. The staff record each time money is taken out and if it is given directly to the person then they sign to indicate they have received it.

Our judgement

The provider is compliant with this outcome. The service has in place systems to protect people from harm.

Outcome 10: Safety and suitability of premises

What the outcome says

This is what people should expect.

People who use services and people who work in or visit the premises:

* Are in safe, accessible surroundings that promote their wellbeing.

What we found

Our judgement

The provider is compliant with Outcome 10: Safety and suitability of premises

Our findings

What people who use the service experienced and told us

We spoke with people who lived at Ardgowan and they said that they were happy with their accommodation. One person said he liked his room and was very comfortable.

Other evidence

We told the provider at the last inspection "Fire safety and food hygiene were not fully met, which could place people at risk."

We looked around the building and found the home was clean and tidy. There were no items blocking any fire exits or doors. The laundry was clean and systems were in place for managing soiled linen. There was a domestic on duty and we saw the cleaning was well organised and carried out efficiently.

The kitchen was domestic in style and food storage arrangements were satisfactory. The cooker and fridge were clean. Food was stored appropriately. Some vegetables were in the outside store and staff said these were bought in as needed from a local supplier. The food seen was fresh and appropriately stored.

Our judgement

The provider was compliant with this outcome. The accommodation was well maintained and appropriate for peoples' needs.

Outcome 21: Records

What the outcome says

This is what people who use services should expect.

People who use services can be confident that:

* Their personal records including medical records are accurate, fit for purpose, held securely and remain confidential.

* Other records required to be kept to protect their safety and well being are maintained and held securely where required.

What we found

Our judgement

The provider is compliant with Outcome 21: Records

Our findings

What people who use the service experienced and told us

We did not ask people about their records.

Other evidence

At the last inspection we told the provider "Personal Information about the people living in the home was not always securely held."

At this inspection we found that peoples' records were stored in locked cabinets in the rear hall. We saw that cabinets were locked as the deputy manager had to open them to allow us to view the records. This is a small area and not ideal for working on records as people regularly pass through to bedrooms, the rear entrance and the laundry. This was discussed with the manager.

Our judgement

The provider was compliant with this outcome. Peoples' records are held securely and remain confidential.

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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Author	Care Quality Commission
Audience	The general public
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