

Review of compliance

<p>Brandon Trust The Cottage Care Home</p>	
<p>Region:</p>	<p>South West</p>
<p>Location address:</p>	<p>The Cottage Old Hill Longhope Gloucestershire GL17 0PF</p>
<p>Type of service:</p>	<p>Care home service without nursing</p>
<p>Date of Publication:</p>	<p>July 2012</p>
<p>Overview of the service:</p>	<p>The Cottage is a care home that provides care with accommodation for four adults with autism. The home is situated in the rural setting of Longhope in the Forest of Dean.</p>

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

Our current overall judgement

The Cottage Care Home 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 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 18 June 2012, checked the provider's records, looked at records of people who use services, talked to staff and talked to people who use services.

What people told us

We were not able to speak to people to ask them directly about living in the home because the people using the service had complex needs which meant they were not able to tell us their experiences.

We gathered evidence of people's experiences of the service by reviewing feedback that families and professionals had given the service. It was clear from the comments made by families and professionals that they were confident in the home's ability to provide a good standard of care to the people living at The Cottage. Comments were made referring to the staff's attention to detail regarding people's needs and how well staff alleviated any problems.

Staff were observed interacting with people in a respectful manner that showed that they understood each individual's needs and how to communicate with them.

There was a calm and relaxed atmosphere in the home and we observed people moving freely around their home accessing communal areas, their bedrooms and the garden.

What we found about the standards we reviewed and how well The Cottage 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 experienced care, treatment and support that met their needs and protected their rights.

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 receive.

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

People living in the home were not able to tell us their experiences because of their complex communication needs.

However, we were able to observe how people were living in the home and how staff interacted and responded to them.

We observed that staff communicated well with people, treating them sensitively and in a respectful manner. People living in the home appeared to enjoy the interactions with staff and communicated that through their responses to staff.

Other evidence

People who use the service were supported in promoting their independence and community involvement. People's diversity, values and human rights were respected.

We looked at a sample of care plans and these recorded people's needs, choices and preferences. The plans gave details of people's preferred routines for personal care and daily living and information about how people communicated.

When we observed people living in the home we saw that the care plans accurately

reflected their method of communication and how staff should respond to each individual while still maintaining their dignity.

For example the records explained how one person liked the sensation of strong physical contact with people. Staff had developed an agreed method of working with this individual that met their needs while still maintaining boundaries and ensuring other people living in the home were safe.

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

We observed staff supporting people around the home. We saw staff responding to people's needs by assisting them to go into the garden and taking two people out for a drive when they requested it.

Other evidence

People's needs were assessed and care and support was planned and delivered in line with their individual care plan.

We looked at the care of three people living in the home and sampled the remaining person's care file. All files had evidence of a review in the last 3 months.

Each person had an assessment of need in place for which care plans were developed. Care plans were in place for people's social, physical, psychological and emotional needs. Plans cross referenced with other records such as risk assessment, mental capacity assessments and daily routines.

The home had provided a separate space for each person to eat their meals. This had created a relaxed and private environment for people to enjoy eating, in line with their assessed needs.

There was also evidence in people's files of annual health checks and regular visits to a dentist, optician and chiropodist.

We saw that each person had a timetable of what they would do each day and this included daily routines as well as activities inside and outside of the home. People living in the home were given the opportunity to go away on holiday with staff. Two people had just returned from a few days in Wales. One person did not want to go away on holiday because they preferred not to have their daily routine disrupted. The home had arranged several day trips throughout the year which met his needs more appropriately.

Our judgement

People experienced care, treatment and support that met their needs and protected their rights.

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

People living in the home were not able to tell us their experiences because of their complex communication needs.

However, we observed interactions between staff and people living in the home. These interactions showed that staff had the knowledge and experience to judge how to keep the balance between people's choices and the potential risk that their choices could mean for them and others.

Other evidence

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.

We looked at records that confirmed that staff had completed training in the safeguarding of vulnerable adults which included Mental Capacity Act 2005 training and Deprivation of Liberty Safeguards training.

Staff we spoke with told us that they had attended safeguarding training and knew how to recognise and report abuse.

Staff also confirmed they would feel comfortable raising any concerns with the manager of the home.

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

People living in the home were not able to tell us their experiences because of their complex communication needs.

Staff we spoke with and observed showed that they had good knowledge of the people they supported. They were seen responding to each person respectfully, with good humour and in a manner appropriate to each individual's needs.

Other evidence

We spoke with four members of staff and they confirmed that they had received the relevant training for their role. We looked at training records and these showed that staff had completed appropriate training. The training provided included: Infection control, medication, nutrition, emergency life support, epilepsy and manual handling.

Staff told us that there were good opportunities for training and if they requested any additional training this was arranged. Staff also told us that they had regular supervision, yearly appraisals and the manager was always available to support them.

Staff we spoke with said, "Everyone is interested in you" and "They listen and you are able to contribute to the running of the home".

The home has good staff retention which has enabled the provider to deliver consistent care to the people who live there.

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 living in the home were not able to tell us their experiences relating to this standard because of their complex communication needs.

Other evidence

We looked at the systems that the provider had in place to monitor the quality of the service.

We saw evidence of bi-monthly quality assurance audits carried out by a manager from another home. Any improvement actions identified had been completed in the agreed timescale. For example the audit completed in March 2012 found that one person was unable to assess their room for their own safety. There was an action for the home to arrange for a door sensor to be fitted so the person could assess her room independently while still being safe. We saw that this action had been completed in the required timescale.

The provider also carried out internal financial audits, assessments of hazards around the home and 3-monthly incident reports review.

The provider had not received any complaints and we saw evidence of many compliments about the quality of the care provided to people from relatives and professionals.

Accidents and incidents were being recorded in the home. We looked at the records of

these and found that appropriate action had been taken and where necessary the home had made changes to learn from the events.

The provider asked families and professionals for their views of the service every 3 months. We looked at the results from the survey carried out in March 2012. Comments made by families and professionals showed that they were confident in the home's ability to provide a good standard of care to the people living in the home. Comments were made referring to the staffs attention to detail regarding people's needs and how well staff alleviated any problems.

Our judgement

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

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

Document purpose	Review of compliance report
Author	Care Quality Commission
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