Review of compliance

Otterhayes Trust Limited Otterhayes	
Region:	South West
Location address:	Salston Ottery St Mary Devon EX11 1RH
Type of service:	Care home service without nursing
Date of Publication:	March 2012
Overview of the service:	The Otterhayes Trust is a registered charity. They provide accommodation for up to six people with learning disabilities who require personal care in the main house known as Otterhayes. The Trust is also registered to provide a personal care service for people who live in supported housing. There are four houses situated within the grounds of Otterhayes, and one house situated in the centre of Ottery St Mary.

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

Our current overall judgement

Otterhayes was not meeting one or more essential standards. Improvements are 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 7 February 2012, observed how people were being cared for, talked to staff and talked to people who use services.

What people told us

This inspection took place on 7 February 2012. There were 5 people living in the main house known as Otterhayes at the time of our visit. They also provided support to 15 people who lived in the four houses situated in the grounds of Otterhayes, and one house in the centre of Ottery St Mary.

During our visit we talked to three of the people living in the main house, two people who lived in supported accommodation, and three members of staff. We also talked to the husband and wife team who set up Otterhayes Trust in 1984 and have managed the service since then and two members of their family who have assisted them in the management of the service.

People told us they were happy living there. When we arrived a group of people were going on a swimming trip and we heard about a range of activities people regularly enjoyed. Comments included "I like it here – I like making new friends."

We looked at some of the records maintained by the home including care plans, risk assessments, staff recruitment and training records, and quality assurance procedures. We also looked at the way the home supported people to manage their money. We found that all records were well maintained and regularly updated.

There was a stable staff team, many of whom had worked at the home for a number of years. All of the staff team held a relevant qualification. They had also received a range of training on topics relevant to the needs of the people who received a care service. However, some staff had not received training or regular updates on important topics

including safeguarding of vulnerable adults.

Following our visit we contacted five relatives to find out if they were satisfied with the care and services provided by Otterhayes. At the time of writing this report we had received four responses. They told us they were entirely satisfied with all aspects of Otterhayes. Comments included; ".. we are confident that X is well cared for at Otterhayes" , "I have nothing but praise for the quality of care that Y receives" and "With so many members of one family on the staff for so many years there is a wealth of experience and knowledge plus a close affinity with the residents. There is a deep sense of commitment to the welfare of the residents."

What we found about the standards we reviewed and how well Otterhayes 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 who live at Otterhayes, and those who receive a personal care service from Otterhayes Trust, are supported to make decisions and choices about their daily lives. Care workers have the skills necessary to understand each person's care and support needs. People's privacy, dignity and independence is respected.

• Overall, we found that Otterhayes Trust was meeting this essential standard.

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

People who live at Otterhayes, and those who receive care services from the organisation, receive care and support that is appropriate to their needs. The staff have good information about each person's needs and understand how each person wants to be supported.

• Overall, we found that Otterhayes Trust was meeting this essential standard.

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

People are not fully protected from the risk of abuse or harm because the staff are not fully up to date in reporting and local safeguarding procedures.

• Overall, we found that Otterhayes Trust was meeting this essential standard but, to maintain this, we suggested that some improvements were made.

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

People are supported by an experienced and stable staff team who understand their needs. However, there are weaknesses in the way the organisation plans future staff training needs and this has resulted in some staff not receiving training and regular updates on all training topics relevant to the work they are employed to carry out.

• Overall, we found that improvements were needed for 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

Otterhayes has systems in place to seek people's views on the services provided, and to assess the quality of the services and identify where improvements are necessary.

• Overall, we found that Otterhayes Trust was meeting this essential standard.

Actions we have asked the service to take

We have asked the provider to send us a report within 14 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
At the time of this inspection there were five people living in the main house known as Otterhayes, This house is registered to provide accommodation with personal care for up to six people. We talked to three people who lived in the main house and also two people who lived in one of the supported accommodation houses. They told us they were happy living there. Comments included "I like it here – I like making new friends."

People told us how they were supported by the staff team to make choices and do the things they wanted to do every day. One person who lived in supported accommodation explained how they chose what they wanted to eat every day. They took it in turns to cook the main meal each day, and people could always make themselves drinks, snacks or meals at any time.

People lead active lives and had good contact with friends and family. One person talked about her boyfriend, and told us she liked to go to nightclubs with him. She said that the staff had given her positive advice and support on her relationship with her boyfriend. During our visit we heard from other people about close relationships they had with special people in their lives. People regularly went out and about in the local community and attended various local clubs and leisure activities. We also heard about regular visits to, and from, relatives and friends.

Care plans had been drawn up through close communication with each person. One person showed us her care plan file, and we saw that the documents had been drawn up using photographs to help her understand what was written and agreed.
She also explained how people had been consulted and involved about the decoration and furnishings in the house, including pictures and other personal effects. For example, she had chosen a favourite photograph that had been framed and hung on the wall in the lounge of the house she lived in.

While we looked around the home we saw care workers respecting people's privacy and dignity before entering people's rooms. People were asked if they would like to show us their bedrooms. One person declined and their wishes were respected. The bedrooms we saw had been personalised to reflect their individual tastes and interests.

Other evidence
We looked at the care plan files to find out what instructions had been given to care workers to ensure they promoted people's independence, and how people were involved in the daily running of the home. Each person had a support plan and also their own document called 'My life, my plan'. The documents had been drawn up using photographs and symbols to help people understand and agree the content of the documents. They were written in the first person, as if they were written, or dictated, by the person. "

There were computers in each house and we saw that staff sat down with each person to write a daily reports on the things they had done that day, and any special support needs they may have had.

We talked to three care workers during our visit and they told us about the training they had received. They said they had received a range of training on relevant topics including Autism and Down's Syndrome, and on nationally recognised care approaches.

Our judgement
People who live at Otterhayes, and those who receive a personal care service from Otterhayes Trust, are supported to make decisions and choices about their daily lives. Care workers have the skills necessary to understand each person's care and support needs. People's privacy, dignity and independence is respected.

• Overall, we found that Otterhayes Trust 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 showed us her care plan file. The documents had been drawn up using photographs and symbols to help her understand what was written. For example, we saw a document containing step by step photographic instructions on how to use the electric gates that had been installed to the main entrance of the property. Another document contained photographs and step by step instructions on how to use her new alarm clock. She told us that the staff had helped her to use the alarm clock so that she could get out of bed at the right time each morning. This was an example of how she had been supported to learn new skills and become more independent.

We also saw documents in her care plan contained photographs and guidance on how to help her look after her own money and to keep her money safe. She told us she looked after her own money.

The person talked about the things she enjoyed doing every day. This included cooking, cleaning and shopping.

During the day we saw and heard about other activities people regularly participated in. This included animal care, gardening, drama, arts and crafts and various outdoor activities. A group of people were just going out when we arrived and they told us they were going swimming.

Otterhayes is set in four acres of grounds, and on the site there was a community hut, and art room, a computer room and a training kitchen. In the grounds there was a poly

tunnel and vegetable patches. We were shown the job plans for each member of staff showing some of the regular activities each person participated in, and the staff who had been assigned to support them in their chosen activities. People told us they enjoyed living at Otterhayes and were happy with the level of activities provided.

After our visit we contacted five relatives to find out their views on the services provided by Otterhayes Trust. One relative praised the level of support and care provided by the home to her son to help him cope with a health problem. She told us "His diet is important to his physical and overall well-being, as he will very quickly lose weight and become physically & mentally lethargic should his daily intake of food be low or contain gluten. The staff at Otterhayes manage this aspect of his care very well; it can be a difficult concept to grasp at first."

Another relative told us "The management and staff are very caring and provide a calm and dependable atmosphere in which she lives. They are very cognitive of the needs of residents and will tailor the 'educational' programme, as required. For example if one of the residents encounters the death of a family member they are all counselled as far as possible on how to handle this. "

Other evidence
We were shown files containing copies of the care plan documents for each person. The copies were held in the main office, but people living in supported accommodation had access to their own files in their own house. The care plans included two main documents, one called the support plan and one called 'My life, my plan'. All documents were written in a clear and easy to read style. They were written in the first person, suggesting that the person had either written or been consulted over the content of the documents.

Care plans contained a wide range of information setting out the support needs for each person. They included a section called 'About me' containing useful personal history information. Other topics covered included independent living skills, menu planning, regular activities and interests, and supporting people to manage their money.

The files contained a section on medical history information. There was information about the medicines each person had been prescribed, and what these were for. This included creams and lotions and skin care needs. This showed that care workers were given good information about each person's health problems and treatment methods.

Each person had received an annual health check from a health professional to ensure that their health needs were regularly assessed and treatment was provided where necessary. We saw letters and evidence of appointments with health professionals showing that people's health needs had been met.

We saw information about people's behaviour and the things that people may become upset or distressed over. There was some guidance for staff about how to help people deal with stressful situations. When we talked to the managers about distraction techniques they demonstrated that they had a very thorough understanding of each person and knew how to guide people away from situations that may result in them becoming upset or angry. Some of these distraction techniques were not included in the care plans, but the managers said they would review the documents to ensure all

staff had access to this information, although they were confident that all of the staff knew each person very well and understood their support needs.

In addition to the four members of the management team we also talked to three members of staff during our visit. They had worked at the home for a number of years. They told us they received good support from the managers and could always ask for advice at any time. The managers lived on site and if they were not on duty they could still be contacted at any time. They told us they had regular staff meetings and there was good team work to make sure the services ran smoothly and people received the support they needed.

Our judgement
People who live at Otterhayes, and those who receive care services from the organisation, receive care and support that is appropriate to their needs. The staff have good information about each person's needs and understand how each person wants to be supported.

• Overall, we found that Otterhayes Trust was meeting this essential 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

There are minor concerns with Outcome 07: Safeguarding people who use services from abuse

Our findings

What people who use the service experienced and told us
People told us they felt safe at Otterhayes. We asked them if they felt they could talk to a member of staff or a manager if they were worried or upset about anything. Four people said they would tell a member of staff, but one person said no, they would not say anything.

We were unsure if the person understood our question so we talked to the managers to find out what other safeguards were in place for those people who may have communication difficulties, or those who may find it difficult to raise concerns. We heard that 18 people attended regular sessions provided by a local organisation that provides advocacy services for people with learning disabilities. The organisation is called Devon Link Up. The sessions were called 'Speak up and Speak out' and were held in a local venue nearby. Two people had chosen not to attend these sessions, including the person we had talked to. The managers told us that Link Up had suggested they might hold some sessions at Otterhayes, and that if this happens, the managers were confident that everyone would want to attend, including the two people who had not wanted to attend the sessions held elsewhere.

A relative told us "X is happy and feels safe and comfortable in his environment."

Another relative told us, " With so many members of one family on the staff for so many years there is a wealth of experience and knowledge plus a close affinity with the residents. There is a deep sense of commitment to the welfare of the residents."

Other evidence
We looked at the way the home looked after people's savings and cash. We checked the bank statements and transactions for two people whose money had been managed by the home on their behalf. Spread sheets had recently been set up on the computer for all transactions. We found these were complicated to follow, but found that the balances were correct and receipts for purchases had been retained.

One person had a discount card for a local store and we were satisfied that the person had been supported appropriately to make purchases for their own benefit.

We also looked at the way the home supported people to buy and eat their own food. We heard that Otterhayes Trust often provided food items for people living in supported accommodation if they ran out of any items, for example, if they were cooking and ran out of an essentail ingredient to complete a recipe.

We looked at the amount paid by one person for a holiday who had gone on a holiday in 2011. We found the home had not deducted the full cost of the holiday from the person's savings and had therefore subsidised the cost of the holiday. We were satisfied that the person's cash and savings had been well managed by the home and all transactions had been in the person's best interests.

We talked to the management team about the methods they had put in place to check the balances and transactions for each person whose money they have responsibility for managing. They told us they will look at ways of making the records easier to check. They also said they will consider ways of improving the checks carried out to oversee all transactions.

We talked to three members of the staff team who were not related to the management team. They had worked at Otterhayes for a number of years. They had received a range of training and nationally recognised qualifications known as National Vocational Qualifications (NVQ's) to level 2 and 3. They told us they were confident they could raise any concerns with members of the management team. They also said they were aware of trustees they could talk to if they had any concerns about the management team or members of their family.

We looked at the training provided to the staff team on safeguarding vulnerable adults. The staff we talked to could not remember attending training on this subject, although one member of staff said it had been covered briefly in their NVQ qualifications. They were unaware of local reporting arrangements. They had not received training on the Mental Capacity Act or Deprivation of Liberties. We talked to the management team about the training they had provided on the safeguarding of vulnerable adults. They confirmed that staff had not received training on this subject for a number of years. They also confirmed that staff had not received training on the Mental Capacity Act or Deprivation of Liberties.

We talked to the management team about the arrangements they have in place to ensure all staff, including those who are not members of the management team's family, can speak out immediately if they have any worries or concerns about the care provided to people who receive services from Otterhayes Trust. They said that staff had been told they should speak to one of the Trustees who regularly visited the home who is not a member of the management team's family.

Our judgement
People are not fully protected from the risk of abuse or harm because the staff are not fully up to date in reporting and local safeguarding procedures.

• Overall, we found that Otterhayes Trust was meeting this essential standard but, to maintain this, we suggested that some improvements were made.

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

There are moderate concerns with Outcome 14: Supporting staff

Our findings

What people who use the service experienced and told us
People we talked to said they liked all of the staff who supported them at Otterhayes.

One relative told us "I have nothing but praise for the quality of care that X receives", and another relative said "The management and staff are very caring and provide a calm and dependable atmosphere in which she lives. They are very cognitive of the needs of residents and will tailor the 'educational' programme, as required."

Other evidence
At the time of our visit to Otterhayes there were four senior members of the management team, ten full time support/care workers, and two part time support/care workers.

We talked to three members of staff who were not related to the management team to find out about the training and support they received. They had all worked at Otterhayes for a number of years. They told us they had attended various courses relevant to their work. However, they were uncertain about the level of training they had received on safeguarding vulnerable adults, the Mental Capacity Act, or Deprivation of Liberties (see outcome 7: Safeguarding people who use services from abuse). They told us they had received regular training of fire safety, including fire drills and evacuation plans. However, one member of staff could not remember receiving training on infection control.

The staff told us that staff meetings were held approximately every six weeks. They received individual supervision approximately every six months. They said they

received good support from the management team for both work and personal issues. They told us there was always a manager nearby they could approach for support or guidance.

We looked at the records of training provided to the staff team. There had been a low staff turnover and many of the staff had worked at the home for a number of years. Over the years they had worked there the staff team had attended arrange of relevant training courses. Some staff had attended courses on autism including a course known as TEACCH. Other courses included supporting people with Down's Syndrome, challenging behaviour, gentle teaching, clinical risk awareness, epilepsy, and effective care planning.

Staff had received training on health and safety related topics, but some of the training had taken place several years ago and had not been updated in line with current good practice requirements. For example, six staff required updating on first aid procedures. We also found that some staff had not received training on safe handling of medicines since 2004.

All of the staff held a relevant qualification. These included nationally recognised qualifications known as National Vocational Qualifications (NVQ's).Two staff held qualifications in psychology.

We talked to the management team about their systems for recording and planning staff training. We found they did not have systems in place to help them quickly identify when essential health and safety topics needed to be updated, or to help them plan future training needs for the whole staff team. The management team said they would review their training needs for the staff team.

Our judgement
People are supported by an experienced and stable staff team who understand their needs. However, there are weaknesses in the way the organisation plans future staff training needs and this has resulted in some staff not receiving training and regular updates on all training topics relevant to the work they are employed to carry out.

• Overall, we found that improvements were needed for 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
People told us about some of the ways they had been consulted and involved in making decisions. For example, they told us how they sat down and discussed and agreed weekly menus.

People also told us they had chosen the places they went on holiday each year. One person told us she had chosen to go to Centre Parks.

A relative told us "Otterhayes keep in touch with us generally via e-mail which works well. We receive a newsletter several times a year. There are normally two events each year for relatives/family. As we live nearby we are there much more frequently and are always made welcome." They also said "Overall, the standards are very high and when on those rare occasions we have had to point out that standards have slipped those matters have been addressed and rectified."

Other evidence
Otterhayes showed us evidence of a range of measures they had put in place to consult with people and check on the quality of the services they provided. They told us that in recent years they had found that the response from questionnaires sent out to people, relatives, staff and other people involved with Otterhayes had dropped and therefore they decided to send out surveys every 2 years. They told us that forms had been sent out to people for 2012 and they intended to verbally remind people if the forms are not returned.

Changes have been made as a result of feedback from people, families and staff. These have included fenced off areas of garden. They have also improved confidentiality by no longer drawing lists with every person's name and their key workers. They decided to provide individual lists for each person instead.

The management team have sent out newsletters to people and their families and friends four or five times a year. These have kept people informed about staff, projects, and events planned, and have included photographs of events that have happened.

We also heard how Trustees of Otterhayes have visited the home to carry out their own inspections and draw up a report of their findings.

Otterhayes has drawn up an annual plan for improvement.

Staff we talked to said their views were sought during regular staff meetings and supervision sessions. They also said they felt confident they could raise suggestions and make comments at any time with the management team.

Our judgement
Otterhayes has systems in place to seek people's views on the services provided, and to assess the quality of the services and identify where improvements are necessary.

• Overall, we found that Otterhayes Trust was meeting this essential standard.

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 11 HSCA 2008 (Regulated Activities) Regulations 2010	Outcome 07: Safeguarding people who use services from abuse
	Why we have concerns: People are not fully protected from the risk of abuse or harm because the staff are not fully up to date in reporting and local safeguarding procedures.	
Personal care	Regulation 11 HSCA 2008 (Regulated Activities) Regulations 2010	Outcome 07: Safeguarding people who use services from abuse
	Why we have concerns: People are not fully protected from the risk of abuse or harm because the staff are not fully up to date in reporting and local safeguarding procedures.	

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 14 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.

Compliance actions

The table below shows the essential standards of quality and safety that **are not being met**. Action must be taken to achieve compliance.

<table>
<tr><th>Regulated activity</th><th>Regulation</th><th>Outcome</th></tr>
<tr><td rowspan="2">Accommodation for persons who require nursing or personal care</td><td>Regulation 23 HSCA 2008 (Regulated Activities) Regulations 2010</td><td>Outcome 14: Supporting staff</td></tr>
<tr><td colspan="2">How the regulation is not being met:
There are weaknesses in the way the organisation plans future staff training needs and this has resulted in some staff not receiving training and regular updates on all training topics relevant to the work they are employed to carry out.

This is a breach of Regulation 23 (1) (a)</td></tr>
<tr><td rowspan="2">Personal care</td><td>Regulation 23 HSCA 2008 (Regulated Activities) Regulations 2010</td><td>Outcome 14: Supporting staff</td></tr>
<tr><td colspan="2">How the regulation is not being met:
There are weaknesses in the way the organisation plans future staff training needs and this has resulted in some staff not receiving training and regular updates on all training topics relevant to the work they are employed to carry out.

This is a breach of Regulation 23 (1) (a)</td></tr>
</table>

The provider must send CQC a report that says what action they are going to take to achieve 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 14 days of the date that the final review of compliance report is sent to them.

Where a provider has already sent us a report about any of the above compliance actions, they do not need to include them in any new report sent to us after this review of compliance.

CQC should be informed in writing when these compliance 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
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