

# Review of compliance

Ashcroft Care Services Limited Shrewsbury House	
<b>Region:</b>	South East
<b>Location address:</b>	Battlebridge Lane Merstham Surrey RH1 3LH
<b>Type of service:</b>	Care home service without nursing
<b>Date of Publication:</b>	May 2012
<b>Overview of the service:</b>	<p>Shrewsbury House is a large detached home that is situated close to Merstham Village. It is convenient to local facilities and main services, with the local shop within walking distance.</p> <p>Accommodation is arranged over two floors for up to five people with learning disabilities. There is ample communal space provided on the ground floor.</p> <p>The home is owned and managed by Ashcroft Care Services Limited who also</p>

	operate several more homes in the area.
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# Summary of our findings for the essential standards of quality and safety

## Our current overall judgement

**Shrewsbury House 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 3 May 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

There were five people living in the home on the day of our visit. Two of them were out on our arrival undertaking individual activities.

People were very welcoming and told us that they enjoyed living in the home.

They told us that the staff were "the top team" and cared for them very well.

People told us that they were fully involved in their care and treatment and were given the choice about all aspects of their daily living routine.

People told us that they were aware of their care plans and were able to arrange and plan their individual care reviews.

One person told us the staff were kind and caring, and helped to go out to various events and activities.

Another person told us that the staff enabled them to maintain contact with their family overseas.

### What we found about the standards we reviewed and how well Shrewsbury 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**

We found that choice and independence were promoted and that people are treated with dignity and respect.

The provider was meeting this outcome area.

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

## **and supports their rights**

We found the home had good procedures in place for planning and the delivery of care, and that the care plans reflected this.  
The provider was meeting this outcome area.

## **Outcome 05: Food and drink should meet people's individual dietary needs**

We found that the nutritional needs of the people using the service were being met.  
The provider was meeting this outcome area.

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

People using the service were protected from abuse or the risk of abuse because the service has systems in place to prevent this from happening.  
The provider was meeting this outcome area.

## **Outcome 13: There should be enough members of staff to keep people safe and meet their health and welfare needs**

Staff were employed in sufficient numbers and with the relevant safety checks that promoted people's safety and welfare.  
The provider was meeting this outcome area.

## **Outcome 16: The service should have quality checking systems to manage risks and assure the health, welfare and safety of people who receive care**

People who use this service benefit from regular quality assurance monitoring systems that are in place to promote good care and welfare.  
The provider was meeting this outcome area.

## **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 told us that they were supported to make the choice about living in the home. One person told us that it was the "best choice he ever made". People told us that they were consulted regarding their care and support and that their views and wishes were taken into account. People said that they were treated with dignity and respect.

#### Other evidence

People who use the service were supported by health care professionals and their family to make a choice about how they were admitted to the home. The Majority of people who used the service have lived in there for twelve to fifteen years and felt well settled and contented.

The people who used the service had the opportunity to visit the service on several occasions prior to being offered a place.

We were told by staff that a needs assessment was undertaken to decide if the home could meet individual needs, and we saw that these assessments had been updated over the years as needs changed.

Individual preferences and diverse needs were taken into account in the way services were provided and delivered. For example how people like to be addressed, their daily routine, where they spend their day, how they plan their meals, how often they go

home, where they spend their holidays, and how their care will be undertaken. We saw that people had the choice to access local shops and facilities. We saw that people had the opportunity to personalise their rooms and had the choice of décor. People had the support of staff to maintain their hobbies and interests by having their personal belongings around them. People had the choice to maintain their spiritual beliefs and one person enjoys bell ringing and attends the local church. Privacy and dignity was observed to be promoted. Staff were polite and professional in their manner and addressed people in an appropriate way.

**Our judgement**

We found that choice and independence were promoted and that people are treated with dignity and respect.

The provider was meeting this outcome area.

## 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

People told us that they were supported to be involved in the development of their care plans.

One person told us that they had regular care reviews and that they can invite who they wanted to attend.

We were told that people see their GP and other health care professionals on a regular basis.

Someone told us that staff support them to attend activities and appointments.

##### Other evidence

People living in Shrewsbury House experienced an active and varied lifestyle. One person was personal shopping with a member of staff when we arrived. On their return he chose not to talk with us.

A person told us that they were supported by staff to attend organised activities and that he was able to manage his own time. He was able to access community facilities with staff support using the home's car.

Someone showed us their music and video collection that staff support him to collect at car boot sales, and his bird collection that he managed independently.

The manager told us that people who live in the home receive care according to their expressed wishes and expectations. We were told that people were involved in planning their care and the care plans seen reflected this. Plans were person centred, and included how personal care is managed, and provided detailed information for managing people's specific behaviours.

We saw that arrangements were in place to meet people's health care needs. All

people who use this service are registered with a local GP. Records of GP visits, dental care, visits to the chiropodist, optician, and psychology input are also in place. Other specialist support can be arranged by the GP.

The home had a wide range of risk assessments in place to cover individual and service risks, for example accessing various areas within the home and for going out. It was evident from observing people who use the service and staff that individual needs are taken into account when providing safe and appropriate care. For example we saw someone had a mobile phone that was used as part of an enabling plan to support them independently in the community.

People are supported to maintain their independence and can access various areas of the home, garden and local community as outlined in individual care plans. The home has its own transport to access various activities and community facilities, and risk assessments are also in place for individual travel.

### **Our judgement**

We found the home had good procedures in place for planning and the delivery of care, and that the care plans reflected this.

The provider was meeting this outcome area.

## Outcome 05: Meeting nutritional needs

### What the outcome says

This is what people who use services should expect.

People who use services:

\* Are supported to have adequate nutrition and hydration.

### What we found

#### Our judgement

The provider is compliant with Outcome 05: Meeting nutritional needs

#### Our findings

##### What people who use the service experienced and told us

People told us that they enjoyed their food.

They said they could choose what they wanted to eat.

They told us that they plan their meals for the week and help staff with shopping.

We saw people eating their lunch and helped to clear away and load the dishwasher after.

Staff told us that the service had access to a dietician if required.

##### Other evidence

It was possible to sit with the people who used the service in the dining room while they were having their lunch that some prepared themselves. One person chose to eat their meal on a tray in the lounge.

People were enjoying their food in a relaxed and pleasant atmosphere.

We saw that menus were planned weekly with input from service users. People's likes, dislikes and dietary needs were taken into account when meals were being planned.

The menus were displayed in the kitchen and the shopping is arranged accordingly.

The main meal is served in the evening with a lighter meal for lunch. Cooked breakfast and roast dinners were included in the weekend menu plan. We saw people in the kitchen during our visit making their lunch, and various drinks throughout the day. Staff had a good understanding of people's dietary needs. People can choose to have occasional take away meals.

Staff have undertaken their food hygiene training.

##### Our judgement

We found that the nutritional needs of the people using the service were being met.

The provider was meeting this outcome area.

## 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 told us that they felt safe living in the home.

People told us that if they were unhappy about something or someone that they could talk to the manager and staff.

Staff told us that they had received appropriate training to recognise the signs of abuse.

##### Other evidence

The service had clear policies and procedures in place on abuse awareness, and the protection of vulnerable adults. All staff have had training in safeguarding adults and have this training updated regularly. The training covers all aspects of abuse and how to report this.

Staff spoken with confirmed that they had attended this training and would know what action to take if they suspected that an incident of abuse had taken place.

There is a copy of Surrey County Council's policies and procedures on safeguarding in place. The home also has a copy of Sussex County Council's safeguarding policies to facilitate one person.

We saw that the home managed incidences of safeguarding well and in confidence.

We were told that senior staff had undertaken local authority training and we evidenced this documented on staff files. We also found evidence that staff had undertaken training to ensure awareness of the Mental Capacity Act and deprivation of liberty (Dols).

The home also has a whistleblowing policy available to staff.

#### Our judgement

People using the service were protected from abuse or the risk of abuse because the service has systems in place to prevent this from happening.  
The provider was meeting this outcome area.

## Outcome 13: Staffing

### 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 sufficient numbers of appropriate staff.

### What we found

#### Our judgement

The provider is compliant with Outcome 13: Staffing

#### Our findings

##### What people who use the service experienced and told us

People told us that staff were kind and caring.

One person told us that the staff were "the top team" and told us that they help them attend activities.

One person told us that staff make it possible for him to see his relatives overseas.

Staff told us that they felt there was sufficient staff provided to meet people's one to one care needs.

##### Other evidence

On our arrival in the home the manager explained the staffing structure for the day. Some staff were supporting people on a one to one basis either in the home or on community activities. The number of staff on duty was sufficient, and they had the skills, qualifications, and experience to meet people's needs. The staff duty rota was also seen and showed when extra staff were allocated to meet people's assessed individual needs and pre arranged activities. It also included cover arrangements for planned and sudden staff absence.

The staff on duty told us that they enjoyed working in the home and felt they received the training necessary to undertake their duties. The staff team is well established and were confident and professional in their roles, which provided a good rapport with the people living in the home.

The manager showed us the staff training files. They outlined all the training staff had undertaken that includes health and safety, first aid, food hygiene, safeguarding vulnerable people, manual handling, and infection control. All staff undertake training in

the management of challenging behaviour in order to meet the complex needs of the people in their care.

There is a recruitment policy in place to protect the welfare and safety of people who use the service. Staff employment files were seen and included all the required documentation for example an application form, two written references, photographic identification, and a Criminal Records Bureau (CRB) disclosure.

The manager is proactive in undertaking formal supervision with staff and evidence of this is recorded on individual files.

**Our judgement**

Staff were employed in sufficient numbers and with the relevant safety checks that promoted people's safety and welfare.

The provider was meeting this outcome area.

## 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 were told that systems for quality assurance and improvement were in place. Information about people's experiences had been asked for and gathered in such a way to allow for monitoring of risk and the quality of care delivery.

##### Other evidence

The manager told us that the home had systems in place to monitor the quality of service provision.

This is done by daily interaction with people using the service to highlight any issues to resolve any problems immediately. He stated that formal meetings can prove stressful to people therefore informal discussion can be more productive.

Ongoing reviews of care plans and risk assessments were undertaken by the manager and the clinical team for monitoring purposes.

Care manager reviews are also used to assess the quality of the service being offered. Ashcroft Care has a quality assurance manager who would undertake monthly visits of the service to focus quality and improvement.

We saw the manager undertakes health and safety audits to promote peoples welfare and to maintain a safe working environment.

Corporate annual surveys are distributed to relatives and staff and feedback is discussed and acted upon.

##### Our judgement

People who use this service benefit from regular quality assurance monitoring systems

that are in place to promote good care and welfare.  
The provider was meeting this outcome area.

# What is a review of compliance?

By law, providers of certain adult social care and health care services have a legal responsibility to make sure they are meeting essential standards of quality and safety. These are the standards everyone should be able to expect when they receive care.

The Care Quality Commission (CQC) has written guidance about what people who use services should experience when providers are meeting essential standards, called *Guidance about compliance: Essential standards of quality and safety*.

CQC licenses services if they meet essential standards and will constantly monitor whether they continue to do so. We formally review services when we receive information that is of concern and as a result decide we need to check whether a service is still meeting one or more of the essential standards. We also formally review them at least every two years to check whether a service is meeting all of the essential standards in each of their locations. Our reviews include checking all available information and intelligence we hold about a provider. We may seek further information by contacting people who use services, public representative groups and organisations such as other regulators. We may also ask for further information from the provider and carry out a visit with direct observations of care.

Where we judge that providers are not meeting essential standards, we may set compliance actions or take enforcement action:

**Compliance actions:** These are actions a provider must take so that they **achieve** compliance with the essential standards. We ask them to send us a report that says what they will do to make sure they comply. We monitor the implementation of action plans in these reports and, if necessary, take further action to make sure that essential standards are met.

**Enforcement action:** These are actions we take using the criminal and/or civil procedures in the Health and Social Care Act 2008 and relevant regulations. These enforcement powers are set out in the law and mean that we can take swift, targeted action where services are failing people.

## Information for the reader

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