

# Review of compliance

## Welmede Housing Association Limited Tall Trees

<b>Region:</b>	South East
<b>Location address:</b>	Guildford Road Ottershaw Surrey KT16 0PL
<b>Type of service:</b>	Care home service without nursing
<b>Date of Publication:</b>	February 2012
<b>Overview of the service:</b>	Accommodation for up to 3 people who require personal care.

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

## Our current overall judgement

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

The summary below describes why we carried out this review, what we found and any action required.

### Why we carried out this review

We carried out this review as part of our routine schedule of planned reviews.

### How we carried out this review

We reviewed all the information we hold about this provider, carried out a visit on 20 December 2011, looked at records of people who use services and talked to staff.

### What people told us

People who use services at Tall Trees have multiple or complex needs. It was therefore difficult to ask them about their levels of satisfaction with the outcome areas reviewed. We observed however that people using services, appeared relaxed and at ease in their surroundings. We saw good interactions between staff and people who use the service when they were preparing to go on an outing.

Two of the three people using services were out of the home on the day of our visit. Records showed them to be taking part in planned day care activities.

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

It is not always possible for individual who use the service to verbally express their views but when they do they are respected and documented.

People who live at Tall Trees are treated with dignity and respect and their independence is consistently promoted.

Overall, we found that Tall Trees was meeting this essential standard.

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

The needs of people using the service and any risks to them are fully assessed to

ensure that safe and appropriate care is provided.

However the allocation of administration days or hours for staff to update and organise reviews would benefit everyone who uses the service.

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

Staff on duty appeared to be aware of their role and suitable arrangements were fully in place to safeguard people who use the service from abuse or the risk of abuse.

Overall, we found that Tall Trees was meeting this essential standard.

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

People using services have their health and welfare needs met by sufficient, competent and appropriately trained staff.

Overall, we found that Tall Trees was meeting this essential standard.

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

The service has appropriate systems and policies and procedures in place to assess and monitor the quality of the service that people receive.

Overall, we found that Tall Trees was meeting this essential standard.

### **Actions we have asked the service to take**

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

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

### **Other information**

Please see previous reports for more information about previous reviews.

**What we found  
for each essential standard of quality  
and safety we reviewed**

The following pages detail our findings and our regulatory judgement for each essential standard and outcome that we reviewed, linked to specific regulated activities where appropriate.

We will have reached one of the following judgements for each essential standard.

**Compliant** means that people who use services are experiencing the outcomes relating to the essential standard.

A **minor concern** means that people who use services are safe but are not always experiencing the outcomes relating to this essential standard.

A **moderate concern** means that people who use services are safe but are not always experiencing the outcomes relating to this essential standard and there is an impact on their health and wellbeing because of this.

A **major concern** means that people who use services are not experiencing the outcomes relating to this essential standard and are not protected from unsafe or inappropriate care, treatment and support.

Where we identify compliance, no further action is taken. Where we have concerns, the most appropriate action is taken to ensure that the necessary improvements are made. Where there are a number of concerns, we may look at them together to decide the level of action to take.

More information about each of the outcomes can be found in the *Guidance about compliance: Essential standards of quality and safety*

## Outcome 01: Respecting and involving people who use services

### What the outcome says

This is what people who use services should expect.

People who use services:

- \* Understand the care, treatment and support choices available to them.
- \* Can express their views, so far as they are able to do so, and are involved in making decisions about their care, treatment and support.
- \* Have their privacy, dignity and independence respected.
- \* Have their views and experiences taken into account in the way the service is provided and delivered.

### What we found

#### Our judgement

The provider is compliant with Outcome 01: Respecting and involving people who use services

#### Our findings

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

We did not speak to people about this outcome area on this occasion, or have the opportunity to observe it, so cannot report what people using the service said, or our observations

##### Other evidence

We were informed by a member of staff that the people who use the service have complex learning disabilities and challenging behaviour, and therefore it is not always possible for them to fully engage in care planning, reviews and meetings.

A staff member did however state that they encouraged and supported the people who use the service to make choices about their lives and are treated as individuals within pre-agreed guidelines.

We looked at care plans that included people'S cultural and religious needs.

We saw records of key-workers actively and the attempts they had made to seek feedback from the people who use the service and to involve them in the service and the services they receive.

The records provided evidence that the people who use the service with support are active participants in the home.

The service has a set of policies and procedures which demonstrates to the staff how independence was to be promoted, with people choosing to help with support and

encouragement from staff.

We looked at all the care plans belonging to the people who use the service they demonstrated an awareness of how to promote independence of the person. The care plans clearly included information about their preferences likes and dislikes of the individual who owned the plan.

We saw that people had a choice about community activities, and for example were supported to go on days out, visits to clubs, shopping and outings. On the day of the visit two people who use the service were seen getting ready to go out with staff, while the remaining individual stayed at home.

### **Our judgement**

It is not always possible for individual who use the service to verbally express their views but when they do they are respected and documented.

People who live at Tall Trees are treated with dignity and respect and their independence is consistently promoted.

Overall, we found that Tall Trees 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

There are minor concerns with Outcome 04: Care and welfare of people who use services

#### Our findings

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

We did not speak to people about this outcome area on this occasion, or have the opportunity to observe it, so cannot report what people using the service said, or our observations.

##### Other evidence

The people who use the service at Tall Trees are provided with safe and appropriate care. The care packages are designed initially from assessments undertaken prior to the person moving into the service.

The service then collates all relevant information required and makes decisions based on people's choices and risk assessments. The additional information is then used by the staff at the service to develop and review individuals care plans.

The care plans we saw during our visit, included, admission details and initial assessments, a health action plan covering health needs and records, individual and general risk assessments, communication and behavioural plans, and a person centred plan of care.

It was however noted that the care plans were in different formats, and the information they contained showed some signs of review. We were informed by a member of staff that the staff team and manager do not have allotted time for reviews and updates. It would benefit the service and the people who use the service if administration work was factored into the daily work schedule of the manager and staff. This would ensure that all documents pertaining to the service and the people who use the service are updated and reviewed at acceptable intervals. The provider has developed a set of policies and procedures to ensure that the health care needs of the people who use the

service are being met.

All the people who use this service are registered with a local GP and other health care professionals.

Records of GP and other health care professionals' appointments, consultations and visits are included in care and health action plans.

We saw that the home has a set of emergency procedures and policies to provide guidance and support to staff in the cases of, fire, medical emergencies, hospital admission, electricity power cuts and accidents.

**Our judgement**

The needs of people using the service and any risks to them are fully assessed to ensure that safe and appropriate care is provided.

However the allocation of administration days or hours for staff to update and organise reviews would benefit everyone who uses the service.

## Outcome 07: Safeguarding people who use services from abuse

### What the outcome says

This is what people who use services should expect.

People who use services:

\* Are protected from abuse, or the risk of abuse, and their human rights are respected and upheld.

### What we found

#### Our judgement

The provider is compliant with Outcome 07: Safeguarding people who use services from abuse

#### Our findings

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

We did not speak to people about this outcome area on this occasion, or have the opportunity to observe it, so cannot report what people using the service said, or our observations.

##### Other evidence

We saw that the provider has attempted to minimise risk and potential abuse by making sure all the policies and procedures to promote safeguarding were in place.

The service has written policies covering adult protection and whistle blowing. These make clear the vulnerability of people who use services, and the duty of staff to report any concerns they may have to a responsible authority for investigation

The staff member of duty at the time of our visit stated that the team were aware of safeguarding procedures.

A review of the staff training matrix indicated that they all had undertaken recent training in safeguarding and protection.

The deputy manager confirmed that staff had also received training in the Mental Capacity Act 2005, Deprivation of Liberty Safeguards and managing challenging behaviour

The deputy manager confirmed that relevant checks are carried out by the organisation on all potential staff prior to them commencing work at the home.

##### Our judgement

Staff on duty appeared to be aware of their role and suitable arrangements were fully in place to safeguard people who use the service from abuse or the risk of abuse.

Overall, we found that Tall Trees was meeting this essential standard.

## Outcome 14: Supporting staff

### What the outcome says

This is what people who use services should expect.

People who use services:

\* Are safe and their health and welfare needs are met by competent staff.

### What we found

#### Our judgement

The provider is compliant with Outcome 14: Supporting staff

#### Our findings

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

We did not, on this occasion speak to people about this outcome so cannot report what people using the service said.

##### Other evidence

The deputy manager stated that all new staff receive induction, which follows the Skills for Care core induction standards, they includes, health and safety, safeguarding, infection control, food hygiene and fire precautions.

We looked at the training matrix which highlighted all mandatory training and all additional training undertaken by the staff team. It was evident from the matrix that all staff employed at Tall Trees at the time of this visit had completed all mandatory training and additional training specific the needs of the people who use the service. Within the staff team several member had completed National Vocational Qualifications in care, one had gained a level four, two had gained level three and two held level twos. Regular staff meetings take place and records indicated that they were undertaken in an open and inclusive way.

##### Our judgement

People using services have their health and welfare needs met by sufficient, competent and appropriately trained staff.

Overall, we found that Tall Trees was meeting this essential standard.

## Outcome 16: Assessing and monitoring the quality of service provision

### What the outcome says

This is what people who use services should expect.

People who use services:

\* Benefit from safe quality care, treatment and support, due to effective decision making and the management of risks to their health, welfare and safety.

### What we found

#### Our judgement

The provider is compliant with Outcome 16: Assessing and monitoring the quality of service provision

#### Our findings

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

We did not speak to people about this outcome area on this occasion, or have the opportunity to observe it, so cannot report what people using the service said, or our observations.

##### Other evidence

The provider undertakes regular monthly assessments and monitoring where the quality of care and the environment at Tall Trees is reviewed and checked.

The records seen indicated that the monthly assessments are completed and a report is then generated outlining the service and the environment of the home. The report will also make reference to any area where attention or action is to be made. The most recent report dated November 2011, highlighted an area of flooring between the toilet and hall on the ground floor where the seam in the vinyl covering had split and the floor below had become unstable and a possible trip hazard.

The deputy manager stated that all the people who use the service would be unable to complete a satisfaction survey. However the people who use the service have close links with their families, who are approached to provide feed back about the service and the care their relatives receive at Tall Trees.

We saw completed questionnaires from a wide source of people representing various groups involved in the care and support of the people who use Tall Trees. The completed questionnaires demonstrated a high degree of affirmation and conformation that the service and the care that is provided at Tall Trees has very positive outcomes for the people who use it.

There is a clear management structure with good lines of communication and

accountability. A member of staff stated that the manager was very hands on and always put the needs of the people who use the service first.

Accidents and other incidents involving people using the service are recorded and reviewed by the manager and staff of the service.

The service has policies and procedures in place to ensure that any incident will be reported to the Commission, as part of the monitoring process.

**Our judgement**

The service has appropriate systems and policies and procedures in place to assess and monitor the quality of the service that people receive.

Overall, we found that Tall Trees 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 9 HSCA 2008 (Regulated Activities) Regulations 2010	Outcome 04: Care and welfare of people who use services
	<p><b>Why we have concerns:</b></p> <p>It would benefit the service and the people who use the service if administration work was factored into the daily work schedule of the manager and staff. This would ensure that all documents pertaining to the service e and the people who use the service are updated and reviewed at acceptable intervals. The provider has developed a set of policies and procedures to ensue that the health care needs of the people who us the service are being met.</p>	

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

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

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

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

# What is a review of compliance?

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

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

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

When making our judgements about whether services are meeting essential standards, we decide whether we need to take further regulatory action. This might include discussions with the provider about how they could improve. We only use this approach where issues can be resolved quickly, easily and where there is no immediate risk of serious harm to people.

Where we have concerns that providers are not meeting essential standards, or where we judge that they are not going to keep meeting them, we may also set improvement actions or compliance actions, or take enforcement action:

**Improvement actions:** These are actions a provider should take so that they **maintain** continuous compliance with essential standards. Where a provider is complying with essential standards, but we are concerned that they will not be able to maintain this, we ask them to send us a report describing the improvements they will make to enable them to do so.

**Compliance actions:** These are actions a provider must take so that they **achieve** compliance with the essential standards. Where a provider is not meeting the essential standards but people are not at immediate risk of serious harm, we ask them to send us a report that says what they will do to make sure they comply. We monitor the implementation of action plans in these reports and, if necessary, take further action to make sure that essential standards are met.

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

## Information for the reader

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## Care Quality Commission

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