

Review of compliance

Isand Ltd Hawkstone House	
Region:	Yorkshire & Humberside
Location address:	Shann Lane Keighley BD20 6NA
Type of service:	Care Home without nursing
Publication date:	27 April 2011
Overview of the service:	<p>Hawkstone House is large detached house standing in its own grounds. Keighley town centre is about 1/2 mile away where a variety of shops, transport links and leisure facilities can be found.</p> <p>The home provides accommodation and support for 10 adults with learning disabilities who require significant support in daily living and may present with challenging behaviour.</p> <p>There are six bedrooms in the main house and four bedroom in the adjoining Cottage. All the</p>

	<p>bedrooms are single rooms and five have en-suite facilities. A large dining room and a separate lounge are provided in the main building. Another dining room, lounge and small kitchen are available in the Cottage.</p>
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Summary of our findings for the essential standards of quality and safety

What we found overall

We found that Hawkstone House was not meeting one or more essential standards. Improvements were needed.

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

Why we carried out this review

We carried out this review because concerns were identified in relation to:

- Consent to care and treatment
- Meeting nutritional needs
- Safeguarding people who use services from abuse
- Cleanliness and infection control
- Safety and suitability of premises
- Staffing
- Supporting workers
- Complaints

We also checked whether Hawkstone House had made improvements in relation to:

- Care and welfare of people who use services
- Management of medicines

How we carried out this review

We reviewed all the information we hold about this provider, carried out a visit on 6 April 2011, observed how people were being cared for, talked with people who use services, talked with staff, checked the provider's records, and looked at records of people who use services.

What people told us

People told us they like their rooms, the home is kept clean and that they like the meals.

What we found about the standards we reviewed and how well Hawkstone House was meeting them

Outcome 2: Before people are given any examination, care, treatment or support, they should be asked if they agree to it

People and/or their representatives are consulted about their care plan to make sure they agree with it.

- Overall, we found that Hawkstone House was meeting this essential standard.

Outcome 4: People should get safe and appropriate care that meets their needs and supports their rights

People receive good care, treatment and support that meets their needs.

- Overall, we found that Hawkstone House was meeting this essential standard.

Outcome 5: Food and drink should meet people's individual dietary needs

People are supported to have a good diet.

- Overall, we found that Hawkstone House was meeting this essential standard.

Outcome 7: People should be protected from abuse and staff should respect their human rights

People receive a service that takes steps to prevent abuse.

- Overall, we found that Hawkstone House was meeting this essential standard.

Outcome 8: People should be cared for in a clean environment and protected from the risk of infection

The home is clean but better infection prevention measures need to be in place.

- Overall, we found that improvements were needed for this essential standard.

Outcome 9: People should be given the medicines they need when they need them, and in a safe way

People are given their medication in a way that they like.

- Overall, we found that Hawkstone House was meeting this essential standard.

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

The accommodation provided is suitable and safe.

- Overall, we found that Hawkstone House was meeting this essential standard.

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

People are safe and there are enough suitably qualified staff on duty to meet their needs.

- Overall, we found that Hawkstone House 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 living in the home are cared for and supported by staff who get appropriate training.

- Overall, we found that Hawkstone House was meeting this essential standard.

Outcome 17: People should have their complaints listened to and acted on properly

There is a complaints procedure in place, but better records need to be made to show that complaints have been taken seriously and dealt with properly.

- Overall, we found that improvements were needed for this essential standard.

Action 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.

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 2: Consent to care and treatment

What the outcome says

This is what people who use services should expect.

People who use services:

- Where they are able, give valid consent to the examination, care, treatment and support they receive.
- Understand and know how to change any decisions about examination, care, treatment and support that has been previously agreed.
- Can be confident that their human rights are respected and taken into account.

What we found

Our judgement

The provider is compliant
with outcome 2: Consent to care and treatment

Our findings

What people who use the service experienced and told us
People using the service did not make any comments about this outcome.

Other evidence
The acting manager told us that at the six monthly reviews of people's care plans people and/or their relatives are involved in this process. This is to make sure people understand and agree with the plan that is in place. Reviews also take place with care managers from the placing authorities, who also check to make sure peoples' needs are being met. We saw review minutes that showed the individuals representative had been involved in this process.

We also saw that people themselves or their representative had signed their care plan stating that they agreed with the content.

People living in the home are also asked at their monthly meetings with their keyworkers if the are happy with the care and support they receive. This means that people are involved in planning their own care.

Our judgement
People and/or their representatives are consulted about their care plan to make sure they agree with it.

Outcome 4: 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 4: Care and welfare of people who use services

Our findings
<p>What people who use the service experienced and told us</p> <p>People using the service did not make any comments about this outcome.</p> <p>Other evidence</p> <p>We looked at four care plans to see what information was available to staff about people and what support they need to offer. We found that care plans contained good details about people's likes and dislikes, links with family and friends, things that individuals can do independently and things they need support with. There was also good information for staff about what action they need to take if there is a deterioration in people's behaviours and the support they should offer.</p> <p>We talked to staff who clearly had a good knowledge of people's care plans and who were able to talk about individuals specific support needs.</p> <p>We could also see that six monthly reviews of the care plans had taken place, however, none of the care plans or reviews that we saw were dated. This made it difficult to find out how up to date the information was.</p> <p>People have very good opportunities to go out in the local community and to follow their chosen activities. One the day of our visit most people were out doing a variety of things, for example, visiting a relative, out for a walk, shopping, at school and</p>

working in the organisations bakery.

When we visited the home in January we felt that the care plans for people who have specific health care needs could be improved to give staff more information about care and support issues. On this visit we found this had been addressed on the new care plans that have been introduced.

We noted that care plan review notes are not always dated and that internal reviews did not show who had been involved in the process. We found good risk assessments in place, but some were overdue for review. It is important that this information is kept up to date so that any changes to people's care and support can be made.

Our judgement

People receive good care, treatment and support that meets their needs.

Outcome 5: 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 5: Meeting nutritional needs

Our findings

What people who use the service experienced and told us
People said that the food was good.

Other evidence
The food stocks in the home were good. Staff told us about specific dietary needs for people living in the home and were able to show us the storage and cooking arrangements for an Halal diet and gluten free diet. People are involved in the preparation of food and shopping.

A simple cookbook has been developed by the organisation that incorporates people's favourite recipes and recipes from around the world.

Our judgement
People are supported to have a good diet.

Outcome 7: 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 7: Safeguarding people who use services from abuse

Our findings

What people who use the service experienced and told us

People using the service did not make any comments about this outcome.

Other evidence

When we visited the service in January 2011 we found the following:

The home has written policies and procedures about keeping people who use their service protected from any abuse. All of the staff have received training about the types of abuse that can occur and what they need to do if they think there is something happening that is not in the best interest of a person in their care.

We spoke to two members of staff who confirmed that they had received training and would feel able to raise any concerns that they may have with a senior member of staff. There is a clear reporting procedure in place for any incidents that may happen in the home and any untoward incidents between people who use the service are automatically reported to the local safeguarding team. This makes sure that someone external to the service can make sure the staff at the home are taking the right action to keep people safe.

On this visit we found that these measures were still in place.

We also saw that staff have received training on the Mental Capacity Act 2005 and found information about people making decisions for themselves in the care plans. We also found that staff are addressing any possible Deprivation of Liberty issues through the care planning process. These safeguards provide a legal framework to ensure that people are deprived of their liberty only when there is no other way to care for them or safely provide treatment and to ensure that people's human rights are protected. For example the external doors in the houses are locked with a keypad; staff questioned if this practice would restrict one persons' ability to go out as and when they wish. The decision was that it would have little impact as the individual is able to use the key pad.

Our judgement

People receive a service that takes steps to prevent abuse.

Outcome 8: Cleanliness and infection control

What the outcome says

Providers of services comply with the requirements of regulation 12, with regard to the *Code of Practice for health and adult social care on the prevention and control of infections and related guidance*.

What we found

Our judgement

There are minor concerns
with outcome 8: Cleanliness and infection control

Our findings

What people who use the service experienced and told us

People told us the home is kept clean.

Other evidence

We looked around the Main House and The Cottage and found both clean and tidy. Although there were plenty of hand washing facilities one of the shower rooms and bathroom did not have any soap available so people can wash their hands properly. If people are not able to wash their hands properly there is a risk of cross infection.

There are people living in the home that smoke and at the moment the smoking area is outside of the kitchen in the main house. This means that smoke could drift into the kitchen whilst food is being prepared. We asked one of the managers about this. She showed us the current work that is going on in the car park to provide a more suitable area for people to use.

Our judgement

The home is clean but better infection prevention measures need to be in place.

Outcome 9: Management of medicines

What the outcome says

This is what people who use services should expect.

People who use services:

- Will have their medicines at the times they need them, and in a safe way.
- Wherever possible will have information about the medicine being prescribed made available to them or others acting on their behalf.

What we found

Our judgement

The provider is compliant
with outcome 9: Management of medicines

Our findings

What people who use the service experienced and told us

People using the service did not make any comments about this outcome.

Other evidence

When we visited in January 2011 we asked the home to make some improvements to individuals' medication care plans.

On this visit we found that the new care plans gave up to date information about what medication people were taking. There was detailed information in each care plan about what each type of medication was for and its side effects. We also found details of how one person prefers to take their medication.

Our judgement

People are given their medication in a way that they like.

Outcome 10: Safety and suitability of premises

What the outcome says

This is what people should expect.

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

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

What we found

Our judgement

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

Our findings

What people who use the service experienced and told us
People told us they like their bedrooms.

Other evidence
The home has gardens to the front and rear and there is space for car parking at the front.

The Main House has a lounge, dining room, kitchen and six single bedrooms and The Cottage has a lounge/dining room, kitchen and four single bedrooms. We found that the Main House was generally well decorated and maintained. In The Cottage we noted that the environment was in need of some general repairs, redecoration and that some furniture was in need of replacement. We were told by one of the managers that this work is in hand and this house will be refurbished in the very near future.

The acting manager completes monthly audits of the environment and staff told us that the organisation respond to requests for repairs or replacement of furniture and equipment in a timely way.

All of the bedrooms are single and people, where appropriate, have personalised their rooms with various ornaments, furniture and pictures making them look homely.

Our judgement
The accommodation provided is suitable and safe.

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 using the service did not make any comments about this outcome.

Other evidence
There are 28 permanent staff employed at Hawkstone House and about half of these staff have worked at the home for less than 12 months. We looked at the duty rotas to see if there was a mix of new staff on duty with more experienced staff members. We found that some days there was a fairly even mix but on others there wasn't. We asked staff about this because we wanted to check that there are staff on each shift who have the skills to support people in their care. Staff told us that they didn't think there was an imbalance of new and experienced people on shift and felt that some of the new staff are highly competent. They did say that people living in the home have been unsettled over recent months because of new staff being recruited but that things are starting to settle now.

One member of staff told us that the changes in staff have been very positive in the following ways:

Staff interact well with people living in the home.
People living in the home are getting more opportunities to go out.
New staff have brought new ideas.
There is a good atmosphere in the home and staff are working well as a team.

Our judgement
People are safe and there are enough suitably qualified staff on duty to meet their needs.

Outcome 14: Supporting workers

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 workers

Our findings

What people who use the service experienced and told us
People using the service did not make any comments about this outcome.

Other evidence
Staff at the home receive appropriate training. The homes training matrix shows that staff have undertaken all of the mandatory training and that this is fully up to date. The organisation have plenty of training on offer and have a career structure in place so that staff can gain promotion, if they so wish. Approximately half of the staff have a formal qualification in care which means they have been assessed as competent in that role.

All new staff attend induction training before they start working in the home, this is to make sure that they have the necessary knowledge and skills to do the job. We spoke to two members of staff who told us that the training was "second to none" and that it had prepared them for their role as a support workers.

Staff we spoke to confirmed that they get supervisions sessions, but we saw that some of these were not up to date. This issue has been picked up by the organisations own checks on the service. The acting manager knows what action she has to take to meet the target of making sure staff have a formal supervision session every 2 months. Staff told us that the acting manager and other staff are very approachable and supportive. This means that staff are able to discuss their practice and professional development on a regular basis.

Our judgement
People living in the home are cared for and supported by staff who get appropriate training.

Outcome 17: Complaints

What the outcome says

This is what people should expect.

People who use services or others acting on their behalf:

- Are sure that their comments and complaints are listened to and acted on effectively.
- Know that they will not be discriminated against for making a complaint.

What we found

Our judgement

There are minor concerns
with outcome 17: Complaints

Our findings

What people who use the service experienced and told us

People using the service did not make any comments about this outcome.

Other evidence

We saw that the complaints procedure is on display on the information board for people living in the home in an easy read format. We also found full details of the procedure in the contracts that people have been given. This means that people have been given information about how to raise any concerns they may have about the service.

We looked at the complaints log to see what concerns or complaints had been made and what action staff had taken to resolve them. We were aware that some concerns have been raised but didn't find any details recorded in the complaints log. It is important that staff record the details of any concerns or complaints that are made together with the action they have taken to sort them out and the outcome. This will make sure the complainant is kept informed about what has been done and staff can check that they are satisfied with the outcome.

Our judgement

There is a complaints procedure in place, but better records need to be made to show that complaints have been taken seriously and dealt with properly.

Action we have asked the provider to take

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.

Regulated activity	Regulation	Outcome
Accommodation for persons who require nursing or personal care	12	8: Cleanliness and infection control
	<p>How the regulation is not being met:</p> <p>The home is clean but better infection prevention measures need to be in place.</p>	
Accommodation for persons who require nursing or personal care	19	17: Complaints
	<p>How the regulation is not being met:</p> <p>There is a complaints procedure in place, but better records need to be made to show that complaints have been taken seriously and dealt with properly.</p>	

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 28 days of this report being received.

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

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