

Review of compliance

The Parkview Society College House

Region:	South West
Location address:	26 Keyberry Road Newton Abbot Devon TQ12 1BX
Type of service:	Care Home services without Nursing
Date the review was completed:	May 2011
Overview of the service:	College House cares for up to 12 adults aged over 18 with a learning disability. Those people currently living in the home are over 65 years old. College House is part of the 'Parkview Society' which is a registered charity that runs several care homes in the South Devon area. College House is a large detached bungalow in a residential area of Newton Abbot. It is close to local amenities and within a short walk of the bus route.

	<p>The premises has a large pleasant lounge with sitting area overlooking the well-maintained gardens which are accessible to people living in the home. There is a kitchen and dining room and all but two of the bedrooms are on the ground floor. There are two bathrooms one which is adapted, and additional toilets around the home. The first floor is reached by stairs where there are two bedrooms, the office and sleep-in rooms for staff.</p>
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Summary of our findings for the essential standards of quality and safety

What we found overall

We found that College House was meeting all the essential standards of quality and safety we reviewed but, to maintain this, we have suggested that some improvements are made.

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 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 and carried out a visit on 28 March 2011 when we observed how people were being cared for. We 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

The people that we spoke with at College House were very positive about their lives at the home. Everyone we spoke with told us that they were happy living at College House. All the people who live at the home have lived there for some time and know each other and the staff very well.

We saw care plans for two people living at the home. Each of them showed that the person had been consulted about the goals set in the plan. People we spoke with said they felt safe and supported at the home, they told us they had a 'key worker'

and talked positively about this. A key worker is a member of staff who takes particular responsibility for the needs of that individual.

Records and discussion with staff confirmed that when necessary the home seeks the views and support of other professionals such as GPs.

People were keen to show us around their home and during our visit we looked at the communal areas and were invited to look at 2 bedrooms. The home was clean and well maintained throughout and there were no unpleasant odours. There was a warm and friendly atmosphere and many personal items on display around the home.

People were seen to be enjoying their meals and they told us they always liked what they had to eat.

During our visit we saw staff interacting with the people they support and providing opportunities for discussions. The staff listened to people's views and provided advice and guidance when appropriate. We saw staff that were competent, attentive and caring. We did not see any practice that gave us any cause for concern.

All the staff we spoke with were able to tell us about the needs of the people they support and also how these needs are met. We heard staff speaking with people in a kind and respectful manner and responded promptly, discretely and sensitively to people when they asked questions or needed help.

Medication is prepared by a local pharmacist and managed by staff in the home. Staff told us they had received training in managing medication and they felt confident to administer any needed.

There is a stable staff group at the home and it was clear that staff and people living at the home knew each other very well and showed each other mutual respect. All staff spoken with said they enjoyed working at the home and felt well supported. Staff spoke of the supportive staff team and good communication between shifts.

We were told by staff and management that people are encouraged and supported to be fully involved in the running of their home.

The home has a complaints procedure and all complaints and outcomes of investigations are logged and the outcomes are communicated to the complainant. We saw that personal records were being well maintained by the staff team. And any information about an individual had been regularly reviewed to ensure that it was correct and still meeting the individual's needs.

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

Outcome 1: 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 College House are respected by staff and are encouraged to make their own decisions.

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

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

People feel that they can choose how to lead their lives. However, training for staff on the Mental Capacity Act (MCA) would ensure staff have the knowledge and confidence to support people in making their own choices.

- Overall, we found that College House was meeting this essential standard but, to maintain this, we have suggested that some improvements are made.

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

People living at College House feel safe and receive a personalised care package that is delivered in a sensitive and appropriate way.

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

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

People have access to a well balanced and nutritious diet and are able to make choices about what and where they eat.

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

Outcome 6: People should get safe and coordinated care when they move between different services

The provider co-operates well with others to make sure care for people is coordinated and effective.

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

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

The home's procedures for keeping people safe would be improved further with appropriate training for staff.

- Overall, we found that College House was meeting this essential standard but, to maintain this, we have suggested that some improvements are made.

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

Systems and procedures ensure that College House is a clean and hygienic place for people to live in, work at and visit.

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

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

Medicines are well managed at the home.

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

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

People who live in the home benefit from an environment that is homely and well maintained.

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

Outcome 11: People should be safe from harm from unsafe or unsuitable equipment

People have access to safe and suitable equipment to meet their assessed needs.

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

Outcome 12: People should be cared for by staff who are properly qualified and able to do their job

Recruitment procedures at College House are robust and ensure that people who may be unsuitable to work with vulnerable people are not employed at the home.

- Overall, we found that College 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

The numbers and skill mix of staff on duty are sufficient to meet the needs and numbers of people currently living at the home.

- Overall, we found that College 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

Staff at College House are well trained and supported to care for the people who live at the home.

- Overall, we found that College House 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 provider is able to critically assess the quality of the service and drive improvement where identified

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

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

The home has an open culture that allows and encourages people to express their views and concerns.

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

Outcome 21: People's personal records, including medical records, should be accurate and kept safe and confidential

Records are generally well maintained. However, individualising people's daily records will further improve the systems already in place.

- Overall, we found that College House was meeting this essential standard but, to maintain this, we have suggested that some improvements are made.

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.

Other information

Please see previous review reports for more information.

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 1: 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 1: Respecting and involving people who use services

Our findings

What people who use the service experienced and told us
The people that we spoke with at College House were very positive about their lives at the home. All the people who live at the home have lived there for some time and know each other and the staff very well.

People were offered choices about what they wanted for tea, what they wanted to do in the afternoon and where they wanted to spend their time.

The provider told us that although clients had been consulted regularly on an individual basis regular meetings between all the clients had not taken place. We were told that the provider was intending to ensure the meetings took place every six weeks over the coming year.

Everyone who lives at the home has a 'key worker', this is someone who takes particular responsibility for the needs of that individual. People told us they often speak with their key worker about things they would like to do, and staff told us

about how they saw their role as a key worker, being that of an enabler.

We saw and heard staff treating people with respect and any personal care that was offered was done so in a discreet manner.

Other evidence

The provider stated in their self assessment that 'The dignity and privacy of our clients are respected at all times and confidentiality is respected.

Our judgement

People who live at College House are respected by staff and are encouraged to make their own decisions.

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
We saw care plans for two people living at the home. Each of them showed that the person had been consulted about the goals set in the plan. The provider told us that every time a plan is reviewed the individual is involved in the process.

Staff told us about how they had worked with people to help them overcome their fears about treatment.

The provider told us that staff had not received any training in relation to the Mental Capacity Act (MCA). This Act is in place to ensure everyone has the right to make their own decisions unless it is proven it is not in their best interests to do so. It must be assumed that people have the right to make decisions – even bad ones – unless there is evidence that they do not have capacity to do so.

Other evidence
The provider stated in their self assessment that should anyone withhold their consent to treatment this would be respected.

Our judgement

People feel that they can choose how to lead their lives. However, training for staff on the MCA would ensure staff have the knowledge and confidence to support people in making their own choices.

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

What people who use the service experienced and told us
While we were at the home we spoke with people about the care and support they receive. We also looked at some care records and spoke with staff to see how people's care is planned and delivered.

People we spoke with said they felt safe and supported at the home. People told us they had a 'key worker' and talked positively about this. A key worker is a member of staff who takes particular responsibility for the needs of that individual.

Records seen for each individual showed that a people's needs and goals are reviewed twice a year to ensure the plan continues to be followed appropriately. Risk assessments and care plans provide staff with enough information to ensure the support people receive is consistent, promotes independence where possible and keeps the individual safe from harm.

The people we met were keen to show us around their home and two people showed us their bedrooms. Everyone we spoke with told us that they were happy living at College House and most people have lived at the home for many years. We saw staff encouraging people to make choices whilst offering gentle advice and

guidance where appropriate.

When we arrived at the home several people were out pursuing their own particular interests and hobbies. One person told us about their job they had that earned them a little extra money, another person told us about their trips to the watch the local football team and others told us about their train trips.

There are many photographs displayed around the home showing various holidays, outings and events that people have enjoyed.

We were told that as people at the home are getting older they are needing more help to recognise and manage their healthcare needs. All of the staff spoken with had a good understanding of people's individual healthcare needs and some told us of recent training they had had about caring for people with dementia care needs.

Staff had a good understanding of the different communication methods of people they support and were able to help us understand these as well. Staff told us that they use this knowledge to ensure that people are able to express their views and raise any concerns about their care or well being.

Some people who live at the home are able to spend their day out of the home without staff. People told us of their visits to see the local football team play and other nearby towns. Outings for people who need support from staff are more limited, but people regularly go shopping and to the Gateway Club.

Records and discussion with staff confirmed that when necessary the home seeks the views and support of other professionals such as GPs.

We spoke with one GP who has visited the home in the past and who now sees people at his surgery. He told us that people had always appeared to receive the care they needed. He said that staff supported people to attend regular routine checks and always asked for help and visits appropriately.

We also spoke with the local care management team, who told us that they have no current involvement with the home and have no concerns.

Other Evidence

No new people have been admitted to the home for several years. However, there are procedures in place to ensure anyone wishing to live at the home would be able to be cared for appropriately. The provider stated in their self assessment 'Discussions on the suitability of the prospective resident and setting will take place continuously throughout the process'.

Our judgement

People living at College House feel safe and receive a personalised care package that is delivered in a sensitive and appropriate way.

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

When we visited the home we were able to speak with the people living there and also to staff about meals and mealtimes. We saw staff preparing tea and we sat with people for a short time while they were eating their meal.

We were told that menus are planned and organised to meet the individual needs and preferences of each person and that a choice is always available. During our visit we heard staff asking people what they wanted for tea. Mealtimes can be flexible depending on the individual and other activities during their day. We saw one person who had been out during the day having their 'lunch' at tea time.

Staff were able to tell us about the individual preferences of people and of their different dietary needs. For example some people need a soft diet to help them swallow more easily.

People were seen to be enjoying their meal and they told us they always liked what they had to eat. People are able to choose where they eat their meals, with most choosing to eat in the dining room, but some people eat in the lounge.

Our judgement

People have access to a well balanced and nutritious diet and are able to make choices about what and where they eat.

Outcome 6: Cooperating with other providers

What the outcome says

This is what people who use services should expect.

People who use services:

- Receive safe and coordinated care, treatment and support where more than one provider is involved, or they are moved between services.

What we found

Our judgement

The provider is compliant with outcome 6: Cooperating with other providers

Our findings

What people who use the service experienced and told us
We saw evidence on care files that people in the home have access to community healthcare services including GPs, opticians, dentists and NHS services. The provider told us that other agencies are not involved with the care of people at the home.

Our judgement
The provider co-operates well with others to make sure care for people is coordinated and effective.

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
During our visit we saw staff interacting with the people they support and providing opportunities for discussions. The staff listened to people's views and provided advice and guidance when appropriate.

We also staff interacting with people in a respectful and caring way.

We were told by staff that people are encouraged and supported to raise any concerns with any staff member within the organisation. People told us that they would talk to their key worker if they were unhappy about anything. Staff that we spoke with told us they are alert to any changes in people's behaviour that may mean they are unhappy about something, and feel they have the skills to identify whatever it may be.

Staff that we spoke with told us that they had not received any formal training in safeguarding people. However, they were able to tell us about different types of abuse and what they would do if they suspected abuse was occurring.

Other evidence

The provider's self assessment stated that all staff have received NAPPI training – this training helps staff recognise and manage any behaviour that may cause concern to the individual and others.

The self assessment also stated that abuse of any kind is not tolerated at College House, and that on the one occasion where abuse had been identified the staff member was ultimately dismissed.

Our judgement

The home's procedures for keeping people safe would be improved further with appropriate training for staff.

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

The provider is compliant with outcome 8: Cleanliness and infection control

Our findings

What people who use the service experienced and told us
During our visit we looked at the communal areas of the home and we were also invited to look at two bedrooms. All areas that we saw were clean and tidy and there were no unpleasant odours.

The kitchen and dining areas were clean and tidy. Work surfaces were clear and suitable equipment was available for food preparation.

There is a separate laundry area and the washing machine has a sluice facility.

We were told by staff that several people have little domestic jobs they like to do around the home and that people are encouraged to keep their own rooms clean and tidy. Also there is a member of staff is employed as a domestic for three hours each day.

Other evidence
The provider's self assessment told us that all staff have received training in Infection Control and the home has an Infection Control policy.

We discussed the Department of Health guidance (Code of Practice for health and adult social care on the prevention and control of infections and related guidance) with the manager and he will ensure a copy is obtained for the home and that the home follows the guidance.

Our judgement

Systems and procedures ensure that College House is a clean and hygienic place for people to live in, work at and visit.

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
Medication is prepared by a local pharmacist and managed by staff in the home. Staff told us they had received training in managing medication and they felt confident to administer any needed. This training helps to make sure that the staff can use the home's medication administration system effectively and as a result helps to ensure that people who live in the home receive medicines safely.

There is a 'homely remedies' policy that enables staff to give people medication such as cough syrups and mild pain killers using the procedures set by the local GP's. Medicines are stored appropriately in lockable cupboards and records are maintained.

Records and discussion with staff confirmed that when necessary the home seeks the views and support of other professionals such as GPs.

Other evidence
The provider's self assessment confirmed that staff receive regular training. It also stated that the home is visited regularly by the pharmacist who supplies medication and that they check procedures and practices.

Our judgement

Medicines are well managed at the home.

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
College House is a large detached chalet bungalow in a residential area of Newton Abbot.

The ground floor has an entrance hall, lounge, dining area, kitchen, laundry, toilet and shower area. Most of the bedrooms are on the ground floor. Upstairs there are two bedrooms, two bathrooms and the office. There are large gardens and a parking area to the front of the home.

People who live in the home were very happy to show us around and clearly considered College House to be their home. The home has a lot of communal space but people also have their own rooms that they can spend time in if they want to be on their own.

Two people showed us their bedrooms and we saw that they had been personalised to suit the individual's individual tastes and interests.

The home was clean and well maintained throughout. There was a warm and friendly atmosphere and many personal items on display around the home.

Other evidence

The provider's self assessment stated that regular risk assessments are completed for the whole home and that staff have received risk assessment training.

Our judgement

People who live in the home benefit from an environment that is homely and well maintained.

Outcome 11: Safety, availability and suitability of equipment

What the outcome says

This is what people should expect.

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

- Are not at risk of harm from unsafe or unsuitable equipment (medical and non-medical equipment, furnishings or fittings).
- Benefit from equipment that is comfortable and meets their needs.

What we found

Our judgement

The provider is compliant with outcome 11: Safety, availability and suitability of equipment

Our findings

What people who use the service experienced and told us
Because of the needs of people currently living at the home, little specialist equipment is needed. However, the home does have a bath hoist fitted and one person uses a wheelchair.

Other evidence
The provider’s self assessment stated that the two pieces of equipment used at the home are regularly serviced by a qualified contractor.

Our judgement
People have access to safe and suitable equipment to meet their assessed needs.

Outcome 12: Requirements relating to 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 staff who are fit, appropriately qualified and are physically and mentally able to do their job.

What we found

Our judgement

The provider is compliant with outcome 12: Requirements relating to workers

Our findings

What people who use the service experienced and told us
During our visit people told us that the staff helped them a lot and that they were very nice. People also told us they would talk to a member of staff if they were unhappy about anything. Throughout our visit there was much friendly conversation and laughter between staff and people living in the home.

We saw staff that were competent, attentive and caring. We did not see any practice that gave us any cause for concern. All the staff we spoke with were able to tell us about the needs of the people they support and also how these needs are met.

Staff were seen communicating with people using different styles according to the need or personality of the individual.

No new staff have been employed recently. However, we saw that robust recruitment checks had been carried out to show staff employed are suitable to work with vulnerable people. The providers make sure staff are physically fit to work and have the right skills and qualifications to care for people with learning difficulties. All new staff will undertake a period of induction before they start working with people living at the home.

The Providers are aware of their responsibility to refer staff to the Independent

Safeguarding Authority when staff are not fit or are unsuitable to work with vulnerable people.

Other evidence

The provider's self assessment stated that recruitment checks are updated as required.

Our judgement

Recruitment procedures at College House are robust and ensure that people who may be unsuitable to work with vulnerable people are not employed at the home.

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
At the time of our visit there were two support staff and a domestic on duty. The manager was also at the home. We were told that there are a minimum of two support staff on duty at any time. Currently at night time two staff 'sleep-in' at the home. However, we were told that this is being reviewed as more people are needing help as they are growing older and their needs increase at night time.

During our visit we were able to talk to staff and observe them while they provided care and support to people who use the service. We heard staff speaking with people in a kind and respectful manner and responded promptly, discretely and sensitively to people when they asked questions or needed help.

There is a stable staff group at the home and it was clear that staff and people living at the home knew each other very well and showed each other mutual respect.

People who live at the home told us they thought there were generally enough staff on duty. However, people living at the home and staff told us that because there was generally only two support staff on duty at a time, the chance for outside activities was limited. Staff said that if 'money was no object' it would be lovely to have more staff to be able to do more with people outside the home.

Staff told us about how much they enjoy working with at the home and said the best thing about it was the people who live there.

Other evidence

The provider's self assessment stated the last person to leave the staff team did so in 2007. They stated that they feel staff are very supportive of each other and are totally committed to the people who live at the home.

Our judgement

The numbers and skill mix of staff on duty are sufficient to meet the needs and numbers of people currently living at the home.

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 we spoke with told us about the friendliness and caring nature of the staff.

We saw the staff working effectively without direct supervision from the management.

The staff team is consistent and established and it was evident that they had detailed knowledge of the people who live in the home. All staff spoken with said they enjoyed working at the home and felt well supported. Staff spoke of the supportive staff team and good communication between shifts.

We were told that there are regular staff meetings and formal supervision with their deputy manager takes place every 4-6 weeks.

We were able to discuss training opportunities with the staff on duty. We also were able to look at their files and saw copies of certificates that had been obtained.

The organisation provides all staff with a thorough ongoing training programme, which includes mandatory training such as First Aid, Food Hygiene and Health and Safety as well as additional specialised training which relates more directly to the individual needs of people who live in the home.

We were told that staff had recently completed training specific to the care needs of people who may suffer from dementia. Staff spoke enthusiastically about the training and told us how it had helped them improve their practice.

Other evidence

The provider's self assessment stated that all staff receive regular supervision and an annual staff development review.

Our judgement

Staff at College House are well trained and supported to care for the people who live at the home.

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 by staff and management that people are encouraged and supported to be fully involved in the running of their home.

We observed lots of lively discussion between the staff and people living in the home about issues relating to the home and their lifestyle. Staff encouraged people to express their views and offered advice and guidance when appropriate.

We were told that the provider has a system in place to ensure that they undertake regular checks on the quality of the services being provided. These include gathering information from the people who live in the home (and people who support them) to ensure they are happy with the service they receive.

On the day of our visit we met with a member of the Parkview Society committee. Someone from the committee visits the home regularly and during the visit completes a number of different quality checks. The staff and people who live in the home were very familiar with these visits and were therefore happy to talk with the committee member.

Other evidence

The provider self assessment stated that risk assessments are completed and reviewed regularly and that regular maintenance checks are completed.

Our judgement

The provider is able to critically assess the quality of the service and drive improvement where identified.

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

The provider is compliant with outcome 17: Complaints

Our findings

What people who use the service experienced and told us
We were told that the people who live in the home are supported on a day- to- day basis to raise any issues or concerns about the home and the support they receive. People have a small team of staff who they are very familiar with and we were told by them that they would talk to staff if they are unhappy about anything.

During the visit we observed lots of lively discussion and staff supporting people to talk about their home and lifestyle. We saw examples of when staff became aware of situations that could cause distress to people and used their skills and knowledge of the individual to make the situation easier.

Staff were able to tell us how people in the home are likely to communicate if they are unhappy.

The home has a complaints procedure and all complaints and outcomes of investigations are logged and the outcomes are communicated to the complainant.

Other evidence

The provider's self assessment stated that anyone making a complaint would be assured that the complaint was being taken seriously and be fully investigated.

Our judgement

The home has an open culture that allows and encourages people to express their views and concerns.

Outcome 21: Records

What the outcome says

This is what people who use services should expect.

People who use services can be confident that:

- Their personal records including medical records are accurate, fit for purpose, held securely and remain confidential.
- Other records required to be kept to protect their safety and well being are maintained and held securely where required.

What we found

Our judgement

The provider is compliant with outcome 21: Records

Our findings

What people who use the service experienced and told us
During our visit we saw how records about the care of people who live in the home were being maintained and kept. We saw that these records were being well maintained by the staff team. Any information about an individual had been regularly reviewed to ensure that it was correct and still meeting the individual's needs.

Care plans and other information relating to specific individuals had been written in a way that respected their privacy and dignity.

However, a communication book is also in use at the home, in which information relating to everyone living at the home is recorded. This means that if people wanted to see information about themselves, they could not do so without being able to see information about other people. The manager and staff said that they would look at ways to improve the recording systems and ensure that information about people is recorded separately.

Other evidence

The provider's self assessment stated that all records are regularly updated and confidentiality respected at all times.

Our judgement

Records are generally well maintained. However, individualising people's daily records will further improve the systems already in place.

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	18	2 Consent to care and treatment
	Why we have concerns: Training for staff on the Mental Capacity Act would ensure staff have the knowledge and confidence to support people in making their own choices.	
Accommodation for persons who require nursing or personal care	11	7 Safeguarding people who use services from abuse
	Why we have concerns: The home's procedures for keeping people safe would be improved further with appropriate training for staff.	
Accommodation for persons who require nursing or personal care	20	21 Records
	Why we have concerns: Individualising people's daily records will further improve the recording systems already in place.	

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 within 28 days of this report being received.

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 Adult 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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