

# Review of compliance

## St Anne's Opportunity Centre Limited Chaffinches

<b>Region:</b>	South East
<b>Location address:</b>	108 Paynesdown Road Thatcham Berkshire RG19 3TE
<b>Type of service:</b>	Care home service without nursing
<b>Date of Publication:</b>	December 2011
<b>Overview of the service:</b>	Chaffinches is a care home without nursing that provides care for up to three people with learning difficulties.

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

## Our current overall judgement

**Chaffinches was meeting all the essential standards of quality and safety.**

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 and carried out a visit on 18 November 2011.

### What people told us

People told us that they liked living in the home. Staff were kind and they could talk to them if they had concerns. People were involved with their care and the running of the home. They told us that there were house meetings where they could put forward ideas and make requests for things such as meal choices, holidays and activities.

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

The people who lived in the home received care and support according to their needs, preferences and personal wishes. They were involved in decisions about how the service was delivered through regular meetings and discussions and their privacy was respected. Overall, we found that Chaffinches was meeting this essential standard.

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

The quality of information and guidance to staff on how to meet people's needs was good. The people living in the home received the personal and healthcare support that they required. People's choices of how they wished to live had been listened to and acted upon by staff. There was evidence of regular reviews of documented information about meeting people's social and personal interests. Overall we found that Chaffinches was meeting this essential standard.

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

People living in the service were protected from abuse and the risk of abuse. In addition, their human rights were upheld by suitably qualified and trained staff who were familiar with the appropriate safeguarding policies and procedures of both the organisation and external agencies.

Overall we found that Chaffinches 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 who use the service are safe and their health and welfare needs are met by competent, well supported and appropriately trained staff.

Overall we found that Chaffinches 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**

People using the service are kept safe by the provision of quality care, treatment and support. The home is run by an effective manager who makes decisions in the interests of people living in the home. Risks to the health, welfare and safety of people are managed appropriately.

Overall we found that Chaffinches was meeting this essential standard.

**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

People told us that they liked living in the home. The staff were kind to them and they were able to make choices about what they did with their time. One person told us that they had been involved with moving bedrooms and they were very happy with the room they now occupied.

#### Other evidence

Regular residents meetings were held where people living in the home were encouraged to express their views, opinions and preferences with regard to the running of the home. The minutes of the previous meetings were seen and included topics about holiday preferences, menu choices and activities already undertaken and those that were planned.

Staff spoken with provided a clear understanding of the needs of the people living in the home. Interactions between staff and residents that were observed by the inspector throughout the course of the visit were warm and respectful. On several occasions people were asked whether they were happy to meet with the inspector and whether they gave permission for their records to be seen.

### Our judgement

The people who lived in the home received care and support according to their needs, preferences and personal wishes. They were involved in decisions about how the service was delivered through regular meetings and discussions and their privacy was respected.

Overall, we found that Chaffinches was meeting this essential standard.

## Outcome 04: Care and welfare of people who use services

### What the outcome says

This is what people who use services should expect.

People who use services:

\* Experience effective, safe and appropriate care, treatment and support that meets their needs and protects their rights.

### What we found

#### Our judgement

The provider is compliant with Outcome 04: Care and welfare of people who use services

#### Our findings

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

People told us that they went to meetings where their care was discussed. They felt involved in decisions about their care and felt safe living in the home.

##### Other evidence

Care plans seen provided comprehensive assessments of peoples needs and included clear guidance for staff on how support should be provided. Detailed health action plans were maintained for each person and included up to date and regularly reviewed information about individual health care needs. Staff spoken with were knowledgeable about how individual residents liked to be addressed and how their health and social care needs were to be met.

There were team leader meetings where the needs of people living in the service were discussed. Care plans were updated accordingly and documentation was seen that demonstrated that regular reviews had taken place.

Care plans seen indicated that a wide range of health care professionals were regularly consulted with regard to the health care needs of individual people living in the home. These included Psychiatrists, opticians, general practitioners, dentists and chiropodists. Social needs were clearly documented and each person had their own timetable of activities. Examples of leisure pursuits included shopping, crafts, work and college attendance, discos, social clubs and walks.

There were risk assessments in place within the care plans seen that were individual to

the person and included management plans designed to reduce the risks identified. Work was in progress to make risk assessments more accessible and understandable to people by using pictorial symbols.

**Our judgement**

The quality of information and guidance to staff on how to meet people's needs was good. The people living in the home received the personal and healthcare support that they required. People's choices of how they wished to live had been listened to and acted upon by staff. There was evidence of regular reviews of documented information about meeting people's social and personal interests.

Overall we found that Chaffinches was meeting this essential standard.

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

### What the outcome says

This is what people who use services should expect.

People who use services:

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

### What we found

#### Our judgement

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

#### Our findings

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

People living in the home were not specifically asked about whether they were protected from abuse. However, they did say they felt safe and would speak to a member of staff if they had any worries or concerns about their care and treatment.

##### Other evidence

Staff training records were seen and indicated that all staff had received training and updates in safeguarding adults. The manager was a safeguarding trainer.

There were detailed financial assessments and information that was individual to each person. These documents were designed to clearly demonstrate the level of understanding people had with regard to using money, budgeting and using a bank. Regular checks on peoples money was undertaken to make sure that peoples financial interests were protected.

Staff spoken with demonstrated a good understanding of safeguarding issues and were able to clearly provide an account of what action they would take if they witnessed any abuse or suspected that abuse had taken place. The inter-agency policy and procedures for the safeguarding of adults were available and staff knew where they were kept.

##### Our judgement

People living in the service were protected from abuse and the risk of abuse. In addition, their human rights were upheld by suitably qualified and trained staff who were

familiar with the appropriate safeguarding policies and procedures of both the organisation and external agencies.  
Overall we found that Chaffinches 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

People told us that the staff were friendly and fun. Sometimes there would be more staff on shift when people were going out to an organised activity.

##### Other evidence

There were comprehensive systems in place within the service designed to support staff in their role. Regular meetings were held to discuss individual peoples' needs. Team meetings were held periodically and these were now more focussed upon specific topics such as updates for medication or best practice initiatives. Documentation in the form of a house folder and activity diaries were seen by the inspector. Staff spoken with told us that they felt well supported and that the manager was approachable and acted upon concerns or requests without delay. The staff team as a whole were described as supportive to each other.

Staff training was organised and monitored by the manager. Staff told us that training was readily available and updates were regularly held. The service maintained a staff matrix, which was seen. This matrix recorded all training undertaken and highlighted where refresher training was due for individual staff members. In addition to core training which included first aid, fire awareness, moving and handling, medication, etc training specific to the needs of the current people living in the home was undertaken. This included mental health awareness, learning difficulties, mental capacity, autism and aspergers.

Senior staff were allocated junior staff to supervise. All senior staff were supervised by the manager. Supervisions took the form of one to one meetings which were held

approximately every two months. Records were maintained and were used to discuss any issues and training needs. Appraisals were held annually for all staff. Documentation indicating that these meetings had been held was seen by the inspector.

**Our judgement**

People who use the service are safe and their health and welfare needs are met by competent, well supported and appropriately trained staff.  
Overall we found that Chaffinches 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

People told us that they were involved with decisions about the running of the home. One person was undertaking household cleaning tasks and told us that they liked to do their chores. This person also showed us their bedroom and said they had chosen their pictures, photographs and personal effects which were on display.

##### Other evidence

The care provided to people living in the home was regularly monitored and plans were updated as and when change occurred. Risk assessments were in place and were reviewed and updated regularly.

Quality assurance systems were in place and took the form of managers' audits. These were conducted on a monthly basis with all aspects of the homes functioning and paperwork being reviewed over approximately a three month period. Any required actions were contained within an annual development plan for the home. Information from this plan was fed into a business plan for the organisation. The current annual development plan was due for review following analysis of the latest survey results which was held over the summer period 2011. People living in the home, their relatives, care managers, doctors and staff were all contacted to seek their feedback as part of the quality assurance process. The current annual development plan, the business plan and the latest satisfaction survey results were all seen by the inspector.

The service had undertaken analysis of their compliance with all of the essential outcomes using a tool provided by the Commission. This had enabled the service to

evaluate where further work needed to be undertaken and provided a review of their evidence of compliance for all outcomes.

A range of external audits had been carried out over the last two years. These included a medication audit undertaken in August 2011 by the primary care trust. In addition, a food safety inspection was conducted by the local environmental health department on 17 May 2010. These audits found that everything was in order. The fire risk assessment was reviewed and updated on 7 January 2011.

These combined processes were designed to ensure that the needs of people living in the service were being met appropriately and that quality standards throughout the home were being adhered to by the manager and the staff. All documentation relating to audits was seen by the inspector.

### **Our judgement**

People using the service are kept safe by the provision of quality care, treatment and support. The home is run by an effective manager who makes decisions in the interests of people living in the home. Risks to the health, welfare and safety of people are managed appropriately.

Overall we found that Chaffinches was meeting this essential standard.

# 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

<b>Website</b>	<a href="http://www.cqc.org.uk">www.cqc.org.uk</a>
<b>Telephone</b>	03000 616161
<b>Email address</b>	<a href="mailto:enquiries@cqc.org.uk">enquiries@cqc.org.uk</a>
<b>Postal address</b>	Care Quality Commission Citygate Gallowgate Newcastle upon Tyne NE1 4PA