

Review of compliance

Bridgewood Trust Limited Yews Hill / North Rise	
Region:	Yorkshire & Humberside
Location address:	75 & 77 Yews Hill Road Lockwood Huddersfield West Yorkshire HD1 3SG
Type of service:	Care home service without nursing
Date of Publication:	May 2012
Overview of the service:	Yews Hill/North Rise is a care home providing accommodation and support to people with a learning disability. Accommodation and support is provided in two houses next to each other. Yews Hill/North Rise is part of the Bridgewood Trust; a charity organisation which provides residential, domiciliary and day services to people with learning disabilities. Yews Hill/North Road was

	registered with the Care Quality Commissioning in November 2010 to provide accommodation for up to 17 people.
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Summary of our findings for the essential standards of quality and safety

Our current overall judgement

Yews Hill / North Rise was meeting all the essential standards of quality and safety inspected.

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

Why we carried out this review

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

How we carried out this review

We reviewed all the information we hold about this provider, carried out a visit on 3 May 2012, observed how people were being cared for, talked to staff and talked to people who use services.

What people told us

Care at Yews Hill/North Rise is provided in two houses which are on the same land. We spent a significant amount of our time observing care and talking to people at number 75 Yews Hill.

People told us that they had been involved in making decisions about how they wanted their care provided and that staff treated them with respect. People told us that staff always knocked before they entered their bedroom. People told us that the staff were nice and that they felt well looked after. One person said, "I like it here."

People are encouraged to be independent as much as possible. One person told us that the organisation respects their religious beliefs and helps them attend church each week.

The staff we spoke with told us that they provided a high quality service and people were involved in making decisions about their care. They told us that people's privacy and dignity was respected at all times. Staff also told us that they felt well supported by their manager and the organisation.

What we found about the standards we reviewed and how well Yews Hill / North Rise 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 service was compliant because people's privacy, dignity and independence were

respected.

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

The service was compliant because people experienced care, treatment and support that met their needs and protected their rights.

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

The service was compliant because people who use the service were protected from the risk of abuse. This is because the provider had taken reasonable steps to identify the possibility of abuse and prevent abuse from happening.

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

The service was compliant because people were cared for by staff who were supported to deliver care and treatment safely and to an appropriate standard.

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

The service was compliant because there was an effective complaints system available.

Other information

Please see previous reports for more information about previous reviews.

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

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

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

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

Where we judge that a provider is non-compliant with a standard, we make a judgement about whether the impact on people who use the service (or others) is minor, moderate or major:

A minor impact means that people who use the service experienced poor care that had an impact on their health, safety or welfare or there was a risk of this happening. The impact was not significant and the matter could be managed or resolved quickly.

A moderate impact means that people who use the service experienced poor care that had a significant effect on their health, safety or welfare or there was a risk of this happening. The matter may need to be resolved quickly.

A major impact means that people who use the service experienced poor care that had a serious current or long term impact on their health, safety and welfare, or there was a risk of this happening. The matter needs to be resolved quickly.

Where we identify compliance, no further action is taken. Where we have concerns, the most appropriate action is taken to ensure that the necessary changes are made.

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

Outcome 01: Respecting and involving people who use services

What the outcome says

This is what people who use services should expect.

People who use services:

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

What we found

Our judgement

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

Our findings

What people who use the service experienced and told us

We spoke with eight people who live at Yews Hill/North Rise. Everyone we spoke with told us that the care they received was good. When we asked people if staff knocked before entering their bedroom people told us that they did. Some people also had signs on their doors asking people not to enter without knocking.

We were invited to look at two people's bedrooms which were personalised to their individual liking. One person told us that they had a key to their bedroom and liked to keep it locked.

One person told us that they liked to go to church every week. This shows that peoples' religious needs are being met.

Other evidence

We spent a significant proportion of our time talking to people, observing care and looking at care records. At the time of our inspection very few people required support with their personal care.

We observed staff talking to people about the meal for the next day and asking people if they were happy with the menu. The cook told us that there is always an alternative

should people not want the main meal. We observed the evening meal being served and people were involved in making decisions about how they wanted their meal served.

We spoke individually to four staff and they told us that they treat people with respect at all times. One member of staff also told us that they never enter a bedroom without knocking.

Staff told us that meetings with people who use the service occur every three months.

From the care records we looked at we saw that people using the service and their family were involved in making decisions about their care however, the care records were not signed by the individual receiving care. We spoke with the manager about this and we were informed that this was an oversight and they would ensure that people signed their care plan in the future.

We observed how staff interacted with people using the service. Staff spoke to people in a pleasant and friendly manner. Staff listened when people spoke and gave them the opportunity to express their views.

Our judgement

The service was compliant because people's privacy, dignity and independence were respected.

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

The home was clean and welcoming. The atmosphere within the home was relaxed and friendly and people appeared happy and well looked after. The people we spoke with told us that they were happy with the care provided at Yews Hill/North Rise. One person told us, "I like it here."

People told us that they sit with staff and talk about their care needs and their likes and dislikes.

People were encouraged to be independent and people told us about the activities they do to help maintain their independence.

Other evidence

We spent a significant proportion of our time talking to people, observing care and looking at care records. At the time of our inspection very few people required support with their personal care.

All of the care records we looked at provided sufficient information about the type of care people required and how they wanted their care needs to be met. Peoples' needs had been assessed and care plans were written based on peoples' needs. There was evidence of regular reviews which also involved family members and other health and social care professionals. However, there was one care record which we looked at and the person did not have an appropriate risk assessment or care plan for a medical condition they suffered with. This means that this person could be at risk of unsafe or

inappropriate care. We spoke to the manager about this and the manager agreed to update the care record.

We looked at daily records and found that care was delivered in line with what was written in people's support plan.

We discussed staffing levels with staff and people told us there were always enough staff on duty. In one care plan it stated that staff should be in the communal area when a certain individual was present. We observed that staff did this.

The staff we spoke with told us that care standards were high and that people were well looked after. Staff told us that they would be happy for a relative to be cared for at Yews Hill/North Rise should they require it.

People were supported in the prevention and early detection of ill health by attending health appointments such as dental and foot care appointments. We saw evidence of these appointments and the outcomes in people's care records.

Our judgement

The service was compliant because people experienced care, treatment and support that met their needs and protected their rights.

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

The people we spoke with told the inspector that they felt safe living at Yews Hill/North Rise and staff were nice. We asked five people if they knew how to report concerns and they told us they would report them to a member of staff or the manager.

Other evidence

We spent a significant proportion of our time talking to people, observing care and looking at care records. At the time of our inspection very few people required support with their personal care.

We looked at the care records of people involved in safeguarding incidents which the Care Quality Commission had been made aware of. We were happy that the manager and organisation had taken the appropriate action in order to ensure people were protected from the risk of abuse.

We looked at staff training files and saw that people had received training about safeguarding. Staff told us that they knew how to identify and report safeguarding concerns. They also told us that they knew how to whistleblow.

Our judgement

The service was compliant because people who use the service were protected from the risk of abuse. This is because the provider had taken reasonable steps to identify the possibility of abuse and prevent abuse from happening.

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

During our observation it was evident that staff and people living at Yews Hill/North Rise had a good relationship and staff appeared competent in their caring duties. People told us that they were well looked after.

Other evidence

The staff we spoke with told us that they felt supported by the other workers at Yews Hill/North Rise and also by the organisation. One new member of staff told us that they had completed an induction which covered the skills for care common induction standards. They told us that they had received supervision since they had started and were happy with the level of support they received.

Staff told us that they received regular supervision and training and this was evidenced in the staff records which we looked at.

One member of staff told us that communication between staff and management could be improved, but other staff we spoke with did not feel this was an issue.

Our judgement

The service was compliant because people were cared for by staff who were supported to deliver care and treatment safely and to an appropriate standard.

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

The people we spoke with told us they were happy and felt well cared for. People told us that if they had any concerns they would talk to a member of staff or the manager.

Other evidence

We looked at the company's complaints policy. It contained information on how to raise a complaint and the timescales in which complaints will be acknowledged and resolved. It also contained information about other agencies people could take their complaint to including the Care Quality Commission.

The manager showed us a copy of the complaints file and it did not contain information about an incident in 2011. The organisation had reported an incident to the Care Quality Commission in which they reported that the complaints process had been opened. We discussed the incident with the manager and although we were happy that the organisation took the appropriate action to deal with the complaint, we could not see evidence of how the complaint had been investigated.

We looked at copies of a recent relative satisfaction questionnaires and the comments were very positive. Even though there was no complaints procedure displayed within the home, relatives reported that they knew how to raise a complaint.

Our judgement

The service was compliant because there was an effective complaints system available.

What is a review of compliance?

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

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

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

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

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

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

Information for the reader

Document purpose	Review of compliance report
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