Orwell Housing Association
Emily Bray House

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<th>Region:</th>
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| **Location address:** | 300 Woodbridge Road  
Ipwich 
Suffolk 
IP4 4BA |
| **Type of service:** | Domiciliary care service  
Extra Care housing services |
| **Date of Publication:** | June 2012 |
| **Overview of the service:** | Orwell Housing Association is registered for personal care which is provided at Emily Bray House sheltered housing complex. |
Our current overall judgement

Emily Bray House 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 16 May 2012, observed how people were being cared for, looked at records of people who use services, talked to staff and talked to people who use services.

What people told us

We visited four people in their flats and spoke with them about their views of the service that they were provided with. They told us that they were consulted about the care and support that they were provided with and the care workers listened and acted on what they said. One person said that they were "Fully consulted" when we asked them if they felt that they were consulted about their care.

People were provided with a copy of their care plans and the care workers supported them with the care that they had agreed with in their care plans. They told us that they felt that their needs were met and comments made by people included "Everything is fine, could not be better cared for," "They do look after me" and "They look after me well."

We asked people if they felt that the care workers treated them with respect. One person said "Definitely." Another said "They (care workers) are very nice indeed." Another person said "They (care workers) are wonderful."

What we found about the standards we reviewed and how well Emily Bray House 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 provider was meeting this standard. People's privacy, dignity and independence were respected. People's views and experiences were taken into account in the way the service was provided and delivered in relation to their care.
Outcome 04: People should get safe and appropriate care that meets their needs and supports their rights

The provider was meeting this standard. 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 provider was meeting this standard. People who used the service were protected from the risk of abuse, because the provider had taken reasonable steps to identify the possibility of abuse and prevent abuse from happening.

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

The provider was meeting this standard. There were enough qualified, skilled and experienced staff to meet people's needs.

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 was meeting this standard. The provider had an effective system to regularly assess and monitor the quality of service that people received.

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 visited four people in their flats and spoke with them about their views of the service that they were provided with. They told us that they were consulted about the care and support that they were provided with and the care workers listened and acted on what they said.

We asked people if they felt that the care workers treated them with respect. One person said "Definitely." Another said "They (care workers) are very nice indeed." Another person said "They (care workers) are wonderful." The interaction that we saw between care workers and people who used the service was respectful and professional.

People told us that their privacy was respected and that care workers always knocked on their flat doors before entering. This was confirmed in our observations during our visit.

Other evidence
People who used the service expressed their views and were involved in making decisions about their care. We tracked the care records of four people who used the service and each showed that they had been consulted about the care and support that
they were provided with. They had signed the care plans and risk assessments to show that they agreed with the contents. People had participated in care reviews where they had discussed their views about the service that they were provided with.

People's diversity, values and human rights were respected. People's care plans explained how people's privacy and dignity should be respected in all areas of the care that they were provided with. The documents included the areas of their care that people could attend to independently and how their independence was promoted and respected.

The care plans that were seen also identified how people's diverse needs were met such as how they communicated and mobilised. There was evidence seen in one person's care records which showed that care workers had sought the support from an occupational therapist to ensure that the person was provided with the equipment that they needed.

**Our judgement**
The provider was meeting this standard. People's privacy, dignity and independence were respected. People's views and experiences were taken into account in the way the service was provided and delivered in relation to their care.
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 were provided with a copy of their care plans and the care workers supported them with the care that they had agreed with in their care plans. They told us that they felt that their needs were met and comments made by people included "Everything is fine, could not be better cared for," "They do look after me" and "They look after me well."

Two relatives of a person who were spoken with told us that they felt that their relative was supported appropriately.

People told us that the care workers visited them at the times that they expected and that they stayed for the agreed length of time.

A person told us that when they needed health care support the care workers supported them to make appointments such as with a doctor or district nurse. They said that they had been prescribed with creams the care workers supported them to use the creams when they needed them. Another person explained how the care workers supported them to take their medication at the prescribed times and they showed us their medication administration records (MAR) which confirmed what they had told us.

Other evidence
People’s needs were assessed and care was planned and delivered in line with their individual care plan. We tracked the care records of four people who used the service and each held a care plan which explained the step by step care that people required.
and preferred to meet their needs.

Daily care records that were seen included the care and support that people were provided with during each care worker visit. Where changes in people’s wellbeing were identified by care workers, such as their health, actions were taken to seek support and guidance from health care professionals to ensure that their health care needs were met.

There were risk assessments in place which identified how the risks in the care and support that people were provided with were minimised.

People’s MAR charts that were seen showed that they were supported to take their prescribed medication where appropriate. There were risk assessments in place which explained the support that people needed with their medication.

**Our judgement**
The provider was meeting this standard. 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

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<td><strong>What people who use the service experienced and told us</strong></td>
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<td>People told us that they felt that they were safe and secure in their flats.</td>
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**Other evidence**
We saw the staff training records which showed that care workers were provided with safeguarding vulnerable people from abuse training.

We looked at team meeting minutes and care worker's supervisions records which showed that how they safeguarded people from abuse was discussed. This meant that care worker's understanding and the provider's procedures were routinely discussed to ensure that care workers were knowledgeable about their roles and responsibilities.

Care workers had signed a document to show that they had read and understood the provider's safeguarding, whistleblowing and gifts and hospitality policies and procedures.

We looked at four care worker's personnel records which showed that people were protected by the provider's recruitment procedures. The checks that were made before care workers started working for the agency included references, identification and Criminal Records Bureau (CRB) checks.

We tracked the care records of four people who used the service and each held risk assessments which identified how the risks in the care and support that they were provided with were minimised. There were also risk assessments in place which...
identified how people may be vulnerable to financial abuse and actions had been taken by the provider to notify people's representatives of the potential risks.

**Our judgement**
The provider was meeting this standard. People who used the service were protected from the risk of abuse, because the provider had taken reasonable steps to identify the possibility of abuse and prevent abuse from happening.
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**

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| **What people who use the service experienced and told us**
People spoken with were complimentary about the approach of the care workers. They told us that the care workers visited them at the times that they expected and that they stayed for the agreed length of time. |
| **Other evidence**
The manager told us that they were in the process of making a registered manager application with us. The existing registered manager continued to be the registered person until the manager's application was processed by us. The manager was working a Qualification Competency Framework (QCF) level 5 qualification which was a recognised qualification for their work role.

The manager told us how they ensured that the staffing levels were appropriate to meet people's needs. We saw the staffing rota which confirmed what the manager had told us. There were no care worker vacancies at the time of our review.

We saw the training records of the supported housing scheme which showed that care workers were provided with the training that they needed to meet people's needs. The training included moving and handling, medication, infection control, fire safety, first aid, food hygiene and a recognised induction course which incorporated the Common Induction Standards. The manager also showed us the provider's annual training plan which showed that there were ongoing training courses and refresher training provided to care workers. |
Care workers were provided with the opportunity to complete a recognised qualification for their work role such as QCF and National Vocational Qualification (NVQ) levels 2 and/or 3 in health and social care.

**Our judgement**
The provider was meeting this standard. There were enough qualified, skilled and experienced staff to meet people's needs.
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**

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People told us that they knew how to make a complaint and/or raise concerns if they were not happy about the service that they were provided with. One person told us that when they raised concerns about the service prompt action was taken to address the issues. Another person said that they knew how to make a complaint "But I love it here." Another said that they had "No complaints about any of the carers."

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<td>The manager told us about how the provider regularly assessed and monitored the service to ensure that people were provided with a safe and effective service. Records seen confirmed what we had been told.</td>
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The manager also told us about the in house audits that were undertaken which included care plans and medication which were undertaken to ensure that people were provided with the care and support that they needed to meet their needs.

People who used the service were asked for their views about their care and support and they were acted upon. The manager showed us the results from the annual satisfaction questionnaires that were completed by the people who used the service. They told us that where concerns were identified they were discussed in 'tenant meetings' and actions were taken to address the issues. We saw the minutes from a
recent 'tenant meeting' which showed that people were provided with the opportunity to
discuss the care that they were provided with. People also participated in their care
reviews and their care and support was reviewed in line with what they had said about
their needs and experiences.

Staff were asked for their views about the care and support provided to people in team
meetings and one to one supervision meetings. We saw the minutes from a recent
team meeting which showed that the care workers discussed the care and support that
people were provided with and changes in their needs that had been identified. We
looked at the personnel records of four care workers which showed that they were
provided with regular one to one supervision meetings which gave them the opportunity
to discuss the ways that they were working and receive feedback about their work
performance. Care worker's performance was also monitored in spot checks that were
carried out on the care worker's practice when supporting people.

We saw the records of complaints which showed that concerns and complaints were
responded to and acted upon in a timely manner.

**Our judgement**
The provider was meeting this standard. The provider had an effective system to
regularly assess and monitor the quality of service that people received.
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

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<td><strong>Author</strong></td>
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