

# Review of compliance

<p>The Drive Care Homes Limited The Drive</p>	
<p><b>Region:</b></p>	<p>London</p>
<p><b>Location address:</b></p>	<p>17 The Drive Sidcup Kent DA14 4ER</p>
<p><b>Type of service:</b></p>	<p>Care home service without nursing</p>
<p><b>Date of Publication:</b></p>	<p>April 2012</p>
<p><b>Overview of the service:</b></p>	<p>The Drive is a large detached house situated in a residential area near Sidcup in Kent. The home provides accommodation and support for up to twelve people with learning and physical difficulties. The home can be accessed by local transport services and there is parking available at the front of the premises. The home is well-equipped and is suitable for wheelchairs. The garden and grounds are well</p>

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

## Our current overall judgement

**The Drive 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, carried out a visit on 15 March 2012, talked to staff, reviewed information from stakeholders and talked to people who use services.

### What people told us

We spoke with four of the people living at the home and all of them told us that they were very happy and that the staff were very good. We did observe that the staff appeared to have good relationships and communicated well with the people they supported at the home.

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

People who lived at the home received personalised care and support. Relatives or advocates were involved in the care planning and decision making process where people were unable to make decisions.

Overall, we found that The Drive was meeting this essential standard.

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

People have their individual care needs met in a safe and caring manner. Risk assessments for each individual person were completed and reviewed to ensure care plans met the needs of people living at the home.

Overall, we found that The Drive was meeting this essential standard.

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

There were policies and procedures in place to protect people living at the home. Staff had received training in recognising abuse and safeguarding of vulnerable adults. Overall, we found that The Drive was meeting this essential standard.

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

There was an induction programme in place for new staff and staff had received suitable training to care for people at the home. Overall, we found that The Drive 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**

There were systems in place to monitor the quality of the care provided. Overall, we found that The Drive 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 the staff were lovely and they enjoyed living at the home.

##### Other evidence

Staff we spoke with told us that people were involved as much as possible in their care and the surroundings they live in. We were told that people and their relatives helped to choose the décor and the furnishings for their bedrooms. They were involved in choosing the activities as well as selecting their menus for the day.

We observed that staff enabled people to make choices relating to their day to day care and the surroundings that they lived in and encouraged people to be independent where possible.

Care plans we saw reflected individual preferences and were personalised in how the people who use the service needed to be supported throughout the day.

Staff told us that relatives or advocates were involved in planning care where the individual was unable to make decisions and this was evidenced in the care plans we reviewed.

##### Our judgement

People who lived at the home received personalised care and support. Relatives or

advocates were involved in the care planning and decision making process where people were unable to make decisions.  
Overall, we found that The Drive 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

We observed that the staff provided safe care which was delivered in a kind manner. People told us they loved being at the home and enjoyed going out on trips.

##### Other evidence

Staff we spoke with told us that the care plans were designed to reflect the needs of each individual which included their physical and mental health.

We reviewed the care plans and risk assessments of people living at the home. We saw that the plans were reviewed and updated on an annual basis, although any changes to health were recorded in care plans on a regular basis and the appropriate amendments made.

We noted that the healthcare professionals' appointments which resulted in changes i.e. medication were recorded in the communication log.

Staff we spoke with were familiar with people's needs and how to meet them. The care plans were also in picture format to assist people in understanding their programme of care.

We were told that the registered manager checked that all staff had read the information.

People living at the home were able to access activities in the community which included swimming and day centre activities such as gardening. Five people also attended college to learn new skills such as arts and crafts, cookery and pottery. The home had its own transport, and staff told us that they tried to take people out as often

as possible to local shops and amenities as well as on trips and holidays.

**Our judgement**

People have their individual care needs met in a safe and caring manner. Risk assessments for each individual person were completed and reviewed to ensure care plans met the needs of people living at the home.

Overall, we found that The Drive 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

We observed that people experienced care in a safe, secure environment

##### Other evidence

Staff told us that they were familiar with the policies and procedures relating to reporting incidents, dealing with complaints and the procedure for the safeguarding of vulnerable adults (SOVA).

Staff described how they would recognise abuse and the mechanism for reporting suspected issues.

Staff told us that they had all received annual training updates on safeguarding and deprivation of liberty. The training records showed that approximately 78% of staff had received annual training updates for SOVA and deprivation of liberty.

Our records showed that there had been one reported notification which related to safeguarding of adults. This was investigated appropriately by the provider.

##### Our judgement

There were policies and procedures in place to protect people living at the home. Staff had received training in recognising abuse and safeguarding of vulnerable adults. Overall, we found that The Drive 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

We observed that people received care from staff who received appropriate training and were well supported

##### Other evidence

Staff we spoke with felt that they had regular opportunities for training and learning about their roles. We were told by a member of staff that they had a comprehensive induction into their role and that they had received their mandatory training which included basic fire training, food hygiene, moving and handling, first aid and SOVA.

We saw training records which showed that the majority of staff had received mandatory and additional training to help them support the people living at the home. Staff told us that they had annual appraisals and were able to access any additional training required.

We were told that there was an additional training programme in place to assist staff to care for the people they support at the home and access external training courses. This included dealing positively with challenging behaviours and NVQ (National Vocational Qualification) courses. We were told by staff that they had regular meetings with their manager and could also discuss particular incidents at any time with colleagues.

##### Our judgement

There was an induction programme in place for new staff and staff had received suitable training to care for people at the home.

Overall, we found that The Drive 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

We observed that people experienced care that was assessed and monitored appropriately.

##### Other evidence

We observed that the home had a variety of information leaflets available in the reception area of the home. These included easy read information on how to make a complaint, recognising abuse, a service guide as well as a picture board of all the staff working at the home.

We were informed that the home carried out annual satisfaction surveys (picture format with smiley faces) of which the last one was completed in August 2011. We noted that the comments reflected that the people living at the home were happy.

The home was inspected for health and safety and held a valid certificate until October 2012.

We were told and saw evidence that care plans audits were completed on a monthly basis.

We saw meeting minutes of community and staff meetings that were carried out on a regular basis.

##### Our judgement

There were systems in place to monitor the quality of the care provided. Overall, we found that The Drive 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

<b>Document purpose</b>	Review of compliance report
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