

Review of compliance

Avocet Trust Newtondale	
Region:	Yorkshire & Humberside
Location address:	134 Newtondale Sutton Park Hull East Riding of Yorkshire HU7 4BP
Type of service:	Care home service without nursing
Date of Publication:	August 2012
Overview of the service:	Newtondale is registered to provide care and accommodation for one person with a learning disability.

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

Our current overall judgement

Newtondale 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 23 July 2012, looked at records of people who use services, talked to staff and talked to people who use services.

What people told us

The person who used the service had limited communication, however they were able to confirm they liked living at the service and liked the staff.

What we found about the standards we reviewed and how well Newtondale 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's privacy, dignity and independence were respected.

The provider was meeting this standard.

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

People experienced care, treatment and support that met their needs and protected their rights.

The provider was meeting this standard

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

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.

The provider was meeting this standard.

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

People were cared for by staff who were supported to deliver care and treatment safely and to an appropriate standard.

The provider was meeting this 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 had an effective system in place to identify, assess and manage risks to the health, safety and welfare of people using the service and others.

The provider was meeting this 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.

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

The person who used the service had limited communication, however they were able to confirm they liked living at the service and liked the staff.

Other evidence

People were supported in promoting their independence and community involvement.

We looked at the care files which belonged to the person who used the service. We saw that these were comprehensive and contained information about how the person preferred to be cared for and how they liked to spend their day. Due to the person having limited communication there was detailed information about any non-verbal signs staff should look out for. We saw that the person was supported to access community activities, for example swimming, bowling and shopping for personal items.

The care plan had been devised from assessment undertaken by the health authority, the placing authority and staff at the home. Due to the person's complex needs their participation in this process was limited. However, we saw that health care professionals and an advocate had been involved to protect the person's best interests.

When we spoke to the staff member on duty they could describe how they would maintain the person's dignity and rights. They told us this was mainly through ensuring the person was enabled to lead a life style of their own choosing. Staff told us they used lots of observation due to the person's limited verbal communication to establish if they were happy and not in any distress or discomfort.

Our judgement

People's privacy, dignity and independence were respected.

The provider was meeting this 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

The person who used the service had limited communication, however they were able to confirm they liked living at the service and liked the staff.

Other evidence

People's needs were assessed and care and treatment was planned and delivered in line with their individual care plan.

We looked at the care files which belonged to the person who used the service. These contained basic information about next of kin, GP, religion and marital status. The care files also contained assessments, which had been completed by the placing authority, health care professionals and the senior staff at the home. From these assessments a care plan had been formulated.

The care plan contained risk assessments, which informed the staff how to support the person to keep them safe from harm. Care plans were updated on a regular basis and when the person's needs changed.

Due to the person's limited communication there were details of what non-verbal signs staff should look out for to make sure the person was happy with the care they received.

There was a record of health care professional contact and a detailed health action plan.

The staff member on duty was able to describe to us the person's needs and how these should be best met; daily notes reflected this.

Our judgement

People experienced care, treatment and support that met their needs and protected their rights.

The provider was meeting this 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 spoke with the person who used the service but their feed back did not relate to this outcome.

Other evidence

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.

There were no safeguarding investigations being undertaken by the local authority safeguarding team at the time of the inspection.

When we spoke with the staff member on duty they were able to describe the provider's procedure for the reporting of any safeguarding issues they may witness or become aware of. They told us they were confident any concerns would be dealt with effectively by the manager; they also told us they had received training about how to safeguard adults.

We saw records which confirmed staff had received training about how to protect vulnerable adults from abuse.

The provider had identified training about safeguarding adults, Mental Capacity Act 2005 (MCA) and the use of Deprivation of Liberty Safeguards (DoLS) as mandatory for the staff so this was regularly updated.

Where the person who used the service was unable to make an informed choice about their care. We saw that health care professionals and advocates had been involved in meetings. This determined what course of action was in the person's best interest.

Our judgement

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.

The provider was meeting this standard.

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

We spoke with the person who used the service but their feed back did not relate to this outcome.

Other evidence

Staff received appropriate professional development.

We saw there was a training plan in place which ensured all staff had training updated regularly. The provider had identified certain training as mandatory for all staff which included, amongst other topics, health and safety, moving and handling, fire training, basic food hygiene and first aid. Other training was available for staff about how to restrain someone safely so they didn't harm themselves or others.

We saw there was a system in place which alerted the manager when staff were due to attend refresher training.

The staff member on duty told us they found the training provided equipped them to care appropriately for the person who used the service.

We saw that staff received regular supervision which gave them the opportunity to discuss any problems or developmental needs they had. Staff also received annual appraisals which monitored what training they had received and what training they needed.

Newly employed staff undertook a six month probationary period during which time they

had regular meetings with the manager to monitor progress. At the end of the probationary period they were expected to undertake further training to a National Vocational Qualification (NVQ) level.

Our judgement

People were cared for by staff who were supported to deliver care and treatment safely and to an appropriate standard.

The provider was meeting this 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

The person who used the service had limited communication, however they were able to confirm they liked living at the service and liked the staff.

Other evidence

People who used the service, their representatives and staff were asked for their views about their care and treatment and they were acted on.

The manager told us there was a monitoring system in place which took the views of the person who used the service into account about the running of the service. This was mainly in the form of a questionnaire written in a format which the person understood and completed with support from an advocate. Questionnaires were also sent to health care professionals to gain their views of how the service was run. This information was then collated and a report produced which identified areas for improvement.

The manager also told us the service was monitored externally by the provider and unannounced inspections were undertaken by both the trustees and managers from other services.

We saw records which confirmed equipment used to support the person was checked in line with manufacturer's guidance. A record was also made of any repairs made.

Our judgement

The provider had an effective system in place to identify, assess and manage risks to the health, safety and welfare of people using the service and others.

The provider was meeting this 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.

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
Author	Care Quality Commission
Audience	The general public
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