

Review of compliance

<p>Inshore Support Limited Inshore Support Limited - 10 West Street</p>	
Region:	West Midlands
Location address:	West Street Blackheath Rowley Regis West Midlands B65 0DE
Type of service:	Care home service without nursing
Date of Publication:	May 2012
Overview of the service:	The home can provide accommodation and personal care for one person who has a learning disability. The home does not provide nursing care.

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

Our current overall judgement

Inshore Support Limited - 10 West Street 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 9 May 2012, checked the provider's records, observed how people were being cared for, looked at records of people who use services, talked to staff, reviewed information from stakeholders and talked to people who use services.

What people told us

There was one person living at the home on the day of our visit. No one knew we would be visiting. The person was not able to communicate with us for any length of time, due to their learning disability, so we observed their care and how staff interacted with them throughout our visit. We spoke to two members of staff and a relative.

We saw that staff treated the person with respect and dignity and understood how to communicate with them. Information was available in the home in a way that the person could understand. We spoke to the person about the home and they put their thumbs up indicating that they were happy living there. We spoke to a visitor who said "I am happy with the care here".

We saw that records provided clear and up to date information for staff to follow so they could assist the person to meet their individual needs in the way that they preferred. The person was encouraged to maintain their independence and develop new skills. A relative said "He has come on a lot, he can do different things now".

The person was encouraged and assisted to eat a balanced diet. The person who lived at the home was supported to maintain activities that were interesting and stimulating so that they had a meaningful lifestyle.

We saw that the person was safe in the environment they lived in. The person had a good rapport with staff and staff knew their individual needs.

Staff received a range of training so that they had up to date knowledge and skills in

order to support the person who lived there. A relative said "There are never any problems with the staff, they are lovely".

There were robust systems in place to monitor the home, to ensure the person received a quality service.

What we found about the standards we reviewed and how well Inshore Support Limited - 10 West Street 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.

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 use the service were protected from the risk of abuse, because the provider has 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 provider was meeting this standard. People were cared for by staff who were supported to deliver care and treatment safely and to an appropriate 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 was meeting this standard. 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.

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 saw that the person who lives there was given appropriate information and support regarding their care or treatment. They had a copy of the homes statement of purpose and service users guide. This was in a picture format making it easier for the person to understand. Information about the persons medicines had been written in an easy read format and contained pictures. Care plans and activity plans also contained pictures. We saw that staff discussed care with the person at meetings so they had a choice about their care and activities.

We saw that the person who lived at the home, moved around various areas of the home as they chose throughout the morning. When we arrived, the person was eating their breakfast and was in their night wear. They then chose to have a bath. We saw that the person wore clothing that was appropriate for their age and gender.

The person was supported to maintain their independence by staff. We saw and heard staff offer them choices about help, assisting with household chores and activities they were participating in. We saw that the person was given time alone in the bath so that their privacy was maintained. We saw that staff had a good rapport with the person living at the home and that they were treated with respect.

Other evidence

Sandwell local authority told us that they did not pay for anyone to live at the home. They had not received any concerns from any other authorities.

Our judgement

The provider was meeting this standard. 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 person's needs were assessed and care and treatment was planned and delivered in line with their individual care plan. The assessment and care planning process takes into account people's age, disability, health care and communication needs. Care plans were in pictorial format making them accessible to people. The care plans provided good information for staff to follow so that they would know how to support the person to meet their needs. The plans were broken down into steps and gave short and long term goals to achieve. Risk assessments were available to support the person's individual needs. Staff spoken to were able to tell us about the person's needs and their behaviours.

We saw that the person interacted well with the staff. Staff encouraged the person to do things such as the polishing and going to get their coat and shoes. This means that the person was encouraged to maintain independence. A relative said "He has come on a lot, he can do different things now".

We saw records that showed that the person had been seen by external healthcare professionals such as the dentist, optician, GP and health visitor. This means that professional advice was sought.

On the day of our visit the person went home with family during the morning. Staff told us and records showed that the person went out for meals, played football and went swimming. The person also went to the gym, went on the trampoline and on walks. This was to encourage a healthy lifestyle and to help the person to manage their weight. The

person went to a monthly disco which was held nearby for people who have learning disabilities. The person went with someone who lived in another home owned by the same organisation. This means that people are encouraged to meet other people and have an interesting and stimulating lifestyle. The person had a holiday arranged for later in the year. We saw that activity rotas included household chores such as dusting, vacuuming and the laundry. This would encourage the person to develop independent living skills.

The person was provided with a choice of suitable and nutritious food and drink. We saw records were kept of their dietary intake. The person was being encouraged to eat a healthy diet so that they could achieve their target weight. We saw that the person had made significant improvements towards meeting this. Their family were encouraged to assist the person with their dietary needs in a healthy way and they also recorded foods eaten when on home visits. This meant that the home and family were kept informed.

Medicines were safely administered. We looked at medication records and found that medication administration was well recorded. A weekly audit was completed and the audits we undertook were accurate. Protocols were written for medication that is prescribed 'as required' so that staff knew exactly when this could be administered. We saw that staff recorded medication given to relatives when the person went on home visits and recorded any that was returned to the home.

Other evidence

Sandwell local authority told us that they did not pay for anyone to live at the home. They had not received any concerns from any other authorities.

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

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 person who lived there was protected from the risk of abuse, because the provider had taken reasonable steps to identify the possibility of abuse and prevent abuse from happening.

We saw that the person was safe in the environment they lived in and we saw that they seemed relaxed and comfortable in the presence of staff. A relative told us that they had no concerns about leaving them when they brought them home.

There have not been any safeguarding referrals made by the home, or about care received by the person living at the home.

Training records showed that staff had received training in adult safeguarding and whistle blowing. We saw that staff had received training in the Mental Capacity Act and Deprivation of Liberty Safeguarding. We spoke to a care worker who confirmed that they had received this training. They were able to give us examples of things that may deprive people of their liberty and what they would do to act in their best interests. The member of staff was able to tell us what they would do in the event of witnessing or an allegation of abuse to keep people safe.

Staff told us and records showed that a meeting had been held with family and appropriate healthcare professionals. This was to discuss the needs of the person who lived at the home, to ensure they received care that was in their best interests.

The person living at the home was unable to manage their own money. The home kept some money for them so that they could go out and buy items they wanted. We saw that the records and money kept was checked by staff. We saw receipts were kept when money was spent and records were clear about what people had spent their money on. This meant that the person's money is kept safely by the home.

The person who uses the service was protected against the risk of unlawful or excessive control or restraint because the provider had made suitable arrangements. Staff told us that they did not have to use restraint as they were able to use verbal redirection to manage behaviour. We saw that staff had received training in the management of actual and potential aggression (MAPA) and received an update every year. This meant that they would have up to date knowledge and skills should the need to use restraint arise.

Other evidence

Sandwell local authority told us that they did not pay for anyone to live at the home. They had not received any concerns from any other authorities.

Our judgement

The provider was meeting this standard. People who use the service were protected from the risk of abuse, because the provider has 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

We saw that the person who lived at the home had a good rapport with the staff. A relative said "There are never any problems with the staff, they are lovely".

Staff received appropriate professional development. We looked at the training matrix and this showed what training staff had received, when it was due for a refresh and when it was booked. The matrix was colour coordinated making it easy to see when staff needed further training. We saw that staff had received training that was relevant to their roles and included first aid, infection control, food hygiene, health and safety, moving and handling and equality and diversity. The training included relevant topics such as Makaton sign language, management of actual and potential aggression (MAPA), epilepsy awareness, autism, asperger syndrome and attention deficit hyperactivity disorder (ADHD). We spoke to one member of staff who confirmed that they had received this training. This should ensure that they have the knowledge to meet people's individual needs.

We saw a matrix that planned when staff received formal supervision. We saw that this had been completed in January and March 2012 and that supervision had commenced for May. We saw minutes from staff meetings and staff confirmed that these took place. A care worker told us that "The meetings were a good chance to hear other people's views". This meant that staff are given the opportunity to raise and concerns or ideas.

Other evidence

Sandwell local authority told us that they did not pay for anyone to live at the home. They had not received any concerns from any other authorities.

Our judgement

The provider was meeting this standard. People were cared for by staff who were supported to deliver care and treatment safely and to an appropriate 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 spoke to the person who lived at the home and they put their thumbs up when we asked about the home, indicating that they were happy living there. We spoke to a visitor who said "I am happy with the care here".

We were told that people who use the service, their representatives and staff were asked for their views about their care and treatment. Each month the organisations quality assurance manager visited the home and completed an in depth audit that covered numerous aspects of the home. From this an action plan was devised for any areas that needed improvements and included information about who needed to make the improvements and timescales. This meant that the home should identify any areas of concern proactively and take action to address them.

In June, every year surveys were sent out to relatives, staff, GP's and other people involved with the home. These were to seek the opinion of people about the home, how it is run and what could be improved. From this an action plan was devised.

Decisions about care and treatment were made by the appropriate staff at the appropriate level. The person living at the home was seen by the relevant external healthcare professionals as they needed to and routinely to ensure that they received appropriate care. Meetings were held where staff discussed the person's care needs and talked about how they could make further improvements. We saw that annual reviews were held and included family members. We saw that a best interest meeting had been held so that the relevant family and health professionals ensured that

decisions were made in the person's best interests.

We had not received any complaints about the home. The home had not received any complaints. A relative said "We have no concerns here, if we did we would speak to the staff". The complaints procedure was available to people and was written in a picture format to make more accessible to the person using the service. Meetings were held with key workers and staff had pictures to show the person living at the home what they were talking about. This should ensure that people's complaints are responded to if any arise.

We saw records of accidents and incidents that occurred and a monthly analysis of this was completed which would identify any trends. There was a low incident of accidents occurring.

The home was clean and pleasantly decorated. The person who lived at the home showed us their bedroom which had been painted in their chosen colour.

Other evidence

Sandwell local authority told us that they did not pay for anyone to live at the home. They had not received any concerns from any other authorities.

Our judgement

The provider was meeting this standard. 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.

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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