

Review of compliance

<p>Potensial Limited Potensial Limited - 2 Belgrave Terrace</p>	
Region:	North East
Location address:	2 Belgrave Terrace South Shields Tyne and Wear NE33 2RX
Type of service:	Care home service without nursing
Date of Publication:	November 2011
Overview of the service:	2 Belgrave Terrace provides ordinary housing for eight people who have a learning disability. Nursing care is not provided. The home is terraced and comprises of eight single bedrooms, two of which are located in a self-contained basement flat. There is a large lounge and a dining room attached to the kitchen. There is a bathroom, shower, toilets on the first and second floor. The upper floors are only accessible by a

	flight of stairs and the main access to the home is by a flight of stairs.
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Summary of our findings for the essential standards of quality and safety

Our current overall judgement

Potensial Limited - 2 Belgrave Terrace was meeting all the essential standards of quality and safety but, to maintain this, we have suggested that some improvements are made.

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 31 August 2011, looked at records of people who use services and talked to staff.

What people told us

We visited the home unannounced on 31st August 2011 and spoke with a number of the people who live here, as well as members of the staff team and the registered manager.

One of the people living here told us this was the "best place I've lived". They said they enjoyed going out to work and seeing their friends and family regularly. They also enjoyed looking after their own room which they kept very clean and tidy.

Another person told us they were very happy here and liked the staff and enjoyed going on holiday with them.

What we found about the standards we reviewed and how well Potensial Limited - 2 Belgrave Terrace 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

We found that people using the service were respected and involved in decisions about their personal support and care.

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

We found that people experience safe and appropriate care and support which meets their needs and protects their rights.

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

We found that there are effective measures in place to safeguard people and to protect them from the risk of abuse.

Outcome 09: People should be given the medicines they need when they need them, and in a safe way

We found that people received the personalised care they need through the safe use and handling of medication.

Outcome 10: People should be cared for in safe and accessible surroundings that support their health and welfare

The premises meet the needs of the people living here and are kept clean and hygienic. However, people could be at risk in the event of fire due to the practice of chocking open fire doors which means the doors cannot provide the protection from fire, smoke or fumes they are designed for.

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

We found that staff are properly supported and trained which helps to protect the people living here and ensures that their health and welfare needs are met.

Outcome 16: The service should have quality checking systems to manage risks and assure the health, welfare and safety of people who receive care

We found that there are appropriate quality assurance measures in place which help ensure that people receive the care and support they need and are kept safe.

Actions we have asked the service to take

We have asked the provider to send us a report within 7 days of them receiving this report, setting out the action they will take to improve. We will check to make sure that the improvements have been made.

Where we have concerns we have a range of enforcement powers we can use to protect the safety and welfare of people who use this service. When we propose to take enforcement action, our decision is open to challenge by a registered person through a variety of internal and external appeal processes. We will publish a further report on any action we have taken.

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

One of the people living here told us this was the "best place he had lived". They said they enjoyed going out to work and seeing their friends and family regularly. They also enjoyed looking after their own room which they kept very clean and tidy. Another person told us they were very happy here and liked the staff and enjoyed going on holiday with them.

We saw that a service user was keen to discuss reviewing their records with the manager and clear arrangements were made with them about when this would happen. They were keen to show the inspector their care records. The manager said this person enjoyed participating in writing their own notes.

Other evidence

We looked at this outcome as part of our routine review. We visited the home unannounced on 31st August 2011 and spoke with a number of the people who live here as well as members of staff and the registered manager. We also looked at samples of the records kept.

We saw from the records kept that people's views about their care were listened to and acted on. For instance, one person did not like a particular medication, so medical

advice was sought and changes made. They were also supported to carry out their own daily health checks with the guidance of care workers and community nursing staff.

We also saw that any views and concerns of relatives were taken account of and advice from other health and social care professionals sought. The records showed that steps were taken to protect people's dignity.

An up to date Statement of Purpose and set of terms and conditions was readily available.

Our judgement

We found that people using the service were respected and involved in decisions about their personal support and 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

A service user spoke about a job interview they had attended and we saw them make arrangements with the registered manager to discuss and review this and make plans for the future. They also showed us their care records and how these are used to monitor their health. They have had training in how to manage a particular healthcare condition and the staff and community nursing services were working together to support them with this.

Another service user said they enjoyed keeping their room clean and tidy and they enjoyed going to day centres and clubs in the evening. They enjoyed travelling to these by bus with a friend. They kept in touch with their family and also enjoyed walking the family dog on these visits. They also used a mobile phone to keep in touch with their family.

Other evidence

We looked at this outcome as part of our routine review. We visited the home unannounced on 31st August 2011 and spoke with a number of the people who live here, as well as members of the staff team and the registered manager. We also looked at samples of the records kept.

We were able to see from the care records for one person, who had recently moved in, that staff had been given advice and training about this person's health conditions. The service reported any concerns to the community nursing service and worked with them to monitor their wellbeing. Routine health checks were carried out by opticians, dentists

and chiropodists and any necessary treatment provided.

We saw that risk assessments had been carried out where there were any concerns and plans put in place to safeguard the people living and working here as well any visitors. We spoke with two care workers who were able to tell us about the risk management plans put in place. They also told us they were fully involved in maintaining people's care records and so were familiar with the care plans in place.

We also looked at the care records for another person living here and could see that detailed assessments and care plans had been put in place. These reflected the views of the person about how their care should be provided. The care workers we spoke with were fully aware of the risk management plans put in place for this person.

A document has been drawn up so that important information about each service user is readily available for passing onto any other services who provide care for the service users, for instance if someone is admitted to hospital.

A specialist bath seat had been obtained for the use of one service user.

Service users are assisted to pursue social activities and work placements that they enjoy. During our visit, one person was out at their place of work.

We had lunch with service users, which was healthy and nutritious. Staff monitored people's weight and records were kept of this. Advice had been sought about appropriate foods and timing of meals for people with specific health conditions. One of the people living here told the inspector what meals and snacks they have.

The staff team have access to the company's policies and procedures to help guide them in their daily work. The staffing levels in the home are adjusted to take account of service users' needs. For instance, on a recent occasion an extra care worker had been brought in as one service user wanted to stay at home whilst the others went out bowling.

Our judgement

We found that people experience safe and appropriate care and support which meets their needs and protects 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 made no specific comment relevant to this outcome.

Other evidence

We looked at this outcome as part of our routine review. We visited the home unannounced on 31st August 2011 and spoke with a number of the people who live here, as well as members of the staff team and the registered manager. We also looked at samples of the records kept.

The registered manager told us that she and another member of staff were booked on a training course to be run by the local authority in October and specially designed for managers about safeguarding vulnerable adults.

We spoke with two care workers who told us that they had received safeguarding training and could demonstrate their understanding of the home's whistle-blowing policy. We saw evidence of this training in their staff records.

Care records showed how the service monitored and supported people with challenging behaviours to protect the person and others from risk of harm. The advice of other health and social care professionals had been sought appropriately. The two care workers we spoke with were able to tell us about the risks that had been identified and the plans put in place to protect people.

The manager told us that restraint is never used or necessary but she had had

attended training about restraint which was provided by the British Institute of Learning Disabilities (BILD).

Our judgement

We found that there are effective measures in place to safeguard people and to protect them from the risk of abuse.

Outcome 09: Management of medicines

What the outcome says

This is what people who use services should expect.

People who use services:

- * Will have their medicines at the times they need them, and in a safe way.
- * Wherever possible will have information about the medicine being prescribed made available to them or others acting on their behalf.

What we found

Our judgement

The provider is compliant with Outcome 09: Management of medicines

Our findings

What people who use the service experienced and told us

The people we spoke with made no specific comment relevant to this outcome.

Other evidence

We looked at this outcome as a statutory requirement was made under the preceding legislation about the storage of medication. We visited the home unannounced on 31st August 2011 and looked at how medication is stored, handled and recorded by looking at a sample of the medications and records.

It was clear what medication had been given as this was clearly recorded appropriately in the medication administration records looked at. A support worker described how medication is given when required and the process described was appropriate and safe.

Appropriate stock was being held and stored safely and could be accurately accounted for. Arrangements had been made with the local pharmacy to supply medication and dispose of any no longer required.

We saw documents which showed that staff had been trained about diabetes and how to carry out checks of people's blood glucose when necessary and one person's records showed that staff knew what to do if they were concerned about their wellbeing. A support worker told us that they had learned a lot about this condition and felt confident in supporting people who have diabetes.

No controlled drugs were being kept but appropriate arrangements were in place should these be needed.

Our judgement

We found that people received the personalised care they need through the safe use and handling of medication.

Outcome 10: Safety and suitability of premises

What the outcome says

This is what people should expect.

People who use services and people who work in or visit the premises:

* Are in safe, accessible surroundings that promote their wellbeing.

What we found

Our judgement

The provider is compliant with Outcome 10: Safety and suitability of premises

Our findings

What people who use the service experienced and told us

We heard a service user telling the manager that they needed a new bulb in a light fitting. The service user told us that any repairs necessary are always carried out. They also told us about the fire safety procedures and knew what they had to do in the event of a fire alert.

Another service user told us they liked their room and enjoyed keeping it clean and tidy.

Other evidence

We looked at this outcome as a statutory requirement was made under the preceding legislation about refurbishing the basement area and about the safety of radiators. We visited the home unannounced on 31st August 2011 and looked around the building and spoke with people who lived here.

Two service users have bedrooms in the basement of the building. This area also has a shower room toilet, kitchen and office, none of which have windows. However, there has been refurbishment of these areas to improve the overall facilities.

A chest of drawers in one service user's bedroom was in disrepair and was pointed out to the manager who obtained agreement from the area manager to replace this immediately. The registered manager showed us how the records of repairs that had been reported and how these are tracked. They said that urgent matters are always attended to promptly but minor repairs take longer but generally the service provided was reasonable.

Radiators throughout the home have been fitted with suitable guards to protect people from scalds from hot temperatures. Hand washing facilities have been fitted in all bathrooms and toilets. Liquid soap dispensers and paper towels were available for use.

A security system is in place to alert staff to people moving around the building in order to protect people living in the home. This has been put in place following a thorough risk assessment involving other social care professionals.

It was observed that the door to the kitchen was held open by positioning a fire extinguisher to prevent it closing. One person's bedroom door was also prevented from closing by an aerosol container being wedged in the door frame. These actions mean that people in the home would not benefit from the protection provided by these fire doors in the event of fire, smoke or fumes.

We were shown a fire emergency bag which is ready packed with essential information about service users so that this is readily available in the event of an emergency. We saw that the fire risk assessment had been reviewed within the last twelve months.

The registered manager told the inspector about the processes followed to help prevent the development of legionella and the visitor's book showed that the home had been visited by a company who deal with water safety.

A thermometer was available for staff to use to check the temperature of hot water delivered to the bath and the manager said that these checks were carried out daily.

The home was clean and vacuumed. No unpleasant odours were apparent, other than a smell of stale air in the office due to the lack of ventilation.

Our judgement

The premises meet the needs of the people living here and are kept clean and hygienic. However, people could be at risk in the event of fire due to the practice of chocking open fire doors which means the doors cannot provide the protection from fire, smoke or fumes they are designed for.

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

A person who lives here told us they liked the staff. We observed that the people living here had good relationships with the staff and were treated with respect and sensitivity. They readily approached the staff to talk with them or seek their company.

Other evidence

We looked at this outcome as part of our routine review. We visited the home unannounced on 31st August 2011 and spoke with a number of the people who live here, as well as members of the staff team and the registered manager.

The manager told us that all staff have been given induction training and staff can then develop this initial training. She also told us that all of the staff team have a National Vocational Qualification (NVQ) at level 2; two have obtained level 3 and one has also obtained level 4.

There were also plans in place for an outside agency to visit the home in October over two weeks to ensure that staff fully understood the essential outcomes. We were also told that an eye clinic was to provide training on eye conditions. The registered manager said she was also arranging refresher training for staff about medication and managing challenging behaviour.

We were told that most staff have had training about diabetes and carrying out checks on glucose levels and training was being arranged for those who have not had this yet.

We spoke with two of the staff on duty who confirmed that they had obtained NVQs and

told us that they had received a wide range of training including: safe moving and handling, food hygiene, first aid, fire safety, health and safety and safe handling of medication. They had also received training about the Mental Capacity Act and Deprivation of Liberty safeguards, equality and diversity, person centred care and palliative care, amongst others. We saw certificates for this training on their staff records.

The staff also told us they received regular supervision from the manager, during which they discussed their roles and any training needs.

Our judgement

We found that staff are properly supported and trained which helps to protect the people living here and ensures that their health and welfare needs are met.

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 people we spoke with made no specific comment relevant to this outcome.

Other evidence

We looked at this outcome as part of our routine review. We visited the home unannounced on 31st August 2011 and spoke with a number of the people who live here, as well as members of the staff team and the registered manager. We also looked at samples of the records kept.

The registered manager told us that visits are made by an area manager or by managers of other services run by the company in order to assess and report on the quality of the service. During our visit an area manager arrived to carry out such a visit. We also saw a report of one of these visits.

Surveys completed by service users had been carried out and an action plan drawn up in response to their feedback. We were told that a monthly health and safety audit is carried out and saw the documentation for one carried out in August this year. Monthly audits are also carried out on care plans, people's social activities, medication, money as well as staffing, training and staff supervision. We also saw that weekly checks are carried out on hot water temperatures, the fire alarm, fire extinguishers, storage of harmful substances, medication and monies.

Our judgement

We found that there are appropriate quality assurance measures in place which help

ensure that people receive the care and support they need and are kept safe.

Action we have asked the provider to take

Improvement actions

The table below shows where improvements should be made so that the service provider **maintains** compliance with the essential standards of quality and safety.

Regulated activity	Regulation	Outcome
Accommodation for persons who require nursing or personal care	Regulation 15 HSCA 2008 (Regulated Activities) Regulations 2010	Outcome 10: Safety and suitability of premises
	<p>Why we have concerns:</p> <p>The premises meet the needs of the people living here and are kept clean and hygienic. However, people could be at risk in the event of fire due to the practice of chocking open fire doors which means the doors cannot provide the protection from fire, smoke or fumes they are designed for.</p>	

The provider must send CQC a report about how they are going to maintain compliance with these essential standards.

This report is requested under regulation 10(3) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010.

The provider's report should be sent to us within 7 days of the date that the final review of compliance report is sent to them.

CQC should be informed in writing when these improvement actions are complete.

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

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