

Review of compliance

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| <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: | August 2012 |
| Overview of the service: | 2 Belgrave Terrace provides provide personal care and support for upto eight people who have a learning disability. Nursing care is not provided. |

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 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 2 August 2012 and looked at records of people who use services.

What people told us

We spoke with people who live at 2 Belgrave Terrace, as well as the staff team and the registered manager.

One person told us they "liked living here" and enjoyed spending time in their room "watching DVDs".

Another person told us they had been out at work today and discussed their where they worked and their duties. They also told us they were going out to visit a friend after they had finished their evening tea.

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

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

People who use the service, staff and visitors were protected against the risks of unsafe or unsuitable premises.

The provider was meeting this standard.

Outcome 12: People should be cared for by staff who are properly qualified and able to do their job

The provider was meeting this standard.

People were cared for, or supported by, suitably qualified, skilled and experienced staff.

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 receive.

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 observed that staff treated people with respect. They were friendly and informal, but always polite and attentive. We noticed how they interacted with people, allowing them time and space to do things independently.

Other evidence

During our visit we were shown around the home. We saw that all private accommodation was provided in single rooms and that all personal care was carried out behind closed doors. Staff always asked for permission before entering the private rooms of the people living at the home.

Staff were knowledgeable about the people living in the service and how their needs were met. Staff we spoke with were able to describe how they maintained people's privacy and dignity and how important this was for people. Staff demonstrated that they were knowledgeable about the needs of the people they supported which meant that people were offered the level of care they needed without having their independence taken away from them.

Care plans were reviewed monthly but changes could be made as and when they were needed. This was done by the care staff carrying out a visit to the person to review care

which then became the new care plan.

Staff had a good rapport and relationship with the people in their care. They showed respect to people by speaking to them politely. Staff described how people liked to spend their time. Each person had their own routines, which helped them feel relaxed and comfortable.

People also received treatment from other professionals to maintain their health needs such as the GP and district nurses.

People were on observation levels according to their risk assessment and we saw that staff followed these to ensure that risks were reduced. We saw staff discreetly observing people, for example, sitting and talking with a patient or observing them from a distance, so as not to invade their privacy.

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

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

One person told us they enjoyed spending time in their room. Another person said they visited their friend regularly and liked going out to clubs in the evening.

Other evidence

Most of the staff group had worked at the home for a considerable period of time and as a result, they knew people well. The people themselves seemed relaxed and comfortable in their presence. We spoke with staff who were knowledgeable about each person's care needs. Staff told us that people in the home had many different needs and they were able to provide support in various ways.

We saw that each person had a plan of care. This aimed to maintain the individual's welfare and took into account, physical, mental, emotional, personal relationships together with social needs. This ensured that all aspects of the person's health were maintained. The care plans were up to date and provided good information about how people's care and support needs would be met. We noted that people were registered with local doctors and opticians and were supported to attend routine appointments for health checks and treatment. We saw care plans were reviewed monthly.

A range of assessments had been completed to make sure that any possible risks to the person's health and wellbeing had been identified and what actions staff should take to make sure that any risk were minimised.

Service users were assisted to pursue social activities and work placements. During our

visit we spoke to one person who had been out to work that day and was enjoying their job.

We spoke with two visiting professionals on the day of our visit. They had no concerns about the service.

Our judgement

The provider was meeting this standard.

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

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 did not receive any comments from people using the service about this outcome area.

Other evidence

We were shown around the home by the registered manager. The home reflected a family style residence with accommodation over three floors. We saw the environment was clean and tidy.

All the bedrooms were clean, comfortable and homely and presented in a way that reflect individual personalities. People had items of importance and personal pictures in their bedrooms. We saw no equipment being stored in people's bedrooms.

A filing cabinet that had a broken lock and could not close was used to store general records and was pointed out to the manager who obtained agreement from the area manager to replace this immediately. The registered manager showed us records of repairs that had been reported and how these are tracked. They said urgent matters are always attended to promptly, minor repairs take longer but generally the service provided was a good one.

We asked the manager to provide us with details of maintenance records for the home. The manager gave us files which contained all the servicing records relating to fire safety, PAT testing, transfer of waste services, servicing of electrical appliances, maintenance of small appliances, gas servicing, electrical installation, water temperature testing and general maintenance of the building. We found all the records

were up to date.

Our judgement

People who use the service, staff and visitors were protected against the risks of unsafe or unsuitable premises.

The provider was meeting this standard.

Outcome 12: Requirements relating to 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 staff who are fit, appropriately qualified and are physically and mentally able to do their job.

What we found

Our judgement

The provider is compliant with Outcome 12: Requirements relating to workers

Our findings

What people who use the service experienced and told us

We did not receive any comments from people using the service about this outcome area.

Other evidence

There were effective recruitment and selection processes in place. We looked at a number of staff records held by the provider during our inspection.

We saw evidence the provider had a policy in place for the recruitment of staff. The policy contained effective processes to ensure people were not discriminated against during recruitment.

Appropriate checks were undertaken before staff began work. We saw evidence staff employed within the home had been through recruitment checks prior to commencing employment. Identity checks had been completed and other checks included a police clearance check (called a CRB disclosure), employment and character references and information confirming any qualifications held. This demonstrated that people's health and welfare needs were being met by staff who were appropriately qualified.

Our judgement

The provider was meeting this standard.

People were cared for, or supported by, suitably qualified, skilled and experienced staff.

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

Our judgement

The provider is compliant with Outcome 13: Staffing

Our findings

What people who use the service experienced and told us

We observed that the people living at the home had good relationships with the staff and were treated with respect and sensitivity. People seemed relaxed and comfortable in their presence.

Other evidence

Five people were receiving care on the day of our visit. There were three care staff on duty throughout the day. At night, one member of staff was on duty. The member of staff would be woken up if assistance was needed.

The provider had plans in place to respond to unexpected changes in circumstances. The manager told us if staff were unable to attend work at short notice, other staff already employed by the service including bank staff were able to cover. This meant that plans were in place to ensure people's needs would continue to be met in unexpected circumstances.

We looked at the staffing rota which was correct for the number of staff on duty. Staff themselves told us there were enough of them to meet and respond to the needs of the people.

Staff had regular supervision and attended staff meetings that allowed for feedback from staff and managers to assist in the management of the home. We were told by the staff that they felt there was relevant training in place for them to develop the skills they needed to be able to help and support people.

Staff told us and the training certificates we saw showed they had completed training to update them in safe working practices. In addition they were trained to meet the specialist needs of those people who lived at the home such as specific learning disabilities training.

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

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 did not receive any comments from people using the service about this outcome area.

Other evidence

We spoke to the manager about their quality assurance systems.

Staff meetings were held every two months and written minutes were kept. These meetings discussed issues such as policies and procedures, health and safety and the day to day running of the home. Staff told us that the owner was supportive. They said they could approach him with any problems or new ideas and they felt they would be listened to.

We found there was evidence of staff and service user meetings. The records of these showed the meetings covered areas around what people would like to do and any activities that could be arranged.

We saw evidence of audits being carried out on a regular basis, which included Health and Safety, infection control staff file and care plans. We also saw that weekly checks are carried out on hot water temperatures, fire alarm, medication, petty cash, freezer and refrigeration temperatures.

The home had a complaints policy which included contact details of external organisations such as the Care Quality Commission. We examined the complaints log;

the home had not received any recent formal complaints.

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 receive.

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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