

Review of compliance

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| Potensial Limited Westhead | |
| Region: | North West |
| Location address: | 10 Forge Close Westhead Ormskirk Lancashire L40 6HP |
| Type of service: | Care home service without nursing |
| Date of Publication: | August 2012 |
| Overview of the service: | Westhead is a small care home accommodating for adults with learning disabilities. The home supports people for life and to live independently in a domestic house in the community. |

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

Our current overall judgement

Westhead 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 5 July 2012, 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

People using the service told us they were getting the service they wanted. They had discussed the care and support they wanted and needed with support workers. One person told us they had meetings to discuss what they wanted to do. They planned daily activities and their support workers did what was expected of them. One person said, "We're having our meeting tomorrow and I am going to ask about my holiday".

People said their support workers were very good and described them as kind and friendly. One person said, "Staff are kind and caring, I love them".

What we found about the standards we reviewed and how well Westhead 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 who use the service were respected and their right to privacy, dignity, choice and independence promoted.

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

The provider was meeting this standard.

People who used the service experienced safe and appropriate care and support that met their identified needs.

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

The provider was meeting this standard.

People who used the service were protected from abuse or exploitation.

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.

People using the service were cared for by a stable and supported staff team.

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.

There were systems in place to monitor and improve the quality of the services provided.

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 were told people had meetings to discuss what they wanted to do. They planned daily activities and their support workers did what was expected of them. One person said, "We're having our meeting tomorrow and I am going to ask about my holiday". Another person said that they went out each day and were independent and said, "I'm going out and won't see you as I'll be back late".

Other evidence

We looked at the care and support plans known as person centred plans. These recorded people's wishes to maintain their privacy, dignity, choice and independence. There was evidence that people were supported to make informed choices about their care and support.

People were also asked about things which were important to them and we saw examples of this such as monthly meetings, monthly reviews of care and support plans and the 'empower group'. This is a group the organisation had set up so people using its services have a say in their care and the services they received. A person living at the home had agreed to be the home's representative.

Our judgement

The provider was meeting this standard.

People who use the service were respected and their right to privacy, dignity, choice and independence promoted.

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 spoke to four people living at the home. They told us they were happy with the service they received. Their support workers were very good. One person said, "Staff are kind and caring, I love them". They told us they enjoyed activities in and outside of the home. One person said, "I like crafts and baking when I have my one to one time. I like baking carrot cake". They said their support workers helped them, and took them out to places they wanted to go. One person told us they wanted to plan a holiday.

Other evidence

We looked at support plans. These linked to people's identified needs. They were very detailed to make sure peoples' care and support was provided according to their wishes and safety. Peoples' capacity to make their wishes known was identified and their agreement for support sought. This was done by the use of consent forms that were available in a pictorial format. This helped people understand and give consent to arrangements for their care and well being. For example their medicines being administered, being supported with finances and agreeing arrangements in the event of their death.

We could see that there was consultation going on with people about the home becoming a supported living scheme. There was evidence that people were being offered legal advice and advocacy services were they lacked capacity.

Care and support plans were detailed and we could see that there was regular liaison with health professionals for advice and guidance. Support plans were in place that

identified the roles and responsibilities of support workers.

Risk assessments were completed. These identified potential risks to people's well being and safety. Care and support plans gave staff guidance on how to manage identified risks and how to monitor different situations.

Our judgement

The provider was meeting this standard.

People who used the service experienced safe and appropriate care and support that met their identified needs.

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

People said they had support from staff to help them remain safe. One person told us they were independent and was able to access the community as they pleased.

Other evidence

We found the home had its own safeguarding adult's policy as well as the one from the local authority. We saw training records that confirmed staff had attended the organisations' safeguarding adults' training.

We spoke to one support worker about the safeguarding adults' process and they were familiar with their responsibilities on how to report allegations or suspicions of abuse or neglect. Staff said that protecting people was discussed during supervision and in staff meetings.

We saw the 'empower group' had been planned to start. This is a group the organisation had set up so people using its services have a say in their care and the services they received. As part of the empower group the manager was giving a presentation on bullying and hate crime at the first meeting. People living at the home were to be provided with information about hate crime and bullying. Safeguarding was discussed at the meetings held for people who live at the home.

Our judgement

The provider was meeting this standard.

People who used the service were protected from abuse or exploitation.

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

People said their support workers were very good and described them as kind and friendly. One person said, "Staff are kind and caring, I love them".

Other evidence

We saw evidence from the staff roster that the home had adequate numbers of support staff to provide care and support to people living at the home. There was only a small staff team at the home with established working patterns. There was flexibility within the staff roster to ensure that people had one to one time for social and recreational activities.

Our judgement

The provider was meeting this standard.

People using the service were cared for by a stable and supported staff team.

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

People using the service told us they were supported to do the things they wanted to. They had meetings where they could discuss the service they received and contribute their ideas to the running of the home.

One person told us they had meetings to discuss what they wanted to do. They planned daily activities and their support workers did what was expected of them. One person said, "We're having our meeting tomorrow and I am going to ask about my holiday".

Other evidence

We saw the provider consulted people about their needs through the use of meetings, surveys and was developing the 'empower group'.

We saw that the provider organisation had a quality assurance system in place that sought the views of people living at the home as well as staff that worked there. As part of the quality assurance system the manager had to complete audits of the policies, processes and practices in the home. The provider's representative visited the home frequently to look at the quality assurance system in operation and check people living at the home were satisfied with their quality of care. Part of this included comments from visitors and stakeholders.

We saw comments from satisfaction surveys from relatives and visiting professionals. Comments received were, 'This is a real home from home, social services always made very welcome', 'this is the nicest supported tenancy I visit', 'Westhead is an amazing home and the staff wonderful. Everything done efficiently. I can't praise Westhead

enough' and 'both myself and the dogs are made very welcome when we visit. Both by staff and residents'.

A visiting health professional told us, "This is a lovely home. I visit every six to seven weeks and have done for a few years. The residents seem very well cared for, staff are friendly and attentive. I have got to know everyone and it's like a small family. People have a lot of choice, there's always something going on".

Our judgement

The provider was meeting this standard.

There were systems in place to monitor and improve the quality of the services provided.

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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