

Review of compliance

Octavia Housing and Care Leonora House

Region:	London
Location address:	49 Lanark Road Maida Vale London W9 1AP
Type of service:	Domiciliary care service Extra Care housing services
Date of Publication:	September 2012
Overview of the service:	Leonora House is a domiciliary care agency run by Octavia Housing and Care. The service is based at 49 Lanark Road and provides care and support to older people and adults with learning disabilities. People live in their own flats in a new purpose built block at the same address. Domiciliary care staff provide care and support twenty four hours a day, as needed.

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

Our current overall judgement

Leonora House 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 28 August 2012, talked to staff and talked to people who use services.

What people told us

People who use the service told us that they were involved in planning their care and were treated with respect. They told us that they valued the quality of care they received and the skill and kindness of staff. One person said, "staff are fantastic to me, they always help me". Others confirmed that they were able to live their lives with the support they needed.

Everyone told us that they felt safe with care staff and could comfortably approach staff and managers to raise a concern if they had one.

What we found about the standards we reviewed and how well Leonora House 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.

People's views and experiences were taken into account in the way the service was provided and delivered in relation to their care.

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 had 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 17: People should have their complaints listened to and acted on properly

The provider was meeting this standard

There was an effective complaints system available. Comments and complaints people made were responded to appropriately.

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

People who use the service said that care staff were respectful towards them. They said that they could talk to staff and managers who would review and make changes to their care if they wanted it. They said they valued having on site domiciliary care staff and said they were always provided with sufficient information about the service.

People told us that their needs had been assessed for the level of domiciliary support they required before they moved into their flats.

Other evidence

People's needs and wishes had been assessed and planned for. We looked at three care files. There were assessments and care plans in place for the people who use the service. These plans included people's personal histories, preferences and cultural needs.

Care staff we spoke to were committed to providing personalised care and had a good understanding of protecting people's privacy and dignity. Staff had been trained in 'Dignity in Homecare'. We observed that staff knew people well, had positive relationships with them and understood their needs. Staff positively demonstrated how

they involved people in their own care and supported their independence. A staff member said that their role was to enable people to have "best quality of life possible". Key Worker staff had reviewed people's needs with them on a regular basis and documented any changes.

Staff supported people to participate in activities they were interested in and to socialise in communal areas.

Our judgement

The provider was meeting this standard.

People's privacy, dignity and independence were respected.

People's views and experiences were taken into account in the way the service was provided and delivered in relation to their 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

People who use the service described the care staff as "fantastic". They said that they supported them with kindness and professionalism and responded flexibly to their needs. People told us that care staff had helped them regain a sense of wellbeing and health.

People who use the service said that staff always responded quickly if needed and that care staff were always available to meet their needs.

Other evidence

People's needs were assessed and care and treatment was planned and delivered in line with their individual care plan. Staff could describe how they followed a thorough procedure for assessing new clients. Everyone had risk assessments to keep them safe and help them live independent lives.

Care staff documented the care they provided and handed over important information about people's changing needs to other staff. Care plans had been reviewed regularly. Key Workers and other care staff told us they valued the time they were allocated to provide care and support and to get to know people. They described how this had a positive impact on the care they were able to provide.

People's complex and changing needs had been taken into account in how care was provided. People's mental health was kept under review with support from community

mental health teams. People's rehabilitative needs were outlined with clear goals to help them work towards independence. Managers and staff told us that there was a low staff turnover that enabled them to provide consistent care.

There was a call system in place for people who use the service to contact staff from their flats. We saw evidence that staff were trained in what to do in emergency situations. There was an out of hours on call service run by managers. Domiciliary care staff said they could always contact someone if they needed support.

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

People who use the service said that they felt safe with the staff. They said they felt secure with the care they received and degree of backup available.

People told us that they could call staff at any time if they needed support. They said they never had any concerns about the way they were treated.

Other evidence

People who use 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. Staff had been trained to recognise abuse and gave examples of signs of potential abuse. The agency had procedures in place to prevent potential abuse and monitored areas of risk.

The provider responded appropriately to allegations of abuse. There was a safeguarding policy and procedure in place, which staff understood and knew how to follow. Safeguarding records showed that the agency had taken timely and appropriate steps to deal with potential abuse in the past. This included addressing staff performance through one to one meetings, training and using learning from safeguarding in team meetings, as well as making improvements to organisational systems if needed. Staff described a broad and proactive stance by staff towards safeguarding so that potential concerns could be prevented or identified early.

Our judgement

The provider was meeting this standard.

People who use 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.

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

On this occasion we did not ask people who use the service about this outcome. However, people told us that all staff were skilled and competent in providing care and support.

Other evidence

All staff received appropriate professional development. We looked at staff records and spoke to managers and care staff. Care workers' inductions covered core areas of service user care and protection. New care workers confirmed that their inductions had been comprehensive. They said they had received intensive support when they first started work and sufficient time to shadow an experienced worker while learning the job. Staff received regular mandatory training and other training specific to the needs of the people who use the service.

There were sound arrangements for supervising care workers and monitoring their performance. Staff supervisions and spot checks took place regularly. Staff had received annual appraisals where their performance was reviewed and goals for improvements put in place. There were regular team meetings where people's needs were reviewed and where ways to improve care and support were discussed. All meetings had been appropriately documented.

Staff were positive about the level of support they received to do their jobs and the way they were managed.

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 17: Complaints

What the outcome says

This is what people should expect.

People who use services or others acting on their behalf:

- * Are sure that their comments and complaints are listened to and acted on effectively.
- * Know that they will not be discriminated against for making a complaint.

What we found

Our judgement

The provider is compliant with Outcome 17: Complaints

Our findings

What people who use the service experienced and told us

On this occasion we did not speak to service users about this outcome. However, people who use the service told us that they would confidently raise any concerns they had and know that they would be acted on.

Other evidence

There was a complaints policy and procedure in place which staff understood. We looked at the complaints records. Complaints had been properly responded to, investigated and addressed. The service demonstrated proactive learning from complaints and staff understood how to escalate concerns.

Our judgement

The provider was meeting this standard

There was an effective complaints system available. Comments and complaints people made were responded to appropriately.

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
Further copies from	03000 616161 / www.cqc.org.uk
Copyright	Copyright © (2010) Care Quality Commission (CQC). This publication may be reproduced in whole or in part, free of charge, in any format or medium provided that it is not used for commercial gain. This consent is subject to the material being reproduced accurately and on proviso that it is not used in a derogatory manner or misleading context. The material should be acknowledged as CQC copyright, with the title and date of publication of the document specified.

Care Quality Commission

Website	www.cqc.org.uk
Telephone	03000 616161
Email address	enquiries@cqc.org.uk
Postal address	Care Quality Commission Citygate Gallowgate Newcastle upon Tyne NE1 4PA