

# Review of compliance

Milton House Milton House	
<b>Region:</b>	East
<b>Location address:</b>	39-41 Spenser Road Bedford Bedfordshire MK40 2BE
<b>Type of service:</b>	Care home service without nursing
<b>Date of Publication:</b>	September 2012
<b>Overview of the service:</b>	Milton House is a care home without nursing which provides care and accommodation to up to 13 people who have a learning disability. At the time of this inspection 10 people were living at the home.

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

## Our current overall judgement

**Milton 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 20 August 2012, looked at records of people who use services, talked to staff and talked to people who use services.

### What people told us

During our visit to Milton House on 20 August 2012 we spoke with three of the 10 people living at the home. This was because other people were out in the community doing activities or did not want to speak with us. The people that we spoke with during our visit all told us that they were happy at Milton House and that they were treated well and encouraged to make their own decisions. We spoke with one resident whose partner also lived at Milton House told us that staff were respectful of this relationship. Another person said, "I can get up, have a shower, make a coffee when I want".

Everyone at Milton House had social activities, which included community based activities in groups and individually. Activities included both leisure and personal development training which promoted independence. All of the people that we spoke with were fully aware of the care and support they needed. One person said, "the staff try to encourage a healthy lifestyle but in the end it is up to me and I don't always do what they would like me to". This showed that staff provided positive lifestyle messages and left people to make informed choices about their lifestyles.

We observed that people were relaxed in the presence of the staff which indicated a trust. People told us that they enjoyed the company of the staff and liked to have a joke with them

### What we found about the standards we reviewed and how well Milton 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 were treated with dignity and respect, and their 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 09: People should be given the medicines they need when they need them, and in a safe way**

The provider was meeting this standard.

People were protected against the risks associated with medicines because the provider had appropriate arrangements in place to manage medicines.

**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 receiving care can be assured appropriate recruitment processes are in place for employing suitable staff to provide care and support for people.

**Outcome 21: People's personal records, including medical records, should be accurate and kept safe and confidential**

The provider was meeting this standard.

People were protected from the risks of unsafe or inappropriate care and treatment.

**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

The people that we spoke with during our visit on the 20 August 2012 said that they were happy at Milton House and that they were treated well and encouraged to make their own decisions. We spoke with one resident whose partner was also living at Milton House; they told us that staff were respectful of this relationship. Another person said, "I can get up, have a shower, make a coffee when I want. In fact I have a fridge in my room for drinks and snacks so I can do what I want when I want".

People were involved in community based activities both in groups and individually. Activities included both leisure and personal development training which promoted independence and were supported by staff as necessary. People could contribute to communal household duties such as cooking, cleaning and shopping according to their social commitments and abilities.

##### Other evidence

When we visited Milton House on 20 August 2012, the staff that we spoke with told us that every effort was made to ensure people were encouraged to maintain their independence wherever possible, and make choices about the support and care they needed and how it was delivered. A person who was using the service confirmed this by explaining how they were being supported to leave the home and go into town

independently. We were told that this was being achieved by staff walking behind them as reassurance if they got lost or became agitated. The person told us that they had set this goal for themselves and were working towards it at their own pace. This showed that they were fully involved in how their care and support was provided.

This home held regular meetings for the people who lived there. This enabled people to share their views and any ideas which they had about how the home should be run. Some of the people had been living at Milton House for 20 years and were fully involved in the running of the home.

**Our judgement**

The provider was meeting this standard.

People were treated with dignity and respect, and their 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

All of the people that we spoke with were fully aware of the care and support they needed. They told us they had been involved in their care planning through one to one discussions with the manager or deputy manager. One person said, "the staff try to encourage a healthy lifestyle but in the end it is up to me and I don't always do what they would like me to". This showed that staff ensured that people's care and treatment reflected relevant research and guidance and people were given sufficient information to make an informed decision.

During our visit we observed that people were given support at a level which encouraged independence and assured that their individual needs were met. For example one person who had a complex medical history told us that the staff supported them to attend medical appointments. They also told us that they were "confident that they (the staff) knew how to deal with medical emergencies".

##### Other evidence

Each person who used the service had a care record which gave staff information about the way in which that individual preferred and/or requested to be supported. We saw that prior to a person moving into the home an assessment had been undertaken that showed that peoples' needs were assessed and care and treatment was planned and delivered in line with their individual needs. In addition risk assessments had been carried out to support people to live as independently as possible within the home and in the community. This ensured that any potential risks were minimised for each individual.

Since our last visit on 05 January 2012 staff had ensured that the information within the Health Action Plan (HAP), the 'All about me' folder and the care plan was consistent and each record was kept up-to-date following a medical appointment. We were told by staff that following any medical appointments as soon as they returned to the home all the documentation was updated to ensure that the correct current treatment was provided by all the staff involved with the individual. HAP's confirmed that appointments with other health professionals such as opticians, dentists and chiropodists were made for people at regular intervals or when required.

The deputy manager reported that the service worked well with a range of other health professionals, including the local GP and community staff such as a stoma nurse and a diabetic nurse. We were told that a member of the staff team would always accompany a person to hospital and provide the necessary support during a hospital admission

**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

During our visit to the service on 20 August 2012 people told us that that they felt safe living at Milton House. We observed that people were relaxed in the presence of the staff which indicated a trust.

##### Other evidence

During our last review of the service on 05 January 2012 we noted that the staff had had safeguarding training and were aware of their responsibilities to report any incidents of abuse. However the safeguarding policy that the home used was out of date and needed to be reviewed.

The service advised us that they had updated the policy. When we visited on 20 August 2012 to check compliance we confirmed that the service had reviewed their own safeguarding policy and linked it to the Local Authority safeguarding policy. Staff had been requested to read the policy and sign to confirm that they understood the contents. During our visit we checked staffs understanding of the safeguarding policy by speaking with the two staff on duty. Both were familiar with their responsibilities and were also able to talk about associated policies such as the Mental Capacity Act and Deprivation of Liberty. Staff also told us about the services whistle blowing policy and how they would report colleagues if they believed they were putting residents at risk.

Our records showed that the service had reported incidents of concern appropriately and worked with the local safeguarding team to undertake any necessary investigations.

Since the last inspection the staff were supporting a person who used the service who had difficulty understanding money to be financially independent and protected from abuse. This was achieved by ensuring the person had a limited amount of money to use whenever they went out. When they returned to the home staff checked the receipts of any purchases with the money they had left. This enabled the person to be independent with money but identified any possible incidents of concerns as soon as they occurred.

**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 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

We did not talk directly to people about medication but in the course of conversation people told us that they were well supported to attend medical appointments. We also met two people who had medical conditions that required some type of medical support such as diabetes. People told us that they, with the support of the staff team, were able to manage the condition themselves which gave them independence.

##### Other evidence

During the review of this service we looked at the medication procedures. The home had clear procedures for the administration of medication and we could see from the Medication Administration Records (MAR) we looked at that these procedures were adhered to. We saw that the MAR charts had been signed to confirm administration and omission codes had been used correctly. The MAR charts had also been used to record medication as it was received into the home. The management had robust systems in place to audit the administration of medication procedures weekly to confirm that medicines were handled appropriately within the service.

During our visit it was noted that the service did not have storage for controlled drugs (CD's) should they be needed. Before we left the owner was researching medication cabinets with the intention of replacing the medication cupboard in the office with a new one that included CD storage.

#### Our judgement

The provider was meeting this standard.

People were protected against the risks associated with medicines because the provider had appropriate arrangements in place to manage medicines.

## 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

During our visit to the service on 20 August 2012 people told us that the staff were all very good and competent. One person said, "you couldn't get better staff anywhere". Another person told us that the staff were all very good and went on to say that they liked to have a joke with the staff.

##### Other evidence

When we visited Milton House on 20 August 2012 we spoke with the deputy manager about the home's recruitment process, and looked at the personal files of the two most recently appointed staff. We found appropriate recruitment checks had been carried out and recorded. This included reference checks, Criminal Records Bureau (CRB) checks and the right to work in the United Kingdom. Application forms had been appropriately completed and also saw evidence of the interview process.

We noted that the home's recruitment policy did not detail how the home would respond to a returned CRB that included information of a conviction. The provider may find it useful to note that this should be included in the recruitment policy so that there are consistent guidelines about the homes decision to employ, or not, a person with a previous conviction. Staff files also contained training certificates and supervision records.

The deputy manager told us that he was currently applying to us (Care Quality Commission) to become the registered manager. When this had been successfully achieved the current manager who was also the owner would relinquish some responsibility for the day to day running of the home.

**Our judgement**

The provider was meeting this standard.

People receiving care can be assured appropriate recruitment processes are in place for employing suitable staff to provide care and support for people.

## Outcome 21: Records

### What the outcome says

This is what people who use services should expect.

People who use services can be confident that:

\* Their personal records including medical records are accurate, fit for purpose, held securely and remain confidential.

\* Other records required to be kept to protect their safety and well being are maintained and held securely where required.

### What we found

#### Our judgement

The provider is compliant with Outcome 21: Records

#### Our findings

##### What people who use the service experienced and told us

During our visit to the service on 20 August 2012 we spoke to people using the services but their feedback did not relate to this standard other than to confirm that people knew about their records and were involved in formulating care plans.

##### Other evidence

Throughout our visit all of the records that we looked in relation to people using the service and staff were correctly stored and could be located promptly when needed.

Records had been neatly written and in sufficient detail to ensure that there was a consistent approach to care and support. Staff told us that records were completed immediately any changes were identified and where possible the people using the service were involved. This showed that people's personal records, including medical records, were accurate and fit for purpose.

We noted that the records written daily by staff included good detail and were descriptive of the way each person had spent their time.

##### Our judgement

The provider was meeting this standard.

People were protected from the risks of unsafe or inappropriate care and treatment.

# 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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## Care Quality Commission

<b>Website</b>	<a href="http://www.cqc.org.uk">www.cqc.org.uk</a>
<b>Telephone</b>	03000 616161
<b>Email address</b>	<a href="mailto:enquiries@cqc.org.uk">enquiries@cqc.org.uk</a>
<b>Postal address</b>	Care Quality Commission Citygate Gallowgate Newcastle upon Tyne NE1 4PA