

# Review of compliance

<p>Ms M Sowerbutts Ashley Lodge Residential Care Home</p>	
<p><b>Region:</b></p>	<p>South East</p>
<p><b>Location address:</b></p>	<p>Odiham Road Winchfield Hook Hampshire RG27 8BS</p>
<p><b>Type of service:</b></p>	<p>Care home service without nursing</p>
<p><b>Date of Publication:</b></p>	<p>May 2012</p>
<p><b>Overview of the service:</b></p>	<p>Ashley Lodge Residential Care Home is registered to provide personal care and accommodation for up to 11 people. The home is a large detached house with ample parking to the front and large enclosed gardens. Ashley Lodge Residential Care Home is situated in the village of Winchfield near Hook.</p>

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

## Our current overall judgement

**Ashley Lodge Residential Care Home was meeting all the essential standards of quality and safety.**

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 12 January 2012, observed how people were being cared for, looked at records of people who use services, talked to staff and talked to people who use services.

### What people told us

People told us they visited Ashley Lodge before deciding if it was the best place for them. They told us staff respected people's dignity and rights.

Everyone we spoke to were very complementary about the staff and the care provided.

"Staff help me to do as much for myself as I can."

People told us that they had plenty of opportunities to get involved in having their say about how the service is run. They also told us that they were confident that if they reported any problems, they would be dealt with promptly and effectively.

One person said they "really enjoyed going horse riding that morning, and were looking forward to going trampolining in the afternoon".

### What we found about the standards we reviewed and how well Ashley Lodge Residential Care Home 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**

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

The provider was meeting this standard.

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

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

The provider was meeting this standard.

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

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.

The provider was meeting this standard

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

People were cared for by staff who were supported to deliver care and treatment safely and to an appropriate standard.

The provider was meeting this standard.

**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 care and treatment people receive is monitored to ensure that trends and risks are identified and managed effectively.

The provider was meeting this standard.

**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

Residents confirmed the details in their care plans were correct and that they were involved in making decisions about the care they received, and how they spent their time each day.

##### Other evidence

The registered manager confirmed that she had completed the assessments with individuals and their family. We looked at three assessments and these included details of people's wishes and preferences in relation to how their care was provided, how they liked to spend their time and how they preferred to be supported.

We saw that people expressed their views and were involved in making decisions about their care

One resident showed us their bedroom. They told us it was decorated as they liked and we could see their personal items such as photographs and ornaments.

We heard staff asking people about their preferences, such as what they would like to drink and eat, and which activity they wanted to do. All Care plans were written in the first person tense, were centred on people's needs and included details of what people were able to do for themselves. People were supported in promoting their

independence and community involvement.

**Our judgement**

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

The provider was meeting this standard.

## 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 that they were well cared for by "lovely, friendly" staff.  
"Staff help me to do as much for myself as I can."

##### Other evidence

During our visit we looked at a total of three care plans. All had been written in the first person tense, were centred on people's needs and included details of what people were able to do for themselves.

The care plans had been reviewed recently, and according to the people they related to, accurately reflected the care and support that they received from staff.

Staff told us that they found the plans helpful and said they were always updated quickly when people's needs changed.

Staff demonstrated a good understanding of people's needs and how they should be met and had received training in specific health conditions such as the care of people with epilepsy.

The staff told us "we know the people who live here very well, they are able to tell us how they want to be supported."

Each person also had a set of risk assessments. These identified hazards, such as falling, and provided guidance on how staff should support people to minimise the risk

of them occurring.

We saw records that showed people had seen various healthcare professionals such as their doctor, physiotherapist, optician and dentist.

During our visit residents spent time doing various activities from horse riding, trampoline and socialising with staff within the home.

Staff told us that they kept daily records for each person that included information such as how they spent their time during the day. We saw records that were very detailed and included any changes to a person, such as if they felt unwell, and what action had been taken, such as medical intervention and treatment. Staff said that communication between staff, management team and relatives was very good.

**Our judgement**

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

The provider was meeting this standard.

## 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 told us they would speak to staff or the registered manager if they had any concerns. People were confident that any concerns would be dealt with promptly and effectively.

##### Other evidence

During our visit staff explained the procedure they would follow if they suspected people were being abused or if they thought a person's liberty was being deprived in any way. Staff demonstrated a good knowledge of the procedures the home had in place by explaining how, and where to report any suspicions or concerns. They told us they were able to discuss issues with the manager and felt confident that any concerns they had would be acted upon.

We saw records that showed staff had attended training about the safeguarding of vulnerable adults. We were told that staff had received 'in house' training from the registered manager that consisted of watching a DVD and answering questions about it. The registered manager told us that the questions were assessed and verified by an external company who provided the distance learning training to the home. We saw certificates that had been issued to staff who had passed the courses.

Records showed that staff had received training about the Mental Capacity Act 2005 (MCA) and Deprivation of Liberty Safeguarding (DoLS). The MCA and DoLS provide a legal framework that protects people who lack the mental ability to make decisions about their life and welfare.

**Our judgement**

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.

The provider was meeting this standard

## 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

Everyone we spoke to was very complementary about the staff. Comments included: "They are very kind", "They have time to spend with me, not just when supporting me, but chatting and having a laugh." "All of the staff are very helpful, approachable, kind and friendly."

##### Other evidence

The registered manager told us the induction training pack was in line with Skills for Care Common Induction Standards, and was completed by new staff. New staff told us they had a thorough induction, which included spending time in the office reading various documents, policies and procedures, before 'shadowing' a senior member of staff to meet users of the service. Staff said they were able to shadow experienced staff until they felt confident to work alone.

During our visit we requested to see staff training records that showed staff took part in a range of training courses. The training covered specific health conditions experienced by people using the service, as well as more generic issues, such as health and safety and moving and handling. We saw a training plan for 2012 which covered relevant training, planned for the year.

Staff we spoke with told us that they had the opportunity to complete the diploma in Health & Social Care, which has replaced the National Vocational Qualification (NVQ). During our visit staff we spoke with said they were very happy with the training provided by the service. They said it was useful and helped them to meet people's needs.

We were told that the majority of staff had worked for the home for many years. Staff felt that this was because they not only enjoyed their job but felt valued as employees.

During our visit, we saw records that showed staff had received regular one to one time with the registered manager.

Staff told us that formal supervision took place regularly and that there were plenty of opportunities to gain guidance from the registered manager as they often worked alongside staff. Staff told us they could discuss any concerns, worries or problems with the registered manager and the other provider. They told us communication between staff was very good.

**Our judgement**

People were cared for by staff who were supported to deliver care and treatment safely and to an appropriate standard.

The provider was meeting this standard.

## 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 did not speak to us specifically about this essential standard so we cannot report what they said.

##### Other evidence

Staff told us that the registered manager often worked shifts. In doing so, enabled them to monitor the quality of the care provided by the home on a daily basis by observing how staff delivered care to people.

The registered manager told us that although they didn't formally assess the quality of the service, they had regular contact with people who use the service, their relatives and staff. We discussed this with the registered manager and provider who told us they would re introduce a monitoring form they used to use. Therefore trends and risks would be identified and managed effectively.

We saw records that showed relatives had been involved in the annual review process, which enabled people to have their say about how the service was run.

We saw records of health and safety meetings that had been held on a monthly basis as well as audits of medication.

Staff told us they were confident and aware of how to raise concerns and felt able to participate in staff meetings to put forward their views and ideas that were acted upon.

The staff rota identified key staff responsible for fire and first aid for each shift.

**Our judgement**

The care and treatment people receive is monitored to ensure that trends and risks are identified and managed effectively.

The provider was meeting this standard.

# 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

<b>Document purpose</b>	Review of compliance report
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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