Review of compliance

White Rose Care Maylands	
Region:	South East
Location address:	Grosvenor Road Whitstable Kent CT5 4NN
Type of service:	Care home service without nursing
Date of Publication:	November 2012
Overview of the service:	Maylands is a privatley run home for people who manage a learning disability. it is situated in whistable. Maylands is registerd to provide care for up to 18 people.

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

Our current overall judgement

##Report Error## Improvement actions should no longer be set

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 22 October 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 who were able to told us, that they liked living at Maylands and were happy there. relatives told us that they were very happy with the service. One person said "my relative has a very high level of need and I am very happy with their care. the owner and the manager always make me feel welcome and make me feel like I am part of the family. When I leave, I go away knowing that my relative is safe and well cared for.

What we found about the standards we reviewed and how well Maylands 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

There were enough qualified, skilled and experienced staff to meet people's needs. 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 provider had an effective system to regularly assess and monitor the quality of service that people receive. 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.

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
Most of the people who use the service were unable to communicate their views verbally. The people who could, told us that they liked living at the home and had lots of activities. One person told us "the animal lady is coming today, she comes here a lot and lets me hold the animals" another person told us "Next week we are having a Halloween party, its fancy dress, we have lots of parties". A relative told us "most of the people who live here don't understand their care and treatment, but I am always consulted on my relative's behalf and kept fully informed of any necessary treatment they need. In addition I am often asked what activities I think they would like to do. People here are not always able to access the community this time of year because of the weather so the manager tries to bring the community here. There is always something going on".

Other evidence
Peoples' diversity, values and human rights were respected. We used our SOFI (Short Observational Framework for Inspection) tool. The SOFI tool allowed us to spend time watching how staff and people who use the service interacted and helped us record how people spent their time and whether they had positive experiences. This included looking at the support that was given to them by the staff. We saw staff communicating with people in a way that they would understand and which gave them the opportunity

to make choices about what they wanted.

The manager told us that regular meetings with residents relatives and staff are held to enable a variety of activities to be planned that the people who use the service would enjoy or had asked for. In addition, people who use the service regularly interact with people from other homes within the organisation and members of the community. Whilst we were visiting, the people who use the service were interacting in a therapeutic session where they were able to touch and stroke a variety of animals. We observed that staff were encouraging positive interactions and engaged with people in a positive, supportive, manner whilst they encouraged people to express themselves. Staff were professional and person focused through out our observations. One person did not want to join in the session and this was respected. We observed staff supporting this person to engage in an alternative activity.

We looked at four person centred support plans, which had been developed with the people who use the service or their representatives. The plans documented their 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's care plans highlighted their likes and dislikes and that people were engaging in activities that matched the choices highlighted in their care plans. This meant that the service was focused on meeting people's individual needs, respected their preferences and included people's views and experiences on how the service was delivered.

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
Relatives told us that they are encouraged to be involved in their relatives care and are consulted on the way it is delivered. One relative told us. "I am always invited to reviews of my relatives care and asked my views. The home is always very accommodating and are always looking for new ways of meeting my relatives needs".

Other evidence
Peoples' needs were assessed and care and treatment was planned and delivered in line with their individual care plan. We looked at four care plans all of which were person centred, well recorded and contained clear instructions as to the care needs of the individual. There was evidence that people had an initial assessment along with several visits before being accepted into the home and where a risk had been identified an assessment of the risk with plans to minimise it were clearly recorded. For example, for people who may display behaviours that challenge, there were clear guidelines and behaviour plans along with regularly updated risk assessments. This included identified triggers to behaviours and how to provide support sensitively and positively to reduce risk. There was documented evidence that the home regularly sought advice and worked closely with different professions within the local learning disabilities team, whilst they followed any recommendations or guidelines given. This meant that the manager was able to ensure the safety and welfare of the people who use the service.

There was documented evidence that people who lacked capacity to make important decisions had received mental capacity assessments and best interest meetings had been held with family members, people's representatives or Independent mental

capacity advocates (IMCA).

The equipment seen was in good order and had the relevant safety certification showing that the programme of equipment maintenance was effective.

This meant that the provider planned and delivered care, treatment and support that ensured people were safe, their welfare was protected and their individual needs were met.

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 who use the service were not able to comment on this outcome. Relatives we spoke to told us that they had no concerns and felt that the owner and the manager had an open door policy and would be approachable if they did have cause for concern.

Other evidence
The provider responded appropriately to any allegation of abuse. We spoke to several staff members and they all demonstrated that they knew the types and signs of abuse and that they had received training in safeguarding vulnerable adults. The manager told us that new members of staff received this training as part of their induction programme.
This was confirmed when we looked at training documentation. We looked at the provider's safeguarding policies and procedures and found that they included the local authority multi-agency safeguarding procedures.

The manager confirmed that they worked collaboratively with the local authority to safeguard and protect the welfare of people who used the service. We found that they reported any concerns appropriately and attended local authority safeguarding meetings when required. This means that the provider took reasonable steps to identify the possibility of abuse and attempted to prevent it before it occurred.

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 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
People who use the service were not able to comment on this outcome. Relatives told us that the staff were well trained and very caring. One relative told us "The staff here are very good at meeting every ones needs because they know the people who live here really well. They seem well trained and always have a kind and sensitive approach".

Members of staff told us that they felt they received enough training to enable them to do their job well and received regular one to one supervision. One member of staff told us "I had a full induction when I started and received all the mandatory training. I have regular supervision so that I know how I am doing and what training would benefit both myself and the people who live here".

Other evidence
Staff received appropriate professional development. Records of training attended by staff showed that they were up to date and included reminders for refresher training.

Staff we spoke with said they had attended all relevant training. Staff told us they received regular ongoing supervision and the service supported them to attend training days. Staff we spoke with told us that the training offered enabled them to do their job with confidence. This was supported by a learning and development plan in place. Staff training needs were identified through one to one supervision and the appraisal system and additional training was provided for staff to help them meet the needs of people who used the service. This included updates and refreshers in safeguarding, first aid, health and safety, end of life care and mental capacity. This meant that staff had an

appropriate level of knowledge, competencies and experience to meet the needs of the people who use the service.

Our judgement
There were enough qualified, skilled and experienced staff to meet people's needs. 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 who use the service and their representatives were not able to comment on this outcome.

Other evidence
There was evidence that learning from incidents / investigations took place and appropriate changes were implemented. We saw that there was a record of Identified risks and issues with action plans in place where needed. Information about people's experiences had been gathered in such a way to allow for monitoring of risks and the quality of care delivery. There was evidence of pre assessments before people began to use the service and records of updated dependency assessments. Care plans were regularly updated and audits were conducted to identify any trends in levels of risk to the people who use the service. This meant that the manager had an effective system in place to identify any areas for improvement in order to reduce risk.

The manager met with the care staff regularly to discuss issues raised. People who used the service and their representatives were asked for their views about their care and treatment and these were acted on. Complaints were logged and incidents were reported and both had been reviewed to identify trends. Lessons arising from these had been used to make changes to the service. This demonstrated that the quality of the service was monitored and concerns addressed appropriately. Decisions about care and treatment were made by appropriate staff at the appropriate level.

Our judgement

The provider had an effective system to regularly assess and monitor the quality of service that people receive. 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.

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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Author	Care Quality Commission
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