

# Review of compliance

Penelope Baily Chesham House	
<b>Region:</b>	East
<b>Location address:</b>	151 Newmarket Road Norwich Norfolk NR4 6SY
<b>Type of service:</b>	Care home service without nursing
<b>Date of Publication:</b>	December 2011
<b>Overview of the service:</b>	Chesham House is a residential care home for six adults recovering from an eating disorder. It provides short term support and rehabilitation to people who have begun their recovery and are planning to move back to live in the community. The home is owned and operated by a sole provider, Ms Penelope Baily and people come to live in the home after successfully completing the treatment programme

	offered in the clinic based next door to the home and also owned and operated by the same provider.
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# Summary of our findings for the essential standards of quality and safety

## Our current overall judgement

**Chesham House 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.

### What people told us

We did not gather any information from people who use the service in relation to this outcome because the service was unoccupied.

### What we found about the standards we reviewed and how well Chesham 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 transitional registration for this service was found to be compliant. We have no further information to suggest non compliance with this outcome as the service is unoccupied.

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

The transitional registration for this service was found to be compliant. We have no further information to suggest non compliance with this outcome as the service is unoccupied.

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

The transitional registration for this service was found to be compliant. We have no further information to suggest non compliance with this outcome as the service is unoccupied.

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

The transitional registration for this service was found to be compliant. We have no further information to suggest non compliance with this outcome as the service is unoccupied.

**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 transitional registration for this service was found to be compliant. We have no further information to suggest non compliance with this outcome as the service is unoccupied.

**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

We did not gather any information from people who use the service in relation to this outcome because the service was unoccupied.

##### Other evidence

The provider told us, on their registration application in 2010, they were meeting this outcome. No concerns were identified by our review of the application carried out at the time. We have not received any further information prior to our visit to suggest that the provider is non compliant with this outcome.

We visited the service on 18 October 2011 as part of this review. However, the manager told us that the service was unoccupied. Following the visit we have no further evidence to suggest that the provider is non compliant with this outcome.

##### Our judgement

The transitional registration for this service was found to be compliant. We have no further information to suggest non compliance with this outcome as the service is unoccupied.

## 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 did not gather any information from people who use the service in relation to this outcome because the service was unoccupied.

##### Other evidence

The provider told us, on their registration application in 2010, they were meeting this outcome. No concerns were identified by our review of the application carried out at the time. We have not received any further information prior to our visit to suggest that the provider is non compliant with this outcome.

We visited the service on 18 October 2011 as part of this review. However, the manager told us that the service was unoccupied. They told us that the care planning system they used was person centred and that each person was treated as an individual and supported and enabled to move back to living in the community. Following the visit we have no further evidence to suggest that the provider is non compliant with this outcome.

##### Our judgement

The transitional registration for this service was found to be compliant. We have no further information to suggest non compliance with this outcome as the service is unoccupied.

## 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

We did not gather any information from people who use the service in relation to this outcome because the service was unoccupied.

##### Other evidence

The provider told us, on their registration application in 2010, they were meeting this outcome. No concerns were identified by our review of the application carried out at the time. We have not received any further information prior to our visit to suggest that the provider is non compliant with this outcome.

We visited the service on 18 October 2011 as part of this review. However, the manager told us that the service was unoccupied. Following the visit we have no further evidence to suggest that the provider is non compliant with this outcome.

##### Our judgement

The transitional registration for this service was found to be compliant. We have no further information to suggest non compliance with this outcome as the service is unoccupied.

## 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

We did not gather any information from people who use the service in relation to this outcome because the service was unoccupied.

##### Other evidence

The provider told us, on their registration application in 2010, they were meeting this outcome. No concerns were identified by our review of the application carried out at the time. We have not received any further information prior to our visit to suggest that the provider is non compliant with this outcome.

We visited the service on 18 October 2011 as part of this review. However, the manager told us that the service was unoccupied. They also explained that they and staff members were currently working in the clinic sited next door to the home. They told us that this enabled staff members to use their training and skills and ensured that the people living in the clinic knew staff members when they moved into the home, as part of their rehabilitation. Following the visit we have no further evidence to suggest that the provider is non compliant with this outcome.

##### Our judgement

The transitional registration for this service was found to be compliant. We have no further information to suggest non compliance with this outcome as the service is unoccupied.

## 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

We did not gather any information from people who use the service in relation to this outcome because the service was unoccupied.

##### Other evidence

The provider told us, on their registration application in 2010, they were meeting this outcome. No concerns were identified by our review of the application carried out at the time. We have not received any further information prior to our visit to suggest that the provider is non compliant with this outcome.

We visited the service on 18 October 2011 as part of this review. However, the manager told us that the service was unoccupied. Following the visit we have no further evidence to suggest that the provider is non compliant with this outcome.

##### Our judgement

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# 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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