

Review of compliance

Turning Point Dove Lane	
Region:	East
Location address:	7 Dove Lane Harrold Bedfordshire MK43 7DF
Type of service:	Care home service without nursing
Date of Publication:	December 2011
Overview of the service:	Dove Lane is a care home registered to provide accommodation and personal care for up to six adults who have a learning disability.

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

Our current overall judgement

Dove Lane 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 18 November 2011, observed how people were being cared for, talked to staff and talked to people who use services.

What people told us

People living at Dove Lane had complex needs and did not use words to communicate, so we were not able to ask for their views on the quality of the service provided. However, people communicated in various other ways, and by facial expressions, gestures and body language people were able to make their feelings and needs known.

Our observations during our visit to Dove Lane on 18 November 2011 concluded that there was very positive interaction between people living here and the staff team. There was a lot of friendly banter and laughter. Staff were attentive to people's needs, supported people to maintain or improve on their skills and ensured people were comfortable with whatever was going on.

What we found about the standards we reviewed and how well Dove Lane 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 is compliant with this outcome. Care and support is provided in a dignified, respectful way which involves each person in making as many decisions as possible about the care they receive and how they lead their lives.

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

The provider is compliant with this outcome. People's needs are thoroughly assessed and care plans and risk assessments are in place which give staff detailed guidelines to ensure that each person's assessed and changing needs are met, and people are kept safe from unnecessary risk.

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

The provider is compliant with this outcome. There are robust safeguarding systems and procedures in place at this home. Staff are trained and knowledgeable and their practice ensures that people's rights are upheld and they are safeguarded from abuse and harm.

Outcome 13: There should be enough members of staff to keep people safe and meet their health and welfare needs

The provider is compliant with this outcome. There are sufficient staff on duty, who are trained and supported well, to ensure that people who live here are kept safe and their needs are met.

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 is compliant with this outcome. There are robust systems and processes in place to gather information about the quality of the service and to make improvements when needed.

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

People living at Dove Lane had complex needs and did not use words to communicate. During our visit on 18 November 2011 we observed that staff used a number of ways to communicate with people so that each person was able to make as much choice as possible about the way they wanted to lead their lives.

Other evidence

During the time we spent at Dove lane we saw that staff treated the people living here with respect and involved them in making decisions about their care and support. When we arrived, staff were supporting each person with their own morning routine, so that decisions the person had made about the order they wanted to do things in were followed. One person, for example, preferred to eat their breakfast in their bedroom before having a bath and getting ready for the day. We sat in the lounge area with people and noted that staff were very attentive to each individual's needs and made sure that people decided for themselves where they wanted to sit, what they wanted to do and whether they wanted any food or drinks.

The atmosphere was calm and relaxed and staff spent time chatting with people. The people living at Dove Lane showed in their own ways, by facial expressions, body language and vocally that they liked the staff and enjoyed their company. Any personal

care was offered in a discreet and sensitive way.

Care records we looked at showed that people made choices in all areas of their lives. Each person had a 'How I communicate' folder. Those we looked at were clear and detailed and were written in the first person, such as 'I feel happy when...' followed by a list of things that made the person happy. Some of the sections were completed realistically, showing that staff did have to make some decisions and assumptions. For example, in the section 'I feel under pressure when...', staff wrote, 'staff think that I may feel under pressure when...' as the person was not able to communicate this directly. This showed that staff had thought about each person as an individual so that their needs could be recorded as clearly as possible.

The manager explained that the staff team had started to complete the 'How I make decisions' part of the records, for more complex decisions such as where the person would like to live in the future. For this they would be using 'best interests' meetings, involving a range of people who knew the person so that the best decision could be made.

Our judgement

The provider is compliant with this outcome. Care and support is provided in a dignified, respectful way which involves each person in making as many decisions as possible about the care they receive and how they lead their lives.

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 living at Dove Lane had complex needs and did not use words to communicate. During our visit on 18 November 2011 we observed that staff were attentive to people's needs and offered any care and support needed in a sensitive, caring and professional way.

Other evidence

We looked at the care records held for two of the people living at Dove Lane. The records were written in a very person-centred way and gave staff good, clear, detailed information on the ways in which each person prefers to have their needs met. For example, one person had been prescribed a number of creams to use. The person's notes included body maps which showed where on the body each of the creams was to be applied.

There was evidence that people's needs are re-assessed and new ways of working with the person implemented when needs change. Staff told us the plans are regularly reviewed and are changed if staff notice any changes, such as a person developing new skills, or a reduction in someone's ability in a particular area. This was evident from the minutes of a staff meeting held the day before our visit. Staff had discussed and agreed a new morning routine for one person to try and support the person better with their personal care. The routine had been added to the person's care notes, put into practice on the morning we arrived and briefly evaluated once it had been completed. Staff had signed to state they had read and understood the support plans and risk assessments. New staff we spoke with said they found the support plans really helpful

when getting to know about how to support people and keeping up with any changes in people's needs.

People's health needs were monitored, so that people were supported to remain as healthy as possible. Records showed that people had attended regular appointments with a number of healthcare professionals, such as dentist, GP, optician and hospital consultant. People's weight was monitored and advice sought when needed. There were detailed guidelines in place for managing people's medicines.

Risk assessments and risk management plans had been completed for each person and covered all the risks the person might encounter, such as having a hot drink, helping in the kitchen and accessing the community. These were reviewed regularly and new plans added when new activities were taking place. Communication cards were in place to help people who could use them to make choices. For example, there was a photograph of the person going for a walk and one of them getting in the minibus, so they could choose which they would like to do.

Our judgement

The provider is compliant with this outcome. People's needs are thoroughly assessed and care plans and risk assessments are in place which give staff detailed guidelines to ensure that each person's assessed and changing needs are met, and people are kept safe from unnecessary risk.

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 living at Dove Lane had complex needs and did not use words to communicate. During our visit on 18 November 2011 we observed that staff were kind, attentive and caring, and treated people well.

Other evidence

During our visit we found that there were up to date policies, procedures and protocols in place regarding safeguarding. Clear guidelines for staff on what to do if they suspected any abuse was taking place were also easily accessible. The manager told us that all staff had undergone training in safeguarding adults: they had attended sessions run by the local authority and had also done Turning Point's e-learning training on the computer. This was confirmed by the training records and by the staff. Those we spoke with said they had done the e-learning training on the computer and then their competency was assessed by the manager. All the staff we spoke with were clear about their response when we asked them to describe what they would do if they considered a situation was abusive.

The manager stated that there had been no incidents that had required reporting to the local authority's safeguarding team for a long time. During our review of the records we found no evidence of any incidents that should have been reported differently.

All staff had received training on the Mental Capacity Act and Deprivation of Liberty Safeguards, which had increased their knowledge about people's rights in this area. The manager told us, and this was verified by the records, that the use of any

restrictions, such as bed rails or wheelchair straps, is only done after a 'best interests' decision has been made by the relevant people.

Our judgement

The provider is compliant with this outcome. There are robust safeguarding systems and procedures in place at this home. Staff are trained and knowledgeable and their practice ensures that people's rights are upheld and they are safeguarded from abuse and harm.

Outcome 13: Staffing

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 sufficient numbers of appropriate staff.

What we found

Our judgement

The provider is compliant with Outcome 13: Staffing

Our findings

What people who use the service experienced and told us

People living at Dove Lane had complex needs and did not use words to communicate. However, people used other ways to communicate. From our observations of the way people responded to the staff during our visit on 18 November 2011 we were confident that people felt comfortable with the staff, trusted them and liked their company. Staff we spoke with were very enthusiastic and told us how much they liked working here: one said, "I love it here – absolutely love it."

Other evidence

When we visited Dove Lane on 18 November 2011 we observed that there were enough staff on duty to meet people's needs. The manager told us there would always be a minimum of four staff on duty, as people who live here mostly need two staff to support them with their care needs. We checked staff rotas and found that this level of staffing had been maintained, using agency staff occasionally as there were a number of staff on long-term leave. However, staff told us that there were not always enough staff to carry out as many day activities as people had been able to do previously. This was demonstrated by one person's records which showed they had not been able to go swimming and horse riding as regularly as they wanted to. Staff were also expected to do all household tasks such as cooking, cleaning and laundry.

Staff we spoke with all confirmed they had received a range of training to give them the knowledge and skills to meet people's diverse needs. One of the newer members of staff described their induction workbook to us. This comprehensive induction package would take about 12 weeks to complete and included a range of training, including e-

learning training, as well as practical sessions for moving and handling and direct observation of their practice. The induction workbook was reviewed at least monthly by the manager and the staff member together so that their progress was monitored and any additional support needed could be given.

Staff commented that Turning Point had "a very good" website, which they could access at work and at home. They said the website was "very helpful" and gave them a lot of useful information about the work they do. Staff supervision, including observation of practice had been done regularly and staff meetings were held to give staff the chance to air their views. Staff told us the staff team support each other and work well together. They said the manager was very supportive and "he's a very good boss – we can go to him anytime."

Our judgement

The provider is compliant with this outcome. There are sufficient staff on duty, who are trained and supported well, to ensure that people who live here are kept safe and their needs are met.

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 living at Dove Lane had complex needs and did not use words to communicate, so we were not able to ask for their views on the quality of the service provided. From our observations and discussions with the staff on 18 November 2011 we concluded that people were happy with the care and support they receive. The service had not received any complaints from people's family members.

Other evidence

The provider had a number of systems in place to assess and monitor the quality of the service provided. A comprehensive internal quality assurance tool, based on CQC's Essential Standards of Quality and Safety had been developed. The manager was required to complete a thorough review of three of the outcomes every three months. This included, for example, a medication audit and an audit of care records. Checklists were in place to ensure all aspects of housekeeping, which included health and safety aspects of the building, were monitored regularly. This ensured that all the equipment in the home, as well as the fire safety systems, were operating correctly. During our visit a planned fire alarm test took place. We were all given warning that this was to happen and staff supported people who would have been upset by the bells ringing. An infection control audit had been completed and staff had identified a number of areas that had not been covered by the audit, so the tool was being revised.

Families of people living here had been sent a questionnaire asking for their comments on all aspects of care and the paperwork involved. The manager said five responses had been received, all of which were generally positive. The responses were being

collated into a report and an action plan would be put in place for any requested improvements. The provider held a quarterly meeting, away from the home, for families to attend. This was well supported and families felt able to discuss their views. Staff had regular team meetings, six one-to-one supervisions a year and annual appraisals which included individual objectives for each member of the team.

Our judgement

The provider is compliant with this outcome. There are robust systems and processes in place to gather information about the quality of the service and to make improvements when needed.

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

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Author	Care Quality Commission
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