

Review of compliance

Royal Mencap Society Hardy Drive	
Region:	East
Location address:	23 Hardy Drive Royston Hertfordshire SG8 5LZ
Type of service:	Care home service without nursing
Date of Publication:	October 2012
Overview of the service:	Hardy Drive provides a service for up to six people. It is registered for the regulated activity of: Accommodation for persons who require nursing or personal care and the treatment of disease, disorder or injury. It is not registered to provide nursing care

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

Our current overall judgement

Hardy Drive 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 19 September 2012, observed how people were being cared for, talked to staff and talked to people who use services.

What people told us

During our inspection of the home on 19 September 2012, we spoke with the manager, three staff and people who used the service. Due to some people who had little verbal communication, we used different methods to help us understand their experiences of living at Hardy Drive. We observed and talked to staff who were very knowledgeable about the people who lived at Hardy Drive and were able to understand their needs.

What we found about the standards we reviewed and how well Hardy Drive 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's privacy, dignity and independence were respected.

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 steps were taken to identify the possibility of abuse and prevent it from happening.

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

The provider was meeting this standard. There were enough skilled and experienced staff to meet people's needs.

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

The provider was meeting this standard. People were cared for by staff who felt supported and whose ability to do their job was regularly assessed.

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 was meeting this standard. The provider had an effective system to regularly assess and monitor the quality of service that people received.

Outcome 17: People should have their complaints listened to and acted on properly

The provider was meeting this standard. There was a complaints system available to ensure that people could raise their concerns easily,

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

During our inspection to the home on 19 September 2012, we used a number of different methods to help us understand the experiences of people using the service, because some people had little verbal communication, which meant they were not able to tell us their experiences.

Through our observations, people were encouraged and supported to maintain their independence. This included a staff member checking with people, they had all their things they needed to go to the day centre and they had their coats on.

Other evidence

People were relaxed, calm and the quality of interaction between staff and people throughout our visit was good, with staff showing respect and kindness towards people. We observed that people were offered choices by staff in what they wanted to drink and then encouraged by them to help make it. People's care records that we looked at included information about their preferences relating to their care. For example, people's food preferences and how the received personal care were clearly recorded so that staff could offer support in the specific way the person liked. Additional assessments of people's ability to make decisions for themselves had been completed, to ensure any decisions taken on their behalf by staff were always made in their best interest.

Our judgement

The provider was meeting this standard. People's privacy, dignity and independence were respected.

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

During our visit to the home on 19 September 2012, we used a number of different methods to help us understand the experiences of people using the service, because some people using the service had little verbal communication, which meant they were not able to tell us they were well cared for.

Other evidence

The care plans we looked at contained detailed information for staff to follow about people's individual care needs and how to meet them, thus ensuring that people received their care in the specific way they preferred. The provider might like to note that one person's plan had not been reviewed since March 2012, although we did see that the newly allocated key worker had started to review the care plan on the computer. The manager told us she would ensure that this was done as soon as possible. We saw detailed and up to date risk assessments to help keep people safe.

There were systems in place to ensure people had regular access to health care professionals to help them maintain their welfare. A chiropodist has been arranged for one person and two members of staff had received training in foot care to ensure everyone's nails were cut appropriately. Records showed that people regularly saw their GP, optician and dentist to help them maintain their well-being.

Our discussions with staff and our observations found that the staff had a detailed knowledge of people's individual needs and preferences, and their approach to each person was based on this. Staff told us that the most important thing was getting to

know the people so they could understand them and meet their needs.

Three people in the home attended the local day centre as part of their daily timetable. We saw that one person's timetable was based on accessing the local community and trying out new activities. For example, they had recently been to have a massage, tried exercise classes, the next activity they were wishing to try is swimming. This meant they were provided with social activities based on their choices and ensured they did not become isolated within the home.

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 home on 19 September 2012, we spoke with two people who lived at Hardy Drive and they both told us they felt very safe and were very happy living there.

Other evidence

Staff we spoke with confirmed that they had received training in how to protect vulnerable people and training records confirmed this. Staff members were able to explain to us what constituted abuse and the actions they would take if they felt abuse had occurred. They were clear that they would report any incident to external agencies including the local authority safeguarding team and the Care Quality Commission.

Our judgement

The provider was meeting this standard. People who use the service were protected from the risk of abuse because steps were taken to identify the possibility of abuse and prevent it from happening.

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

During our visit to the home on 19 September 2012, the two people we spoke to told us the staff were lovely and they got on well with them.

Other evidence

We found that there were sufficient staffing levels to meet people's needs during our visit.

Staffing ratios varied during the day depending on how many people living at the home were there. However, staffing numbers ensured that there were always at least two members of staff available if all people living at the home were in.

At the time of our inspection, two people were on holiday and three out of the four people were attending their local day centres. Two members of staff were available to support people in getting ready for the day. Once three people went off to their day activities, one member of staff was then lone working with the person who was staying at home. The home provides a member of staff who sleeps in to support people during the night. Both the manager and the staff told us that additional staff are brought in if required to support people in their choice of activities.

We spoke to three staff during our visit who informed us of the range of training they had received and of the future training that is planned.

Induction training for new care staff was provided prior to them commencing work to support people so that they would have the skills to provide care to people.

Our judgement

The provider was meeting this standard. There were enough skilled and experienced staff to meet people's needs.

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

During our visit to the home on 19 September 2012, we spoke with people using the service but their feedback did not relate to this standard.

Other evidence

Staff received appropriate professional development. Computer records showed that staff had received training in relevant topics including: manual handling, safeguarding, first aid, and health and safety, medication and autism. The system also highlighted where staff needed updated refresher training.

Staff confirmed and records we looked at showed that they had received an annual appraisal of their working practices, where their knowledge, areas of strength, areas for development and training needs had been discussed.

Staff confirmed they received regular supervision. They told us that the manager was approachable and available if they had any concerns or needed advice to support people with their care and support needs. There was an on call rota to support staff especially when they worked alone. They told us they have received training in lone working, which they had found very informative and helpful.

Our judgement

The provider was meeting this standard. People were cared for by staff who felt supported and whose ability to do their job was regularly assessed.

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

During our visit to the home on 19 September 2012, we spoke with people using the service but their feedback did not relate to this standard.

Other evidence

At our previous inspection in November 2011, we found that the provider had not taken any action to address issues highlighted from a survey undertaken to gather people's views of the service.

During this inspection, we found that people's views following this year's survey, had been very positive. Areas of improvements had been identified and added to the service's continuous improvement plan. The manager told us a newsletter was published at least twice a year. A copy of which was seen, which provided information about what people had been doing, staff recruitment and various activities that had taken place or were due to take place. This enabled people who used the service and friends keep up to date with what was happening at the home.

Compliments received by the home included, 'Staff are talented and motivated, I always receive a warm and friendly welcome, 'X is always relaxed, confident and engaged in an activity, and it's a really great service'.

Various audits were completed by staff in relation to medication, finance, health and safety to ensure standards were maintained. The manager completed a self-assessment of the various audits, which was sent through to head office on a monthly basis. The area manager carried out a monthly visit to the home and to ensure any

improvements that have been identified had been actioned. They also carried out an audit check on various areas including environment, care plans and finance

Our judgement

The provider was meeting this standard. The provider had an effective system to regularly assess and monitor the quality of service that people received.

Outcome 17: Complaints

What the outcome says

This is what people should expect.

People who use services or others acting on their behalf:

- * Are sure that their comments and complaints are listened to and acted on effectively.
- * Know that they will not be discriminated against for making a complaint.

What we found

Our judgement

The provider is compliant with Outcome 17: Complaints

Our findings

What people who use the service experienced and told us

During our visit to the home on 19 September 2012, people we spoke to told us they would speak to staff if they were unhappy about anything.

Other evidence

There was information available for people using the service, and people acting on their behalf, regarding the process to follow in the event of them having any concerns about the service provided. The manager was to introduce a new process to support people to raise a concern by giving them a pre-written letter, in a stamped addressed envelope to the area manager asking them to come and talk to them. This provided people with an alternative option to speak to someone who did not work at the home

The manager had clear procedures in place for receiving, handling and responding to comments and complaints. No complaints had been received since our last inspection.

Our judgement

The provider was meeting this standard. There was a complaints system available to ensure that people could raise their concerns easily,

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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