

Review of compliance

Anchor Trust Abbeywood	
Region:	South East
Location address:	Wharf Road Ash Vale Surrey GU12 5AX
Type of service:	Care home service without nursing
Date of Publication:	December 2011
Overview of the service:	Abbeywood is a purpose-built which provides care and accommodation for fifty people. The home is set in a quiet location close to the village of Ash. The home provides single bedrooms and communal facilities in each of their five units.

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

Our current overall judgement

Abbeywood 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 and carried out a visit on 24 October 2011.

What people told us

People told us that they lived in a nice home and that staff were really kind to them. One person told us that they were very happy at Abbeywood they enjoyed the food and the entertainment. . One person told us that a favourite activity was the music afternoon.

It was difficult to obtain specific feed back due to the frailty of the people living at the home. They could not confirm if they had care plans in place but said they thought they did have them.

People confirmed that they felt safe and were well cared for by staff. They told us resident meetings take place which they are invited to and that the home has sought their views in surveys.

What we found about the standards we reviewed and how well Abbeywood 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 who use the service and their relatives were involved in the decisions about the care provided. People who use the service were treated with respect.

Overall, we found that Abbeywood was meeting this essential standard.

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

People who use the service benefit from care plans that were detailed and contained enough information to allow staff to care for the people. Adjustments need to be made to ensure that they are person centred.

Overall, we found that Abbeywood was meeting this essential standard.

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

People who use the service felt safe in the home. Staff were trained and able to respond appropriately to any actual or suspected abuse that occurred.

Overall, we found that Abbeywood was meeting this essential standard.

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

The service had systems in place to ensure staff received the necessary training and support to care for people who use service.

Overall, we found that Abbeywood was meeting this essential 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 has ensured that people who use the service were safe. The quality of care provision is monitored and improvements were made when concerns were raised. However audits should now be linked to the current guidance about compliance in the Essential Standards of Quality and Safety document.

Overall, we found that Abbeywood was meeting this essential 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

People who use the service told us that the staff involved them in the activities in the home. One person told us that a favourite activity was the music afternoon.

Other evidence

We saw examples of care plans that had been developed for each person using the service. They documented 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 relatives had signed the care plans to confirm they were happy with them but we did not observe the signatures of people using the service. The manager told us that some people were able to sign their own plans but mostly relatives would agree on behalf of their family member.

The manager confirmed that the plans, including risk assessments, were developed and regularly reviewed in consultation with the individual. They provided structure and guidance for members of staff, to ensure that identified current and ongoing care and support needs could be met consistently and safely.

We found that systems for consultation, interaction and communication were effective. People who use the service could attend meetings every three months. The manager also told us that surveys are sent regularly and results are analysed so that any shortfalls can be addressed. Individuals had their privacy and dignity upheld.

During our visit we saw that people were being spoken with and supported in a sensitive, respectful and professional manner. The service has the benefit of two activity coordinators and a further person has been employed to start soon. During our visit we observed in one unit that people were watching a film in one of the lounges.

Our judgement

People who use the service and their relatives were involved in the decisions about the care provided. People who use the service were treated with respect.

Overall, we found that Abbeywood was meeting this essential 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 who uses the service confirmed they knew about care plans but the majority of people were either unable to comment or they didn't know if they had one.

People using the service confirmed that staff were attentive to their needs and nothing was too much trouble for them.

Other evidence

We sampled care plans and observed the documentation was clear and included information on the individual's life and medical history. We observed that these plans had been evaluated, reviewed and updated regularly and signed by a member of staff and agreed by their relative.

We discussed with the manager that although the care plans were detailed and contained enough information to allow staff to care for the people who use service the plans were not person centred.

Staff spoken to during the site visit were knowledgeable about the information in care plans. They told us that the information in the care plans enabled them to give good support to the people using the service.

All people using the service are registered with a local GP. The GP will visit the home if requested and people using the service have the support of the district nurses if required.

Our observations confirmed the atmosphere was relaxed, with people who use the service interacting with each other. Staff were observed to be kind and caring in their approach to people.

Our judgement

People who use the service benefit from care plans that were detailed and contained enough information to allow staff to care for the people. Adjustments need to be made to ensure that they are person centred.

Overall, we found that Abbeywood was meeting this essential 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 that they felt safe and were well cared for by staff.

Other evidence

The manager stated that safeguarding was taken seriously and people were treated with dignity and respect. We saw training records that confirmed that all staff had attended safeguarding of vulnerable adult training. This enabled staff to understand the aspects of safeguarding which were relevant to them.

Staff spoken with showed a good knowledge of safeguarding people from abuse. Staff knew how to recognise the signs of abuse and that they must report all cases of concern to the appropriate person.

During the inspection we could not find the local authority's multi-agency safeguarding procedures. The manager told us that it was always in the staff room so that staff have access to the document. Following the inspection the manager telephoned us to confirm that she had printed a new copy from Surrey County Council's web site.

The manager confirmed that it worked collaboratively with the local authority to safeguard and protect the welfare of people who use the service. We found that they reported any concerns appropriately and attended local authority safeguarding meetings when required.

Our judgement

People who use the service felt safe in the home. Staff were trained and able to respond appropriately to any actual or suspected abuse that occurred.

Overall, we found that Abbeywood was meeting this essential 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

We did not speak to people using the service about this outcome area.

Other evidence

The service provided an induction programme for staff which was based on the Skills for Care Common Induction Standards and included one day of induction at Anchor's head office in London. Staff then return to the home with their induction pack and the areas that they are to cover during the three months.

New staff were allocated a mentor or team leader for the first twelve weeks to ensure the training is completed and they also work under supervision. Staff told us they had attended the induction programme when they joined the home.

The home had a learning and development plan in place and staff training needs were identified. Additional training, such as dementia care, medication and a dignity in care programme was provided for staff to help them meet the needs of people who use the service. Some of the training is provided by via the computer as e learning. The manager told us that this had been very successful as it can be done at the staff members own pace. Staff have to complete the training and pass a test before the training is complete.

Some staff were supported to undertake vocational qualifications. Several staff had completed their NVQ at level 2 and 3.

The records of training attended by staff were kept on the computer. They were up to date and included reminders for refresher training. The staff member responsible for coordinating the training will also produce a paper format for quick reference. Staff we spoke with said they had attended all relevant training.

Our judgement

The service had systems in place to ensure staff received the necessary training and support to care for people who use service.

Overall, we found that Abbeywood was meeting this essential 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

Some people that we spoke with confirmed that resident meetings take place which they are invited to and that the home has sought their views in surveys.

Other evidence

We saw that there was a record of identified risks and issues with action plans in place where needed. We were shown examples of audits which Anchor call excellence audits.

We observed that the audits were linked to the old standards that were used by the predecessor commission CSCI. They were difficult to follow as the outcomes were not linked to the current format for inspecting. We discussed this with the manager. Audits should now be linked to the current guidance about compliance in the Essential Standards of Quality and Safety document.

Some of the areas that are looked at by the manager include care plans, medication, catering and environment.

People who use the service are invited to comment on the catering on a daily basis. This is collected and actioned by the chef and kitchen staff.

We were informed by the manager that minutes of staff and relative meetings and questionnaires completed by people living in the home are available. They demonstrated that the quality of the service was monitored and concerns addressed

appropriately.

Information about people's experiences had been gathered in such a way to allow for monitoring of risks and the quality of care delivery.

During our visit, we observed people being spoken with and supported in a sensitive, respectful and professional manner. This included assessment of their satisfaction and having their needs met.

Our judgement

The provider has ensured that people who use the service were safe. The quality of care provision is monitored and improvements were made when concerns were raised. However audits should now be linked to the current guidance about compliance in the Essential Standards of Quality and Safety document.

Overall, we found that Abbeywood was meeting this essential 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

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