

Review of compliance

Anchor Trust Thornton Hill	
Region:	Yorkshire & Humberside
Location address:	Church Road Thornton In Craven Skipton North Yorkshire BD23 3TR
Type of service:	Care home service without nursing
Date of Publication:	September 2012
Overview of the service:	Thornton Hill is registered to provide accommodation and personal care for people. The home is a large converted manor house with a purpose built extension known as the Manor Wing. Thornton Hill is set in its own grounds and overlooks the valley. It is in the village of Thornton-in-Craven, which is approximately 8 miles from Skipton.

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

Our current overall judgement

Thornton Hill 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 21 August 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

We spoke with five people who used the service and three visitors. Two people told us that they had been involved in planning their care, along with their relative. One person told us, "This place is comfortable and I am happy here."

People told us that they enjoyed their life at Thornton Hill and that they were enabled to have freedom in their daily routines. This included taking part in individual interests and keeping in contact with friends and relatives. One person told us that they had had their 'own routine' prior to moving to Thornton Hill and that this had continued when they had moved into the home. People we spoke with gave the impression that there were no set rigid routines. People particularly liked the meals and the staff working in the home. They made comments such as, 'I like the staff here, they make sure I have everything I need.' One person said, "The staff keep me going, they are always cheerful." People said that the manager was good at listening to any concerns or complaints and that staff did their best to put things right.

What we found about the standards we reviewed and how well Thornton Hill 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 used this 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 12: People should be cared for by staff who are properly qualified and able to do their job

People living at home were supported by safely appointed staff. 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

We spoke with five people who used the service and three visitors. Two people told us that they had been involved in planning their care, along with their relative. One person told us, "This place is comfortable and I am happy here."

Other evidence

We looked at four care plans in detail. These included people's views on the way they wished to receive their care. For example, they included what people preferred to eat, wear, how they preferred to be dressed, their routines of daily living and how they got on with other people. We carried out observations in the dining room and lounge areas, which gave us some information about the way staff interacted with people living at the home. Staff were good at asking people what they wanted to do, how they were feeling, whether they wanted assistance and where they wanted to spend their time. Staff chatted with people in a kind, inclusive and friendly way. They spent time with those who needed assistance, to ensure they were comfortable. Staff were good at showing they were listening, often getting down to speak with people at eye level which ensured that people had the opportunity to ask questions or make comments as they wished. Staff told us that their training had included how to approach people with respect and that people's views were of central importance to their care. People told us that activities were organised on a regular basis and included things which they liked to do.

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

People living at the service told us that they enjoyed their life at Thornton Hill and that they were enabled to have freedom in their daily routines. This included taking part in individual interests and keeping in contact with friends and relatives. One person told us that they had had their 'own routine' prior to moving to Thornton Hill and that this had continued when they had moved into the home. People we spoke with gave the impression that there were no set rigid routines.

Other evidence

Some people, living at the home, had complex needs and were not able to verbally communicate their views and experiences to us. Due to this we used a formal way to observe people, to help us understand how their needs were supported. We call this the 'Short Observational Framework for Inspection' (SOFI). Throughout the observation we saw staff treated people with kindness and courtesy. We observed staff being warm and accepting of people. Staff approached people in a sensitive and calm manner and in a way which showed they knew the person well and how best to assist them. Staff were responsive to subtle changes in peoples demeanour, which showed a good understanding of each persons needs. Staff clearly had an in depth knowledge of the people they were caring for.

We saw staff frequently offering reassurance to people who were anxious. When addressing people, staff spoke clearly and at a pace which was appropriate. The atmosphere during the observation was calm and staff were in attendance in the lounge areas to offer assistance as required.

Throughout the visit, people were helped to move around the home as they wished, with as little or as much assistance as they required. We saw many examples of good practice, for example when people were being moved by hoist or wheelchair, or when people were becoming upset. There were arrangements in place to deal with foreseeable emergencies.

We observed meals being served to people in two lounge areas. If people required assistance this was provided in a discrete manner. Staff sat with those people needing assistance during their meal to maximise engagement and offer support.

People's needs were assessed and care and treatment was planned and delivered in line with their individual care plan. We looked at four plans of care, which included assessments and other documents. We found the plans of care contained appropriate risk assessments and information about how people's individual needs were to be met. We found that risk assessments were completed and reviewed on a regular basis. Examples of assessments included mental capacity, medication, nutrition and falls risk assessments. We also looked at people's daily information records which were completed by the staff. These were generally well completed and included reference to visits made by relatives, people's safety, welfare and daily activity. The care records also showed details of any contact that people had with other healthcare professionals, for example doctors visits.

We looked at a number of incidents recorded within the last six months. We found evidence that the incidents we looked at had been recorded within people's care records and appropriate adjustments and monitoring had been put in place in order to ensure people's safety and welfare.

We spoke with three members of staff, an administrator and the manager. Staff told us they thought the level of care at the service was very good. All of the staff told us how they enjoyed working at Thornton Hill and that they worked together as a team. They said they had time to spend with residents, on a one to one basis, and that this was encouraged by the manager. Staff told us that residents had a choice about their daily lives, given options about getting up or going to bed. Staff told us they were proud of the service they provided.

Despite the positive feedback from visitors and people we spoke with, the provider may find it useful to note that attention should be given to nail care, where people are unable to do this for themselves, as part of the care being delivered.

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 said they felt safe at the home. Everyone we spoke with said they knew who to talk to if they were worried or concerned about anything and that they were confident things would be dealt with properly.

Other evidence

Staff said they had received safeguarding training and records confirmed this. They could also correctly explain what they would do if they suspected abuse. Staff had also received training on mental capacity and deprivation of liberty. This ensured they understand that people should be treated in a way which protected their rights to make decisions about their lives.

We saw evidence that the manager had referred relevant issues to the local authority safeguarding team for investigation. She had also notified us of safeguarding and other incidents which may affect the welfare of those living at the home so that suitable steps could be taken to protect them.

Our judgement

People who used this 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 12: Requirements relating to 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 staff who are fit, appropriately qualified and are physically and mentally able to do their job.

What we found

Our judgement

The provider is compliant with Outcome 12: Requirements relating to workers

Our findings

What people who use the service experienced and told us

People we spoke with told us they liked the staff providing their care.

Other evidence

Three new care staff had been interviewed since the last inspection and the manager was waiting for checks to be made prior to people being offered the job and starting work. We found that staff files contained all the required information. We also saw that the manager had audited the files, for all existing staff.

We saw written evidence that staff supervisions were being carried out. We saw records for May and June 2012. There was evidence to show that all new staff were taken through an induction programme and had shadowing opportunities until they were deemed to be competent before carrying out their roles alone. Staff told us that they had been trained in moving and handling and safeguarding awareness in recent weeks. There was an ongoing training programme, which included mandatory topics. Staff confirmed that they were confident in their skills and abilities and felt well equipped to provide the care needed.

Our judgement

People living at home were supported by safely appointed staff. 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 told us that the manager and staff often asked them for their opinion of the service both formally in surveys and informally on a day to day basis. People particularly liked the meals and the staff working in the home. They made comments such as, 'I like the staff here, they make sure I have everything I need.' One person said, "The staff keep me going, they are always cheerful." People said that the manager was good at listening to any concerns or complaints and that staff did their best to put things right.

Other evidence

The manager stated that she carried out regular quality checks including medication, menus, cleanliness of the home and care plans. Audits were checked by senior managers. We saw records confirming this.

We also saw that people's views were gathered through a survey, which was completed following a settling in period by a new person. This was collated by the organisations head office and if necessary an action plan was developed to respond to people's views. In addition to this the manager and staff told us they regularly sought the views of visitors and people using the service both formally and informally. This showed that people's views were listened to and acted upon.

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

Document purpose	Review of compliance report
Author	Care Quality Commission
Audience	The general public
Further copies from	03000 616161 / www.cqc.org.uk
Copyright	Copyright © (2010) Care Quality Commission (CQC). This publication may be reproduced in whole or in part, free of charge, in any format or medium provided that it is not used for commercial gain. This consent is subject to the material being reproduced accurately and on proviso that it is not used in a derogatory manner or misleading context. The material should be acknowledged as CQC copyright, with the title and date of publication of the document specified.

Care Quality Commission

Website	www.cqc.org.uk
Telephone	03000 616161
Email address	enquiries@cqc.org.uk
Postal address	Care Quality Commission Citygate Gallowgate Newcastle upon Tyne NE1 4PA