

Review of compliance

National Autistic Society Echo Square House	
Region:	South East
Location address:	70 Parrock Road Gravesend Kent DA12 1QH
Type of service:	Care home service without nursing
Date of Publication:	September 2012
Overview of the service:	Echo Square House is a residential home providing care and support for up to three adults with Autistic Spectrum Disorder (ASD). The service is part of a group of homes managed by the National Autistic Society.

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

Our current overall judgement

Echo Square House 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 28 August 2012, observed how people were being cared for, looked at records of people who use services, talked to staff and talked to people who use services.

What people told us

People told us, or indicated that they liked the home and the staff. Comments included "I like living here, it is my home" and "Staff are friendly, they help me with worries".

People we spoke with said there was plenty to do both inside and outside the home. People told us that they went swimming, attended day services and visited their friends. One person told us that they had recently enjoyed a holiday to Yarmouth and another to Spain. People said that they were able to choose what they wanted to do.

We also gathered evidence of people's experiences of the service by reviewing feedback questionnaires completed by people using the service and their representatives. We found that all people said that they were either very happy or happy with the service. Comments included "It is a lovely home" and "We are extremely happy with the service".

What we found about the standards we reviewed and how well Echo Square 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

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

People were cared for by staff who were supported to deliver care and treatment safely and to an appropriate standard.

The provider 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 has 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

People we spoke with told us that they were involved in their care and support. People said that they were able to choose what they wanted to do.

We gathered evidence of people's experiences of the service by reviewing the most recent feedback questionnaires of 2012 completed by people using the service and their representatives. Of the three questionnaires returned by people using the service all three people said that they felt staff respected them, listened to them and that they were given choices. We found that people's relatives had said that they felt happy with the overall involvement provided by the service. Comments included "Our relative's choices are always recognised and respected".

Other evidence

People expressed their views and were involved in making decisions about their care. We saw care plans reflected the preferences of individuals. For example, one person told us that liked classical music and buses; we saw that this had been detailed in their care plan. We saw that people had been asked what was important to them and how they would like staff to support them with things such as cooking and household tasks.

We saw that people were involved in their care reviews. We saw that actions had been agreed and reviewed with people as part of these. People who used the service were invited to regular house meetings where they were able to discuss their care and support with staff. We saw that people who used the service were asked about their opinions of new staff when they first started in the home. The service had also distributed picture questionnaires to encourage people to express their views about their care. Recent questionnaires showed that people were happy with the service and staff.

People' diversity, values and human rights were respected. We saw that care plans included information about people's interests, preferences and life history. This included guidance on how the person preferred to be supported in making certain choices and decisions. This helped staff to understand people's support needs and to provide care that protected the person's rights. The home had also made adaptations to the environment to suit the needs of one individual who had limited vision.

People who use the service were given appropriate information and support regarding their care. The registered manager showed us a copy of a service user guide and information that was available to everyone using the service. This contained comprehensive information about the service, how to contact the office, what to expect and clear guidance on how to make a complaint if people were unhappy. Information was available in a pictorial format so that people could access information in a way that suited them. One person who used the service showed us a copy of the complaints process that they had been given.

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 told us, or indicated that they liked the home and the staff. Comments included "I like living here it is my home" and "Staff are friendly, they help me with worries". One person told us "I do some things by myself...staff do help me with cooking".

People we spoke with told us that there was plenty to do both inside and outside the home. People told us that they enjoyed going to the pub for lunch, swimming and going on holiday. One person told us that staff had taken them to see the London Eye which they had enjoyed. People told us that they attended day services where they took part in various activities that they enjoyed.

Other evidence

People's needs were assessed and care and treatment was planned in line with their individual care plan. The care plans were personalised and gave guidance about individual needs and abilities. Staff were given clear instructions about people's preferences. For example, staff were given instructions about people's preferred support needs around making choices and communication. When we spoke with some staff they were able to demonstrate a good understanding of the individual needs and preferences that mirrored information in people's care plans. We observed that staff communicated well with the people who used this service and demonstrated a good understanding of individual needs and preferences. We saw staff encouraging independence wherever possible and involving people in decisions and activities in the

home

Care and treatment was planned and delivered in a way that addressed people's safety and welfare. There were detailed risk assessments in place for a number of areas including challenging behaviour, going out independently and around a person's restricted vision. There was clear written guidance to help staff give positive behavioural support to people as part of this. These provided clear instructions for staff to follow so that they were able to give safe care. There were also arrangements in place to deal with foreseeable emergencies and these had been developed with people who used the service.

The provider may find it useful to note that one person's care plan did not contain the most up to date version of their support plans and care reviews for staff to access. The registered manager explained that this was because the care plan was being reorganised. The registered manager showed us that staff could access the most up to date versions on the computer. The registered manager confirmed that this would be copied into the person's care plan.

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 we spoke with told us that they felt safe and that they were able to talk to staff if they had any concerns.

Other evidence

People who use the 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.

We saw that people who used the service had been given information, in an easy read format to help them understand what abuse or harm is. This alerted people to different types of abuse and told them what they should do if they experience or witness it. People had been given information, in an easy read format to help them understand their rights in relation to the Mental Capacity Act (2005) and Deprivation of Liberties (DoLs) and how to complain. People had also been given information, in an easy read format to help them understand their rights and how to complain. There were procedures in place to protect people's money.

The service had developed risk assessments for people who used the service to help protect them against the risk of abuse. This included directions for staff to complete the required training and to follow the safeguarding policies and procedures. Staff received training in safeguarding and prevention of abuse. We looked at the training records for

the service and saw that this was up to date for all staff. We saw that some staff had also completed training in the Mental Capacity Act (2005) and managing challenging behaviours to help ensure that they are able to deliver safe and appropriate care that protects the person's rights.

Staff we spoke with demonstrated a clear understanding of the safeguarding policies and procedures including whistle-blowing. They said that they would be confident in promptly reporting any abuse to the manager and felt that their concerns would be effectively acted on.

Our judgement

People who use the 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 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

People we spoke with told us that they thought staff were "Friendly" and "Helpful".

We also gathered evidence of people's experiences of the service by reviewing the service's annual questionnaire that asked people for their views about the care and treatment provided. In the service's most recent annual questionnaire of 2012, relative's comments included "Excellent staff" and "You can see staff enjoy working here, they are all well supported with training".

Other evidence

Staff received appropriate professional development. Records showed that staff had completed training in things such as safeguarding vulnerable people, medication and health and safety. Specialist training had also been completed in things such as autism, managing challenging behaviour and providing care to people with restricted vision. . Staff training is monitored by a training manager to ensure that it is kept up to date.

Staff we spoke with told us that they had plenty of opportunities for training and that they found the courses useful and informative. We saw that there was an induction programme for all new members of staff. Staff told us that they had regular supervisions which were recorded and had their practice observed as part of this. We sampled three staff files and saw that they had all received regular supervision from management.

Staff said that there were regular staff meetings where they could discuss any concerns

or training needs. Staff told us that they were happy working for the service and said that the management was approachable and supportive. We viewed the results from a 2012 questionnaire that had been given to staff who worked in the home. We found that all staff had answered that they felt supported with appropriate training and felt that there were kept up to date.

Our judgement

People were cared for by staff who were supported to deliver care and treatment safely and to an appropriate standard.

The provider 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

We spoke with people using the services but their feedback did not relate to this standard.

We gathered evidence of people's experiences of the service by reviewing the most recent feedback questionnaires of 2012, completed by people using the service and their representatives. Of the three questionnaires returned by people using the service all three people said that they felt staff listened to them. We found that people's relatives had said that they felt happy with their overall involvement and that they were informed of any changes.

Other evidence

People who use the service, their representatives and staff were asked for their views about their care and treatment and they were acted on. We saw that an annual questionnaire was given to people using the service, relatives and staff. We viewed the results for the most recent survey and these indicated an overall level of satisfaction with the service. We saw that the service had analysed these results as part of their annual quality assurance report. We saw that no actions were required as part of this. The service documented regular reviews with people to make sure that they were satisfied with the care from the service. We saw that the service responded appropriately to individual concerns raised as part of this.

The service also had regular quality checks to identify areas that required further improvement. We saw that these had been happening regularly and addressed areas such as safeguarding, risk assessments, medication, service user satisfaction, and staff training. This helped to make sure that the home was able to effectively identify areas for improvement and to document action taken, in order to show that they were providing the right care and support for people. We saw the results for the most recent quality check and saw that no recommendations had been made. The registered manager also showed us that the service carried out regular safety checks in the home and regularly reviewed risk assessments to ensure people were receiving safe and appropriate care. The registered manager also confirmed that she visited people regularly to observe staff practice and ensure people were happy with their care and support. This was confirmed by staff and people who used the service that we spoke with.

There was evidence that learning from incidents/investigations took place and appropriate changes were implemented. Staff recorded incidents and accidents which were then reviewed by management and sent to head office on a monthly basis to analyse for any potential patterns or areas of concern. The registered manager explained that these were rare in the home but were also used as part of people's care reviews to help monitor individual progress.

Our judgement

The provider has 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

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Author	Care Quality Commission
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