

Review of compliance

<p>Care Management Group Care Management Group - 5 Fengates Road</p>	
Region:	South East
Location address:	5 Fengates Road Redhill Surrey RH1 6AH
Type of service:	Care home service without nursing
Date of Publication:	January 2012
Overview of the service:	5 Fengates Road is a care home registered to provide the regulated activity of accommodation and personal care to a maximum number of five people with a learning disability and/ or complex needs. The property is located in a residential area within walking distance of Redhill town centre in Surrey. The home is a semi detached, three-storey property with bedroom accommodation arranged across the

	upper two floors. There is a paved patio area to the rear of the property and limited visitor parking
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Summary of our findings for the essential standards of quality and safety

Our current overall judgement

Care Management Group - 5 Fengates Road 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 21 December 2011, observed how people were being cared for, talked to staff and talked to people who use services.

What people told us

We observed that people using services, who are predominantly younger adults, appeared relaxed and at ease in their surroundings. They were encouraged to express their views and make or participate in making decisions relating to their care and treatment. Records showed people living in the home were busy on a daily basis, taking part in a range of planned and meaningful activities, in line with their individual plan of care. People using the service told us that they were happy with their accommodation and liked the staff that supported them. Some people told us about their interests and how they were supported to keep in regular contact with their family members and friends, which made them happy.

What we found about the standards we reviewed and how well Care Management Group - 5 Fengates Road 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 were involved in decisions about the care provided. Care was based on their individual needs and preferences. People who used the service were treated with respect and their dignity was promoted and protected.

Overall, we found that 5 Fengates Road was meeting this essential standard.

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

The planning and delivery of care is provided in such a way as to meet people's individual needs.

Overall, we found that 5 Fengates Road was meeting this essential standard.

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

There are systems and procedures in place to ensure that people who live in the home are protected from abuse.

Overall, we found that 5 Fengates Road was meeting this essential standard.

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

People using services have their support and welfare needs met by motivated, competent and well supervised staff.

Overall, we found that 5 Fengates Road 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 service has suitable systems in place to assess and monitor the quality of the service that people receive.

Overall, we found that 5 Fengates Road 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

We did not, on this occasion speak to people directly about this outcome area, so cannot report what people using the service said. We observed however that people using the service were encouraged to express their views and make or participate in making decisions relating to their care and treatment. We also saw that people were being spoken with and supported in a sensitive, respectful and professional manner by support staff.

Other evidence

We saw examples of detailed and comprehensive person centred support plans. Care plans had been developed for each individual 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 people, and in some cases their relatives, had signed their care plans to confirm they were happy with them.

The manager confirmed that care 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 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. Individuals had their privacy and dignity upheld. We saw that people were being spoken with and supported in a sensitive, respectful and professional manner.

Records showed that people using services were given a wide range of opportunities to become involved in the local community. The manager said that activities are planned between the person using services and their key worker. The home provides a vehicle to assist with transport to some community based venues, but also encourages the use of public transport with staff support.

Our judgement

People were involved in decisions about the care provided. Care was based on their individual needs and preferences. People who used the service were treated with respect and their dignity was promoted and protected.

Overall, we found that 5 Fengates Road 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

People using the service said they were asked how they wanted to be cared for. One person said, 'I am happy here and very satisfied'.

Other evidence

Arrangements were in place for ensuring that people at this home received effective, safe and appropriate care. There had been no new admissions to the home since our last visit. The manager explained the process that she would follow if a vacancy occurred. A comprehensive pre-admission assessment for any prospective residents would be arranged. Assessments would include input from health and social care professionals previously involved with the persons care and welfare, and include ensuring the persons compatibility with people already living at 5 Fengates Road. The process would build in opportunities for the person and their carers or representatives to spend time at the home before a firm decision to move in was made.

People using the service had comprehensive and detailed plans of care which provided their full social histories, interests and lifestyle choices. Care plans were person centred and based on the home's original assessment of need. People using the service have regular health checks such as dental appointments and well woman checks, as well as attending any specialist healthcare appointments. The home has flexible routines designed to suit each individual. Guidance was provided in care plans about diet and exercise to enable the individual to make healthy living choices where possible.

Care plans were seen to have been updated regularly to reflect any necessary changes

in the person's needs and wishes. Care plans are reviewed regularly with the involvement of the person using services or their representative. Placement reviews also take place with Local Authority commissioning staff.

People using the service were being supported and encouraged to take appropriate risks to promote their independence. There were clear risk management processes in place and individual risk assessments were recorded on all aspects of day to day life and they are updated regularly.

The home was comfortably heated and the environment clean and welcoming. Communal areas had been attractively decorated in preparation for the Christmas and new year period. There was a plentiful supply of food. The operations manager was seen to bring a large tin of chocolates for people using services to share and enjoy during the holiday.

The home has emergency contingency plans for the premises and emergency plans for individuals who may need to be evacuated from the building.

Our judgement

The planning and delivery of care is provided in such a way as to meet people's individual needs.

Overall, we found that 5 Fengates Road 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

We observed that people using the service appeared relaxed and at ease in their surroundings and appeared secure and content with the staff who were supporting them. One person using the service said, "I feel safe living here".

Other evidence

Some people who live in this home have limited communication skills and are therefore reliant on the knowledge of the people who work with them to recognise and take action when they are unhappy or feel unsafe.

Observations during the visit showed that people using the service were secure and content. Signs of well being were observed in their contact with staff. This included laughing, relaxed body language, and seeking physical contact.

The service has written policies covering adult protection and whistle blowing. The provider organisation also has a confidential whistle blowing disclosure line so that staff may contact them if they are concerned about approaching management staff directly. This further secures the safety and welfare of people using the service.

Written safeguarding policies make clear the vulnerability of people who use services, and the duty of staff to report any concerns they may have to a responsible authority for investigation. Relevant checks are carried out on all staff before they begin working in the home.

Staff records demonstrated that all staff received training in the protection of vulnerable adults, known as safeguarding training to ensure the protection of people who use the service. Staff had also received training in the Mental Capacity Act 2005, Deprivation of Liberty Safeguards and managing challenging behaviour.

Our judgement

There are systems and procedures in place to ensure that people who live in the home are protected from abuse.

Overall, we found that 5 Fengates Road 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

Staff spoken with during our visit said they enjoyed working in the home, received sufficient training and support and felt well equipped to fulfil the demands of their role.

Other evidence

On the day of the visit there was sufficient staff on duty to meet the needs of people using the service. Staff rosters had been developed and agreed with support staff for the Christmas holiday period. Some people using services were going to visit family and friends during the festive period. Staffing rosters provided sufficient cover to secure the remaining residents health and welfare, and to make sure that they also enjoyed the holiday.

New staff members receive structured induction as required by the 'Skills for Care' common induction standards. The process includes mandatory training courses such as safeguarding adults, food hygiene, equality and diversity, health and safety and first aid.

All existing staff refresh their mandatory training annually and attend service user specific training courses such as responding appropriately to aggressive or challenging behaviour and epilepsy workshops. New legislation is covered with courses offered in The Mental Capacity Act 2005 and Deprivation of Liberty Safeguards. Records demonstrated that staff training was up to date and training completion certificates were seen on individual staff files.

Staff spoken with thought they were sufficiently well trained to carry out their role.

Records show that all staff receive regular formal supervision and annual appraisal. It was clear that managers from all of the providers' homes work closely together to share good practice and there is an open door policy which enables staff to approach line management for support and guidance.

Our judgement

People using services have their support and welfare needs met by motivated, competent and well supervised staff.

Overall, we found that 5 Fengates Road 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

We did not, on this occasion speak directly to people about this outcome, so cannot report what people using the service said.

Other evidence

The provider has a number of methods for assessing and monitoring the quality of the service, including comprehensive monthly auditing procedures. Satisfaction surveys for people using the service, relatives and other stakeholders take place annually. The results from surveys are analysed. Where necessary action plans are produced to resolve any issues of concern.

Residents meetings are held on a regular basis. People using the service and their carers are encouraged to give feedback regarding the service they receive and to make suggestions about where they think improvements can be made. Staff meetings take place so that staff can have their say about issues important to them. Managers' meetings are held regularly to ensure consistency of service across the provider's homes.

There is a clear management structure with good lines of communication and accountability. Staff were clear about the management and reporting arrangements. The provider's operations manager visits all homes regularly to discuss and act upon any issues of concern and to support the registered managers.

Accidents, near misses and other incidents involving people using the service are reviewed. If trends are identified, the manager said she would expect to review risk assessments and discuss with staff any changes required to the persons plan of care or their treatment plans.

Some identified risks are reported on to the providers organisation, particularly if they relate to the health and safety of the building or the equipment used. It was noted that the provider has plans to refurbish some specific areas of the home during 2012. This included laying a new stair carpet and replacing the flooring in a bedroom. Both of these areas had become aged and in poor condition. Some new furniture and curtains were to be purchased. The first floor bathroom was to be updated. It was discussed with the manager that the ground floor toilet had a gap between the floor covering and the skirting board which has the potential to compromise the home's infection control policy. The manager spoke of her intention to have this matter rectified.

The health and safety of people who live in the home is consistently promoted through good health and safety policies and regular health and safety audits. Regular safety tests are carried on all equipment and installations. There is a fire safety risk assessment in place. Fire procedures are written and provided in pictorial formats and staff are aware of evacuation procedures.

Our judgement

The service has suitable systems in place to assess and monitor the quality of the service that people receive.

Overall, we found that 5 Fengates Road 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

Document purpose	Review of compliance report
Author	Care Quality Commission
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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