

# Review of compliance

<p>MCCH Society Limited Howard Goble House</p>	
<p><b>Region:</b></p>	<p>London</p>
<p><b>Location address:</b></p>	<p>Harland Avenue Sidcup Kent DA15 7NU</p>
<p><b>Type of service:</b></p>	<p>Care home service without nursing</p>
<p><b>Date of Publication:</b></p>	<p>May 2012</p>
<p><b>Overview of the service:</b></p>	<p>Howard Goble House is registered to provide accommodation for up to 12 people requiring personal care. It provides 24 hour care for older people with learning disabilities, including dementia care.</p> <p>Howard Goble House opened in 2006 and provides purpose built residential care facilities. The service is provided over two floors and there is a lift. People</p>

	are accommodated in single bedrooms with en suite bathroom, and have access to communal lounge, kitchen and dining areas, laundry and garden.
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# Summary of our findings for the essential standards of quality and safety

## Our current overall judgement

**Howard Goble House was meeting all the essential standards of quality and safety but, to maintain this, we have suggested that some improvements are made.**

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 20 March 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

During our visit on 20 March 2012 people who used the service told us the staff were nice, that it was all right living at Howard Goble House, and also that the food was all right.

Overall we observed staff engaging with people in a warm and supportive way, enabling them to take part in activities of daily living, to pursue their own interests, and to participate in activities in the community. The atmosphere in the home was comfortable and relaxed. However, we also observed a few instances when people were treated in a way that undermined their dignity.

In response to the annual feedback questionnaire in 2011, relatives, family friends and an advocate said staff were respectful and provided a personalised approach to people's care. They also said that people's health care needs were met, and that they were made to feel welcome and were treated courteously whenever they visited or phoned the home. Their comments indicated that people using the service were happy, settled, comfortable and content. Also, that they were in good communication with staff, and any concerns they raised with staff would be addressed. Comments received were positive about the care provided by staff and the improvements seen in people's well being.

### What we found about the standards we reviewed and how well Howard Goble 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**

Overall we found that Howard Goble House was meeting this essential standard but, to maintain this, we suggested that some improvements were made. People were supported to be involved in planning and reviewing their care and support, and their independence was supported. During our visit we observed people being responded to as individuals and with warmth; however we also observed a few instances when people were treated in a way that undermined their dignity.

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

Overall we found that Howard Goble House was meeting this essential standard. Care and support was planned to meet individuals' needs and was delivered in a way that took in to account their preferences and choices.

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

Overall we found that Howard Goble House was meeting this essential standard. Action was taken to identify and prevent abuse from happening in the service.

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

Overall we found that Howard Goble House was meeting this essential standard. Staff received supervision and were provided with opportunities for learning and development so that they could carry out their roles competently and keep their skills up to date.

**Outcome 16: The service should have quality checking systems to manage risks and assure the health, welfare and safety of people who receive care**

Overall we found that Howard Goble House was meeting this essential standard. Information about the quality of the service people received was collected in different ways and was being used to maintain or improve the standard of services provided.

**Actions we have asked the service to take**

We have asked the provider to send us a report within 7 days of them receiving this report, setting out the action they will take to improve. We will check to make sure that the improvements have been made.

Where we have concerns we have a range of enforcement powers we can use to protect the safety and welfare of people who use this service. When we propose to take enforcement action, our decision is open to challenge by a registered person through a variety of internal and external appeal processes. We will publish a further report on any action we have taken.

**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

There are minor concerns 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 during our visit on 20 March 2012 told us about how they were supported to take part in the daily activities of living at Howard Goble House. For example, they could help with the housework, which they enjoyed, and staff helped them to cook their meals. Another person told us about being able to see their family at the weekend if they wanted to.

We observed staff engaging with people using the service in a warm and supportive way. Staff knew the people they worked with well and made efforts to engage them in activities that reflected their interests and preferences. However, on one occasion a member of staff spoke to us about a person as if the person was not there, and on a different occasion we observed a member of staff speaking to a person as if they were a child. During a medication round we observed a member of staff treating a person as if they were an object, saying "we'll get you done next".

In response to the annual feedback questionnaire in 2011, relatives, family friends and an advocate said staff were respectful and provided a personalised approach to people's care. They felt that the person's bedroom reflected their interests and personality. They said they were made to feel welcome and were treated courteously whenever they visited or phoned the home, and were kept informed of relevant matters

affecting people using the service.

### **Other evidence**

There was a clear admission process for people considering coming to live at Howard Goble House. It included a comprehensive assessment of their needs and consideration of their preferences and choices in determining whether or not the service was right for them. People were supported to visit the home as part of deciding to live there.

The records of people who used the service we saw showed that their support and care plans were routinely reviewed on a regular basis as well as when the need for adjustments arose, and that other health and social care professionals were also involved in planning and delivering people's care. Every person using the service had a relative, family friend, or advocate supporting them, and these stakeholders were involved in reviewing and planning people's care.

People were supported to pursue their own interests, to engage in activities in the community, and to take part in the smooth operation and running of the home, for example through service user meetings.

The Service User Guide provided people with information about how the service aimed to support people and the care it provided; about the staff working at the home, including photographs of them; and about how to make a complaint.

People were supported in their religious observances and in meeting their cultural needs.

### **Our judgement**

Overall we found that Howard Goble House was meeting this essential standard but, to maintain this, we suggested that some improvements were made. People were supported to be involved in planning and reviewing their care and support, and their independence was supported. During our visit we observed people being responded to as individuals and with warmth; however we also observed a few instances when people were treated in a way that undermined their dignity.

## 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 we spoke with during our visit told us it was all right living at Howard Goble House and that the food was also all right.

We observed staff supporting people to take part in activities at a pace that suited the individual and in ways that demonstrated a positive regard for them. The atmosphere in the home was comfortable and relaxed.

In response to the annual feedback questionnaire in 2011, relatives, family friends and an advocate said people's health care needs were met.

##### Other evidence

The records of people who used the service that we saw showed that their care and support plans centred on them as individuals and considered their immediate and longer term needs. The plans were developed with them and with those acting on their behalf, such as relatives and social workers. Risks were identified and measures taken to control the risk of exposure or injury. Staff we spoke with understood that such measures should support people to be as independent as possible while still keeping them safe.

We also saw that each person using the service had a key worker and health facilitator. The key worker supported the person to keep their plans under review to ensure they continued to enable them to do what they wanted to. The health facilitator supported people to complete their health action plan. Staff met regularly with the multidisciplinary

learning disability team to review the care provided to people who had dementia or whose behaviour was challenging.

People using the service were registered with a GP and a range of health care professionals and services were regularly involved in meeting people's needs.

Procedures were in place for reporting incidents and for acting upon the recommendations of safety and risk alerts and notices.

There was a business continuity plan to deal with foreseeable emergencies such as an influenza pandemic or adverse weather.

There was a strong smell of urine in one of the bedrooms and in the upstairs lounge. We raised this with the registered manager as a care management issue. She told us that people had been referred to the continence advisor and that continence support was in place for them. She also said carpeting in some areas had been replaced with more suitable flooring and that cleaning schedules had been improved. She was also able to bring forward the replacement of flooring in other areas and to arrange for furniture to be deep cleaned with a suitable cleaning product.

#### **Our judgement**

Overall we found that Howard Goble House was meeting this essential standard. Care and support was planned to meet individuals' needs and was delivered in a way that took in to account their preferences and choices.

## 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

One of the people we spoke with told us they had been kicked by another person using the service. We discussed this with staff who demonstrated that they had responded appropriately to the incident.

We observed staff taking action to protect people from other people's challenging behaviour.

In response to the annual feedback questionnaire in 2011, relatives, family friends and an advocate said they were satisfied with the service provided at Howard Goble House. Their comments indicated that people using the service were happy, settled, comfortable and content. One relative wrote; "The staff are very caring and we don't have to worry about [the person's] welfare."

##### Other evidence

Staff had received safeguarding training. They were able to recognise signs of different forms of abuse and to raise any suspected abuse with their managers.

Howard Goble House had a safeguarding policy. Detailed records were kept of any incidents of actual or suspected harm and concerns were reported to the local authority. None had been progressed to a local authority safeguarding investigation in the last 12 months.

The home had a whistleblowing policy. Staff were aware of their professional duty to

report any concerns they had about people being put at risk.

Staff were subject to a police check via the Criminal Records Bureau (CRB) on commencing their employment and every three years thereafter.

Some of the people using the service sometimes behaved in a challenging way. Staff had worked with the provider's behaviour support team to identify triggers and develop guidelines for responding to, and reducing this behaviour. Physical restraint was not used.

The provider acted as appointee for people using the service who were unable to manage their own financial affairs. Staff helped people manage cash for day to day expenses. Procedures were in place for the management of this cash to ensure that people's money was accounted for properly.

Staff were not allowed to accept gifts from people using the service, nor were they allowed to be involved in drawing up a person's will, nor be an executor or a beneficiary of a person's will.

### **Our judgement**

Overall we found that Howard Goble House was meeting this essential standard. Action was taken to identify and prevent abuse from happening in the service.

## 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

People we spoke with told us staff were nice.

In response to the annual feedback questionnaire in 2011, relatives, family friends and an advocate were positive in their comments about the care provided by staff and the improvements seen in people's well being.

##### Other evidence

All but two of the support workers at Howard Goble House had an NVQ qualification in care to at least level 2. The remaining support workers had started a course of study in October 2011 leading to a formal qualification. Senior support workers were qualified to level 3 and the registered manager had level 4 and management qualifications.

Staff had received supervision approximately every six weeks since the beginning of the year. Annual appraisals for 2011 had been completed for each member of staff. Staff we spoke with felt well supported by their supervisor and the registered manager.

There was a programme of mandatory and refresher training including, for example, safeguarding of vulnerable adults and infection prevention and control. Attendance at training was recorded and monitored.

Staff had access to additional training to support them in their role, for example dementia and challenging behaviour.

There was a comprehensive induction programme for new members of staff.

**Our judgement**

Overall we found that Howard Goble House was meeting this essential standard. Staff received supervision and were provided with opportunities for learning and development so that they could carry out their roles competently and keep their skills up to date.

## 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

In response to the annual feedback questionnaire in 2011, relatives, family friends and an advocate said they were made to feel welcome and were treated courteously whenever they visited or phoned Howard Goble House. Their comments indicated that they were in good communication with staff, and that any concerns they raised with staff would be addressed.

##### Other evidence

The home collected information about the service in order to review and improve the quality and safety of the care and support it provided. Information was gathered through routine checks and analysis of incidents, as well as quarterly audits by the provider's service development manager. Audit action plans were followed up.

Staff told us about how they gained feedback from people using the service through key worker meetings, annual reviews and service user meetings. Relatives, family friends and advocates took part in an annual survey.

We saw examples of the ways in which information was used to maintain or improve the standard of services provided by the home, for example around record keeping; and to protect people against the risks of inappropriate or unsafe care and treatment, for example incident analysis leading to a care plan review.

##### Our judgement

Overall we found that Howard Goble House was meeting this essential standard.

Information about the quality of the service people received was collected in different ways and was being used to maintain or improve the standard of services provided.

## Action we have asked the provider to take

### Improvement actions

The table below shows where improvements should be made so that the service provider **maintains** compliance with the essential standards of quality and safety.

Regulated activity	Regulation	Outcome
Accommodation for persons who require nursing or personal care	Regulation 17 HSCA 2008 (Regulated Activities) Regulations 2010	Outcome 01: Respecting and involving people who use services
	<p><b>Why we have concerns:</b></p> <p>Overall we found that Howard Goble House was meeting this essential standard but, to maintain this, we suggested that some improvements were made. People were supported to be involved in planning and reviewing their care and support, and their independence was supported. During our visit we observed people being responded to as individuals and with warmth; however we also observed a few instances when people were treated in a way that undermined their dignity.</p>	

The provider must send CQC a report about how they are going to maintain compliance with these essential standards.

This report is requested under regulation 10(3) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010.

The provider's report should be sent to us within 7 days of the date that the final review of compliance report is sent to them.

CQC should be informed in writing when these improvement actions are complete.

# 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

<b>Document purpose</b>	Review of compliance report
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