

Review of compliance

Parkcare Homes (No 2) Limited St Martins Road	
Region:	South West
Location address:	59 St Martins Road Bristol BS4 2NH
Type of service:	Care home service without nursing
Date of Publication:	June 2012
Overview of the service:	St. Martins Road is a care home for up to six people. The home provides support to people with learning disabilities and to people who have a diagnosis which falls within the autistic spectrum.

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

Our current overall judgement

St Martins Road 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 18 May 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

We met with the two people who were living at the home. Neither person used verbal communication; we saw how staff interacted with people and observed activities in order to gain an insight into people's experiences.

Staff members were friendly and informal, whilst treating people with respect. People were encouraged by staff to communicate their needs and to make choices. One person for example used a system of pictures and symbols when choosing between different activities.

People received support to maintain contact with their relatives and with the local community. They visited a nearby shopping centre and one person attended college courses. We were told how people's diverse cultural needs were being met; this included, for example, visits to specialist food shops and to a hairdresser in another part of the city.

People's independence was being promoted. Staff were aware of people's preferred routines and the order in which they liked things to be done.

What we found about the standards we reviewed and how well St Martins 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 treated with respect and supported with making choices. Staff had got to

know people as individuals and they helped people to express their views.

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 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 the service were protected from the risk of abuse. Procedures were in place which helped to ensure that any concerns about abuse were followed up appropriately.

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 who used the service were cared for by staff who received appropriate support and training for their roles.

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 suitable systems in place to monitor the quality of service that people received and to manage risks to their health, safety and welfare.

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's privacy and dignity were being respected. The manager and staff explained the purpose of our visit and sought to involve people, for example when we were looking around the home. Staff were friendly and informal, whilst treating people with respect. People had been supported to personalise their rooms with pictures and other belongings. We were told that a "low arousal" environment was important to people; the communal areas had been decorated in an uncluttered and neutral way which reflected this.

People were encouraged by staff to communicate their needs and to make choices. During lunch we saw one person being asked if they were enjoying their meal and if they would like second helpings. They communicated their answer by using a file which contained a range of pictures and symbols. Staff said that the person used this file at other times, such as when they were asked to choose between different activities. Staff told us they helped one person to decide what to wear each day by showing them a selection of their clothes to choose from.

People maintained contact with their relatives and with the local community. One person went to college on two days a week. The home was within walking distance of a shopping centre, cafes and other facilities. Staff said that these were used on a

regular basis. We were told about the support that people received with visiting their family members.

Other evidence

Each person had a file in the home which contained details of their personal needs. Other information had been recorded, such as family contacts, important dates, and people's likes and dislikes. This helped to ensure that staff got to know people as individuals and could provide support to people in different areas of their lives. For example, details of relatives' birthdays were being kept on file so that people could be supported with sending cards at the right times.

We met with members of the staff and management team who spoke knowledgeably about people's individual needs and how they liked to be supported.

The home's records included a report from an 'Autism advisor' who had recently spent time observing people's activities and their relationships with staff. Feedback from the advisor was mostly very positive, including 'good use of pictures and symbols' and 'excellent communication and interactions at breakfast'. Some recommendations had been made about ways in which communication could be further developed and enhanced.

Our judgement

People were treated with respect and supported with making choices. Staff had got to know people as individuals and they helped people to express their views.

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 looked well supported with their personal care and appearance. The manager told us that good links had been made with outside professionals to ensure that people's healthcare needs were met. A physiotherapist came to the home on the day we visited in order to assess one person's needs. We were told about the involvement of a speech therapist and an occupational therapist. One person also saw a psychiatrist from the local community team.

Some services, such as a GP surgery were within walking distance of the home. We met with one person and were told they visited a hairdresser who was not local; this was because they wanted a hairdresser who was experienced in producing a particular style.

We saw staff being attentive to people during the day and responding positively to their needs. At lunchtime, people were encouraged to manage independently, but staff were on hand to prompt and to provide assistance with eating when needed.

Other evidence

Staff members told us about the care and support that people received in the home. Their descriptions of the support they provided showed that a consistent approach was being taken and people's independence was being promoted. Staff were aware of people's preferred routines and the order in which they liked things to be done.

Staff said that people managed a lot of care tasks without physical assistance, but they

provided support through prompting and encouragement. Each person had their own room with an en-suite toilet and a bath or shower where personal care could take place in private.

People's personal records contained information about their individual needs and how these were to be met. Care and support plans had been developed over time, with action taken in recent weeks to produce plans in relation to daily living activities. We saw a number of core support plans and risk assessments in place. The plans highlighted the action to be taken by staff to ensure that support was provided in a consistent way. We read for, for example, about people's needs in relation to communication, relationships and personal care.

Additional care plans had been produced in connection with people's individual activities and routines. These included, for example, preparing simple meals, using the stairs safely and the use of the trampoline. A system was in place for reviewing and evaluating the support plans.

The two people who used the service had lived at the home for between four and six months. The manager told us that review meetings had taken place with people's placing authorities and these had confirmed that people's needs were being met at the home. People's files contained records of assessments and other information received from the placing authorities prior to people moving to the home.

People's files included records in relation to their healthcare and contact with outside professionals. We read for example about a visit that had been made to the home by an occupational therapist. Health action plans were being completed and family members had been asked to contribute to these with their knowledge of the person.

Our judgement

People experienced care 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

We saw people using the accommodation and moving around the home without restrictions. People used the kitchen with the presence of staff and had access to the different communal areas.

The people who lived at St. Martins Road did not convey their feelings in words. Staff told us they were aware of how people expressed concerns and recognised when a person's behaviour was out of character for them. Information about the different ways in which people showed emotions, such as 'being unhappy', was recorded in their individual files.

Other evidence

The manager was aware of the 'deprivation of liberty safeguards' and the need to ensure that a person's freedom was not being restricted when it was not in their best interests and without the correct procedures having been followed. They told us that nobody's liberty was currently being restricted. A restriction on one person's liberty had previously been approved, but was no longer in place; we had been told about this at the time.

The manager told us that no form of restraint was being used. Training in 'breakaway' techniques was being provided for staff. Staff said they did not get involved in any form of physical intervention before they had received this training.

The provider had produced guidance about the reporting of abuse. The staff members

we met with were familiar with the term 'safeguarding'. This refers to the action that is taken so that people who may be vulnerable can live a life that is free from abuse and neglect. Staff members said they were familiar with the 'No Secrets' booklet which summarises the local authority's procedures for safeguarding adults. They were aware of allegations and incidents that would need to be reported to ensure that people were protected from harm. Safeguarding was included in the provider's programme of staff training.

We saw in the minutes of staff meetings that staff had discussed issues relating to abuse and safeguarding. This helped to ensure that staff maintained a good understanding of what constitutes abuse and were consistent in their approach.

Our judgement

People who used the service were protected from the risk of abuse. Procedures were in place which helped to ensure that any concerns about abuse were followed up appropriately.

The provider was meeting this standard.

Outcome 14: Supporting staff

What the outcome says

This is what people who use services should expect.

People who use services:

* Are safe and their health and welfare needs are met by competent staff.

What we found

Our judgement

The provider is compliant with Outcome 14: Supporting staff

Our findings

What people who use the service experienced and told us

We observed positive interactions between staff and the people who used the service. Relationships appeared friendly and respectful. At lunch time, staff members and the people who used the service had their meal together. The staff assisted people in an appropriate and unhurried manner.

Other evidence

A planned period of induction was in place for new staff. Staff members told us that their induction had prepared them well for their work and they had received the support they needed.

Induction was part of a programme of staff training and development called 'Foundations for Growth'. As part of this programme, staff members were required to undertake training in a range of subjects. The majority of topics were covered through 'e learning', although some subjects such as first aid and moving and handling were arranged using an external trainer.

Detailed spreadsheets were available to the manager so that they could monitor the amount of training that each staff member had undertaken. We saw examples of the records which showed that staff members had completed training in a range of subjects relating to health and safety, as well as other topics such as equal opportunities and the mental capacity act.

There were some gaps in training where certain courses had not been completed by staff. The manager told us that this was being followed up with the individuals

concerned. Staff said that they would not undertake a specific task, such as administering medicines, before they had received the appropriate training.

Staff told us that meetings and shift handovers were taking place and these were useful in enabling information to be passed and matters discussed within the team. The home's manager and deputy manager undertook the supervision of staff and met regularly with staff members on a one to one basis.

Our judgement

People who used the service were cared for by staff who received appropriate support and training for their roles.

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

The people who used the service had a high level of needs and did not express their views verbally about the service. One person was able to communicate and make choices using a selection of symbols and pictures. The manager told us that they were receiving good feedback from people's relatives and other parties.

Other evidence

St Martins Road opened in 2011 after the property had undergone a major refurbishment in order to provide people with a good standard of accommodation. The home looked well maintained and decorated when we visited. The garden was being worked on at the time and some new features were being created.

Procedures were in place for reducing risks to people's health, welfare and safety. We saw that cleaning materials and medicines were safely locked away. The manager told us that health and safety was being monitored through regular audits. Records were maintained and a range of audits were being carried out, covering such things as the condition of beds and the operation of window restrictors.

Staff members told us that risks to people were being well managed. One person said they did "a quick mental risk assessment" in response to situations which had not arisen before and been formally assessed.

Arrangements were being made for monitoring the quality of the service and identifying any improvements that were needed. The manager carried out a self-assessment and

produced a quality monitoring report. The assessment included a section on 'respect for equality and diversity'; the manager told us about work that was being undertaken with the staff team in connection with this.

The provider used questionnaires for obtaining feedback about their services. A compliance manager and a regional manager carried out regular monitoring visits; areas for improvement were being identified and action plans had been produced as a result of the visits. The manager had completed a number of improvements in the month prior to our visit.

Our judgement

The provider had suitable systems in place to monitor the quality of service that people received and to manage risks to their health, safety and welfare.

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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