

Review of compliance

Parkcare Homes (No 2) Limited Weir End House

Region:	West Midlands
Location address:	Glewstone Ross-on-Wye Herefordshire HR9 6AL
Type of service:	Care home service without nursing
Date of Publication:	February 2012
Overview of the service:	Weir End House is a care home for people with learning disabilities providing accommodation and personal care for up to thirteen adults.

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

Our current overall judgement

Weir End House 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 27 January 2012, checked the provider's records, looked at records of people who use services, talked to staff, reviewed information from stakeholders and talked to people who use services.

What people told us

When we visited Weir End House we spoke to the registered manager and three of the staff. The majority of people who lived at the home were attending activities at a local community hall so we went there to meet them. We saw that people were enjoying games at the end of the day.

While visiting the hall we spoke in private with two people who lived at the service. They told us they were happy living at the home, they trusted the staff and were able to tell the manager if they had any concerns. One person told us "I like the staff, they have helped me a lot since I moved in". Both people told us they enjoyed the activities they took part in, such as swimming. One person told us "The staff help me stay in touch with my family and I speak to them in private on the telephone".

The registered manager told us that people took part in daily living tasks and had responsibility for things that interest them. This meant that one person looked after the donkey. The registered manager told us that some people who lived at the home had got voluntary jobs and some were supported to carry these out.

Five people who lived at the services gave us permission to look at their bedrooms. These had been decorated and furnished to reflect their personal preferences.

We met the staff who worked at Weir End House. The staff we spoke with told us about the care and support needs of the people who lived at the home. We saw how staff at the community hall interacted with people who use the service in a friendly, courteous and respectful manner.

The registered manager told us the home was fully staffed. The people we spoke to who lived at the service liked the staff and were pleased that staff did not leave very often.

People who lived at the service had given their views and ideas for improvements at the, "Your Voice" group meeting which had been held each month. People had been provided with information at these meetings in their preferred method of communication. This had helped people take part in discussions about their right to vote at local elections and how people were going to keep a new vehicle clean and tidy.

What we found about the standards we reviewed and how well Weir End House was meeting them

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

People are receiving effective and appropriate care and support that meets their personal needs.

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

People are being protected from the risk of abuse and are having their rights respected.

Outcome 10: People should be cared for in safe and accessible surroundings that support their health and welfare

People who use the service are being provided with a safe and well maintained home.

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

People who use the service are supported by a staff team who are provided with appropriate training and supervision and who feel supported by senior colleagues in carrying out their role.

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

People who use the service are being protected against the risks of inappropriate or unsafe care by effective quality and health and safety monitoring systems.

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 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

We visited the majority of people who lived at the home while they were attending activities at a local community hall. We saw people enjoying games at the end of the day. The registered manager said the hall was hired by the home two days a week as a base where people took part in games, socialising and meal preparation.

While visiting the hall we spoke in private with two people who lived at the service. They told us they were happy living at the home, they trusted the staff and were able to tell the registered manager if they had any concerns. One person told us "I like the staff, they have helped me a lot since I moved in". Both people told us they enjoyed the activities they took part in, such as swimming. One person told us "The staff help me stay in touch with my family and I speak to them in private on the telephone".

The registered manager told us that people took part in daily living tasks and had responsibility for things that interest them. This meant that one person looked after the donkey. The registered manager told us that some people who lived at the home had got voluntary jobs and some were supported to carry these out.

Other evidence

The registered manager told us new care plans had been introduced in May 2011. This had been based on a full re-assessment of people's wishes, needs and abilities. All the information in the care plans had been completed with the full involvement of the people who lived at the home. The way the information had been written showed that people had been viewed as individuals. Not all records that we looked at had been

dated. It had not been clear which member of staff had completed the information or what action had been taken as a result of an event, such as a fall.

We looked at the care of one person and at how their care had been provided and managed. The care plans for this person contained information about their preferences such as their daily routines, meals, activities and communication needs. The records contained risk assessments and guidance about the actions staff were to take to keep the person safe while still promoting their independence.

This person's health records showed that appointments had been arranged for routine preventative treatment such as dental check ups and an annual well person check. Changes in the person's physical needs had been addressed and external professionals had been consulted and a review had been planned. Monthly evaluations of the care plan had been carried out.

The care plan had not shown clearly what the person's goals and ambitions had been for the short and long term. The registered manager told us they were aware of people's wishes and plans. This meant that people who liked to go shopping each week were supported to do this. Those who wanted to plan people holiday had been supported to do this. The registered manager told us that person centred planning meetings had not been held, but they would look into the availability of the Herefordshire Council facilitator.

The registered manager told us that no physical restraint techniques had been used with people who lived at the home. They told us that staff had been trained in how to respond to people's behaviour that challenged. A team leader told us that staff had been able to calm situations verbally when someone had become upset and there had been no need for physical intervention.

The registered manager told us people's medication had been reviewed regularly by their GP or their psychiatrist. They told us the supplying pharmacist carried out an audit in November 2011 and that no recommendations had been made.

Assessments had been completed about a person's ability to be involved in looking after their own medication and finances. The registered manager agreed to review each of the assessments to see if people who lived at the home could keep their medication and money in their bedrooms or be involved in their own banking.

Our judgement

People are receiving effective and appropriate care and support that meets their personal needs.

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

The registered manager told us there had not been any safeguarding concerns raised in the last year and no complaints had been received. The staff we spoke with had been clear about their duty to report any concerns and they were confident the registered manager would take any concerns very seriously.

Other evidence

The registered manager confirmed that all staff had attended training about safeguarding adults. Annual refresher training had now been provided through the provider's electronic learning system. We looked at a quality assurance report from Herefordshire Council dated October 2011. The report had focused on safeguarding and the findings had been positive. The registered manager told us that they had addressed the recommendations that had been made.

Our judgement

People are being protected from the risk of abuse and are having their rights respected.

Outcome 10: Safety and suitability of premises

What the outcome says

This is what people should expect.

People who use services and people who work in or visit the premises:

* Are in safe, accessible surroundings that promote their wellbeing.

What we found

Our judgement

The provider is compliant with Outcome 10: Safety and suitability of premises

Our findings

What people who use the service experienced and told us

Five people who lived at the services gave us permission to look at their bedrooms. These had been decorated and furnished to reflect their personal preferences. The registered manager told us that people who had a shared bedroom had been offered single rooms but had refused.

Other evidence

The registered manager told us there had been good maintenance services and arrangements in place for periodic redecoration. The large communal lounge was due to be refurbished. People were going to be consulted about the new lounge furniture. At the time of our visit people who lived at the home had an armchair that they had chosen and the registered manager had been aware that people may not want this changed. The fire equipment had been serviced and fire evacuation drills had been held weekly.

The home looked well maintained and was free from unpleasant odours. A housekeeper had been employed to help people who lived at the home to keep the house clean.

Our judgement

People who use the service are being provided with a safe and well maintained home.

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 met the staff who worked at Weir End House. The staff we spoke with told us about the care and support needs of the people who lived at the home. We saw how staff at the community hall interacted with people who use the service in a friendly, courteous and respectful manner.

The registered manager told us the home was fully staffed. The people we spoke to who lived at the service liked the staff and were pleased that staff did not leave very often.

Other evidence

Staff told us they had been supported by senior staff to help them understand how to meet people's needs and give people the support they wanted. Senior staff had been positive about the way the registered manager shared responsibility and felt the home had been well managed and for the best interests of people who lived at the service.

The registered manager told us that the provider had recently introduced a computer based training system. They had assigned one worker with good computer skills to support the staff to become familiar with the system. This had resulted in staff feeling positive about the system. Setting up the new system had led to a delay in some staff attending annual refresher courses but a plan had been put in place to address this.

Locally available courses had been accessed in areas such as health facilitation, mental health and autism. During January 2012 the organisation had provided a course to teach staff about helping people to calm down when they became angry and

may be aggressive.

Each staff's training needs had been monitored through the supervision sessions they had with their line manager every two months. The registered manager told us annual appraisals had been due to start. Staff meetings had been held regularly and staff told us these were helpful and they felt able to share their views and ideas.

Our judgement

People who use the service are supported by a staff team who are provided with appropriate training and supervision and who feel supported by senior colleagues in carrying out their role.

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

A team leader told us that people were consulted every week about the menu choices for the week ahead. Each person's main meal choice had then been shown on the menu with their name. People who lived at the service had been reminded on the day that it had been their meal choice.

People who lived at the service had given their views and ideas for improvements at the "Your Voice" group meeting which had been held each month. People had been provided with information at these meetings in their preferred method of communication. This had helped people take part in discussions about their right to vote at local elections and how people were going to keep a new vehicle clean and tidy.

Other evidence

The registered manager told us there had not been any serious incidents in the last year, so no notifications had been sent to us. They said annual care review meetings with people who lived at the service and their representatives had been held and these had provided an opportunity for feedback to be given and ideas shared about how the service could be improved.

A senior manager within the organisation had carried out monthly monitoring visits to check the standards within the home. We looked at the reports from these visits. Where these showed areas for improvement an action that had been put in place. The registered manager had been required by the provider to complete quality assurance audits. We saw that these had included areas such as health and safety and care

planning.

The registered manager showed us a report issued following a quality assurance visit carried out by Herefordshire Council in October 2011. The findings had been positive and the registered manager told us they had addressed the recommendations that had been made.

Our judgement

People who use the service are being protected against the risks of inappropriate or unsafe care by effective quality and health and safety monitoring systems.

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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