

Review of compliance

Counticare Limited Grosvenor Court	
Region:	South East
Location address:	15 Julian Road Folkestone Kent CT19 5HP
Type of service:	Care home service without nursing
Date of Publication:	June 2012
Overview of the service:	Grosvenor Court is a privately owned care home providing residential care for up to 17 people with a learning disability. The home is a detached property. The grounds include a private walled garden and a parking area. The property is located in a quiet residential area in Folkestone and is within easy reach of facilities such as health centres, shops, recreational facilities, and the company's day centre.

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

Our current overall judgement

Grosvenor Court 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 to check whether Grosvenor Court had taken action in relation to:

Outcome 04 - Care and welfare of people who use services

Outcome 13 - Staffing

Outcome 14 - Supporting staff

Outcome 16 - Assessing and monitoring the quality of service provision

How we carried out this review

We reviewed all the information we hold about this provider, carried out a visit on 16 May 2012, observed how people were being cared for, 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

We used a number of different methods to help us understand the experiences of people using the service, because the people using the service had complex needs which meant they were not able to tell us their experiences. So we observed the interactions between the people and the staff. We observed how people responded and reacted with the staff and we observed to see if people indicated they were happy, bored, discontented, angry or sad.

Each person who needed support to make their needs known had a communication assessment. This contained descriptions of how people communicated when they were frightened, sad, happy, and unwell. There were also explanations about the meanings of facial expressions, some noises and gestures. People who were able to speak were encouraged to do so.

The people we saw indicated that they were happy at the home. They were relaxed. They were participating in activities which they indicated that they enjoyed.

We saw that people were relaxed in the company of staff. They were happy to approach staff to express what they wanted and we saw staff respond in a caring and positive way.

The staff we spoke to had knowledge and understanding of people's needs and knew people's routines and how they liked to be supported.

Staff told us they would like to be able to spend more one to one time with people to enhance their lives more.

What we found about the standards we reviewed and how well Grosvenor Court was meeting them

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

People experienced care, treatment and support that met their needs and protected their rights.

The provider was meeting this standard.

Outcome 13: There should be enough members of staff to keep people safe and meet their health and welfare needs

There were enough qualified, skilled and experienced staff to meet people's needs.

The provider was meeting this standard.

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

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

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 an effective system in place to identify, assess and manage risks to the health, safety and welfare of people using the service and others.

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 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 contributed to their assessments to find out their needs and wishes about a range of subjects including their health, social life and personal goals.

People were supported to go out at different times. People liked to do different activities. Some of these were provided in the home, like arts and crafts, puzzles and games. Some people enjoyed the sensory room at the home. Others went to the company's day centre on a regular basis.

Other evidence

Our inspection of 25 November 2011 found that people could not always be confident that they would always be consistently supported to do what they wanted in a way that was individual and right for them.

At this inspection we found that peoples' needs were assessed and care and treatment was planned and delivered in line with their individual care plan.

All the people living in the home needed different levels of support with their personal care and health.

Each person had a written plan of care, which outlined all their personal and health care, social and emotional needs and how they preferred them to be met.

Everyone using the service had a needs assessment which formed the basis of their

plan and this was reviewed by the staff every month and more often if their needs changed.

There were risk assessments in place for people which identified the things that posed a risk to them such as developing pressure areas. We saw information on how to keep this risk to a minimum. We found that a person was at risk from choking. There was clear guidance in place on how to try and prevent this and the assessment now said exactly what to do if the person did start to choke. The manager and staff on duty were able to explain the procedure they would follow.

People's health needs were met by local community services. Staff supported people to attend health care appointments and made sure that if there was a change in their health that people were able to access the health specialists they needed.

We spoke to some staff from the specialist services in the local community. They told us initially they had put a lot of work into the service to make sure the individual programmes for people that had been devised were being followed and implemented. They said that they now felt more positive about the service and that the staff now understood what they had to do to make sure people's health needs were being met in a way that suited them best. Other specialists told us that the staff were very good at contacting them if they were concerned about anybody or needed any specialist advice or support.

This means that care and treatment was planned and delivered in a way that ensured people's safety and welfare.

The staff team provided activities in the home including games and beauty sessions. They had introduced weekly massages and bingo sessions from outside sources. Different people went out most days to different places.

Our judgement

People experienced care, treatment and support that met their needs and protected their rights.

The provider was meeting this standard.

Outcome 13: Staffing

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 sufficient numbers of appropriate staff.

What we found

Our judgement

The provider is compliant with Outcome 13: Staffing

Our findings

What people who use the service experienced and told us

We were not able to speak with people using the service because people using the service had complex needs which meant they were not able to tell us verbally about their experiences.

We observed people and communicated with them using signs and gestures. They indicated that they were happy with the staff and that they got on well with them. People smiled at staff they reached out and indicated that they wanted something and staff responded immediately.

Other evidence

There were enough qualified, skilled and experienced staff to meet people's needs.

Our inspection of 25 November 2011 found that the delivery of care was not always, effective, appropriate and flexible enough to meet the individual needs of people in a timely way.

At this inspection we found that staffing levels had been reviewed. We saw records to show that the Registered Manager organised the staff duty rota to make sure there was enough staff on during the day to support people with their care needs and their chosen activities.

People at the service had a high level of complex needs. We saw that at times throughout the day most people needed two staff to assist and support them with their

care needs. We found that staff working times were flexible. For example extra staff were on duty when people were ready to go out and do activities in the community. On the day of the visit we saw most people at the home were involved in activities and there was enough staff on duty.

Staff told us that they would like to have more one to one time with people but this was not always possible.

We were told that the service had requested further funding from peoples funding authority to provide more staff to support the people on a one to one basis. They were awaiting the outcome of this request.

Our judgement

There were enough qualified, skilled and experienced staff to meet people's needs.

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

People indicated that they liked the staff and got on well with them.

Staff were kind and respectful to the people living in the home.

We saw positive interactions between people and staff.

Other evidence

Staff received appropriate professional development.

Our inspection of 25 November 2011 found that not all staff had received the necessary refresher training to make sure they had the up to date knowledge on how to look after people in the best possible way.

At this inspection we looked at the records kept about the training and support that staff received. We also spoke to some of the staff. When staff started work at the home they received induction training. The staff we spoke to told us that the induction was good and supported them to be prepared for the work they were to do.

Some of the staff we spoke to were able to tell what training they had completed and we saw records that confirmed this. They included attending courses in mandatory subjects like fire awareness, infection control, food safety and safe moving and handling.

The service provided specialist training to make sure that staff had knowledge and skills

to look after people with conditions like epilepsy and autism.

Staff said and records showed that the company's new training programme was now up and running. Staff had now received the up to date training they needed to do their jobs effectively and safely. The training programme was on-going to make sure the staff received the necessary updates and refresher training when it was due.

The service also now had an extra computer so staff could complete their training in a timely manner. The staff could also access the training programmes on their own home computers if they wanted to.

Staff told us that they felt supported by the Registered Manager of the home and they said that the staff team worked well together.

Staff were receiving guidance from the manager and their work was monitored to make sure that they continued to meet people's needs in a reliable way. This was being done through one to one meetings with the manager, staff meetings and handovers between shifts.

Our judgement

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

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

People using the service indicated they liked the home and that staff listened to them.

Group and one to one meetings were held with the people so that they had the opportunity to air their views and give their opinions. Each person had a key worker, who acted as a link between them and the rest of the staff team.

Other evidence

Our inspection of 25 November 2011 found that there were the systems in place to gather record and evaluate accurate information about the quality and safety of the care treatment the service provided.

However when some short falls were identified the organisation did not take the appropriate action to improve the service for people.

At this inspection we found there were systems in place to regularly assess the quality of the service provided.

Monthly reviews and audits were carried out by a manager of another service from within the company. These reviews and audits checked all the systems being used in the home. For example they looked at the environment, staff training, health and safety and care planning. The strengths and weaknesses of the service were identified and action plans were developed to improve the service.

We saw records that confirmed checks had been completed on some of the medicines

used by people to make sure they received the correct medication at right time. However the provider may find it useful to note that the medicines that were pre-packed by a pharmacist in a blister pack and the records kept to say that these had been given correctly were not checked. The Registered Manager took immediate action to address this issue and has given evidence to show this has now been addressed. We have not been able to test that this compliance has been sustained.

The provider may find it useful to note that we also found in the audit that stated that the room in which medication was stored sometimes exceeded the required temperatures to store drugs safely. We looked at the records of the room temperature for the last 2 months and found that they were within the normal range. However we were told that the room may exceed this temperature when the weather becomes warmer. The Registered Manager took immediate action to address this issue and a different location was identified to store the medicines. The medicines were going to be moved there as soon as the room was made secure. The Registered Manager was going to send us the temperature readings of the room. There was no evidence of any risk to people at this time. At this time we had not been able to test that this compliance has been sustained.

Checks had been completed of key things such as fire safety equipment, fire alarms and hoists.

House meetings were held with staff to discuss the general running of the home and how to make improvements.

The home's quality assurance audits and reports had identified various parts of the home that were in need of refurbishment, decoration and repair or replacement. The service now had a maintenance person who was working on the decoration and refurbishment of the home. The provider might find it useful to note that the kitchen bathrooms, toilets and laundry room still required upgrading. Floors were old and difficult to clean adequately. General paintwork within other parts of the service were faded and chipped. There was no evidence of any risk to people, however these premises did not promote the wellbeing of the people living at the home

Our judgement

The provider had an effective system in place to identify, assess and manage risks to the health, safety and welfare of people using the service and others.

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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