

# Review of compliance

Boulevard Care Willoughby House	
<b>Region:</b>	East Midlands
<b>Location address:</b>	Willoughby Road Sutton-on-sea Lincolnshire LN12 2NF
<b>Type of service:</b>	Care home service without nursing
<b>Date of Publication:</b>	June 2012
<b>Overview of the service:</b>	Willoughby House is situated in the seaside resort of Sutton on Sea. It is registered to provide services for eight people who require accommodation for their personal care needs.

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

## Our current overall judgement

**Willoughby House 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 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

As part of our inspection we spoke with a number of people who use the service. They spoke positively about the care and support they received. They told us they liked living in the home and confirmed that they were supported to make choices and decisions about the care they received.

Comments from people using the service included, "I've been ill but staff helped me phone my GP", " I feel safe here", "I'm happy living here", " I like all the staff" and " I've got my TV, I listen to music and staff respect I don't like to go out."

### What we found about the standards we reviewed and how well

#### **Willoughby 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**

The provider was meeting this standard. People's privacy, dignity and independence were respected.

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

The provider was meeting this standard. People experienced care, treatment and support that met their needs and protected their rights.

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

The provider was meeting this standard. People who use the service were protected from the risk of abuse, because the provider had taken reasonable steps to identify the possibility of abuse from happening.

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

The provider was meeting this standard. People were cared for by staff who were supported to deliver care and treatment safely and to an appropriate 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 was meeting this standard. The provider had an effective system to regularly assess and monitor the quality of service that people receive.

**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 expressed their views and were involved in making decisions about their care and treatment.

Comments from people using the service included, " I was able to choose my own bedding", " I've been in care a long time but feel Boulevard Care is the best, they listen to me" and " Staff speak with us, they don't speak down to us."

##### Other evidence

People using the service were given appropriate information and support regarding their care or treatment.

We observed staff interacting with people in a respectful and polite manner. People appeared relaxed and confident with staff and we saw that they were given choices and supported to make decisions. Staff took their time to understand people where they had communication difficulties. Staff promoted people's dignity and respect by knocking on doors before entering and speaking quietly to people about private matters.

Notices on walls and doors were displayed in word and picture form and staff were observed pointing to those when asking people using the service to complete tasks,

such as collecting laundry and choosing what was available for lunch. People appeared to understand this method of communication. Other staff were observed having conversations with people using the service about their hobbies and how they were going to plan their day. There was a relaxed atmosphere in the home and a lot of laughter.

Staff assisted people using the service with social, religious and cultural activities. Records showed that social needs, care needs and preferences of individuals were being considered in the planning of activities. The home had a varied activity programme in place which was displayed on notice boards, alongside photographs of previous events. During our visit we observed people being escorted to the local shops. People using the service told us they can pursue their hobbies such as model making and painting by numbers.

The views of people who use the service had been sought through individual case conferences which were recorded in individual care records, meetings and questionnaires. The last questionnaire was sent out in February 2012. They made positive comment about the service.

**Our judgement**

The provider was meeting this standard. People's privacy, dignity and independence were respected.

## 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's needs were assessed and care and treatment was planned and delivered in line with their individual care plan.

Comments from people using the service included, " Staff phoned the GP for me when I was ill, but I am alright now", " Staff encourage me to keep in contact with my welfare officer and family", " Staff understand my physical needs."

##### Other evidence

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

We examined three care plans. We found assessments had been carried out prior to and on admission and care was planned to meet individual needs. Risk assessments had been carried out to identify specific risks to each individual and care had been planned to manage those risks. For example where a person had been experiencing pains in their stomach, staff had ensured they initially saw their own GP and then assisted that person with hospital appointments and a treatment plan. All appointments and advice from health professionals had been recorded in the person's care plan.

We saw regular reviews of people's care needs where they had a history of falls. Discussions with Occupational Therapists and Social Workers had been recorded. The care plans had been adapted to reflect the on going support required of staff and health professionals.

Deprivation of liberty safeguards and best interest decisions were documented and mental capacity statements were in place where required, for those people who were unable to make decisions for themselves.

Records showed that health professionals were involved in assessing needs and planning care where people had been identified as having specific requirements. Care plans were evaluated on a monthly basis and updated as necessary.

We spent time in communal areas, observing how staff interacted with people living in the home. We found that the staff enabled people to make choices about their care and how they wanted to spend their time, even where their understanding and communication was limited.

**Our judgement**

The provider was meeting this standard. People experienced care, treatment and support that met their needs and protected their rights.

## 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

People who use the service were protected from the risk of abuse, because the provider had taken reasonable steps to identify the possibility of abuse and prevent abuse from happening.

Comments from people using the service included, " I'm happy living here", " I feel safe here" and "I do feel safe and staff respect that I don't feel so safe in the community so come with me."

##### Other evidence

The provider had policies and procedures in place for the protection of vulnerable adults which were accessible to staff.

Training records showed that staff had received training in safeguarding policies and procedures. The staff we spoke with were clear of the process to follow in raising any concerns they may have and they felt confident that this would be acted upon.

Training records showed that staff had received training in legislation regarding mental capacity and deprivation of liberty safeguards which gave them guidance on how to manage people who cannot make decisions for themselves.

There was a complaints policy and procedure displayed in the home. People living in the home told us they felt confident any concerns raised would be dealt with promptly by the manager.

People using the service told us they felt able to voice any concerns at the monthly home meeting, at case reviews and in the two monthly questionnaires. The provider may find it useful to note that as word and picture communication aids are used elsewhere in the home, it would be appropriate to use this format for explaining the complaints process to people using the service.

To ensure all concerns raised have been dealt with each month the manager completes an audit of all the documentation where concerns can be recorded. We saw that this had been completed for each month in 2012.

**Our judgement**

The provider was meeting this standard. People who use the service were protected from the risk of abuse, because the provider had taken reasonable steps to identify the possibility of abuse from happening.

## 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 are cared for by suitably skilled and qualified staff.

Comments from people using the service included, " I know who my key worker is." The person named their key worker. Other comments included, " Staff are kind to me", " I have definitely made friends here" and " I like all the staff."

##### Other evidence

Staff received appropriate professional development.

Staff told us they had received induction and mandatory training. The annual mandatory programme covered a range of topics including first aid and health and safety. Some staff had attended a number of service specific courses in areas such as diabetes and autism. The training programme showed planned training dates until June 2012 but staff told us a new one for the second half of the year was being prepared.

Staff told us they had received a yearly appraisal and supervision throughout the year. They felt they were supported to do their job and could raise any concerns at staff meetings or with the manager. We reviewed the records of three staff which showed they had received their last supervision in February 2012.

Staff told us they enjoyed working at the service and considered they worked well as a team providing a good standard of care to people living in the home.

#### Our judgement

The provider was meeting this standard. People were cared for by staff who were supported to deliver care and treatment safely and to an appropriate 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 provider took account of complaints and comments to improve the service.

Comments from people using the service included, " I am happy go lucky and staff respect that", " I like the holidays", " Staff support me to go to the social club" and " Staff are ok here."

##### Other evidence

People who used the service, their representatives and staff were asked for their views about their care and treatment and they were acted on.

There was evidence that learning from incidents/investigations took place and appropriate changes were implemented. For example where a person started to exhibit an aggressive attitude to staff and other people using the service psychology support was sought and a period of anger management treatment commenced.

The accident records were filed in each person's individual care plan folder. There was evidence that trends had been identified and that lessons learnt had been passed to staff. The provider had sent notifications when necessary to CQC to show us they had taken appropriate action after incidents had occurred.

The provider had been completing site visit reports. We saw the ones for February and March 2012. These covered a wide range of topics and where necessary action plans put in place to ensure work was completed. Staff told us they can speak to their location support person from head office at any time and this is not confined to visit days.

We saw copies of the completed questionnaires sent to people using the service, which were dated January, March and May 2012. These covered topics about the delivery of care to people using the service, menus and activities. The comments were positive.

We saw the staff meeting minutes for March and April 2012. These covered a variety of topics such as the infection control policy, problems with clothes and moping floors. Staff views were recorded. Staff told us they felt able to use staff meetings to bring to the provider's attention any matters of concern. They told us they felt their opinions were valued.

There was evidence that a systematic approach to demonstrate how all aspects of the quality of service was being monitored by both the manager of the service and the provider. It is part of the policy of the home that quality assurance auditing takes place. The auditing system takes into consideration all aspects of the running of the home such as maintenance, record keeping, training, reassessing peoples' needs staff supervision.

**Our judgement**

The provider was meeting this standard. The provider had an effective system to regularly assess and monitor the quality of service that people receive.

# 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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## Care Quality Commission

<b>Website</b>	<a href="http://www.cqc.org.uk">www.cqc.org.uk</a>
<b>Telephone</b>	03000 616161
<b>Email address</b>	<a href="mailto:enquiries@cqc.org.uk">enquiries@cqc.org.uk</a>
<b>Postal address</b>	Care Quality Commission Citygate Gallowgate Newcastle upon Tyne NE1 4PA