

Review of compliance

Mr Nish Thakerar & Mr Kumar Thakerar Westbridge House Rehabilitation Unit

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| Region: | Yorkshire & Humberside |
| Location address: | 1 Westfield Road Barton upon Humber North Lincolnshire DN18 5AA |
| Type of service: | Rehabilitation services Care home service without nursing |
| Date of Publication: | December 2011 |
| Overview of the service: | Westbridge House is situated close to the centre of Barton on Humber. The home is registered to provide care and accommodation for up to 22 people. The home provides care for those with needs relating to their mental health and misuse of drugs and alcohol. |

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

Our current overall judgement

Westbridge House Rehabilitation Unit was not meeting one or more essential standards. Improvements are needed.

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 and carried out a visit on 7 November 2011.

What people told us

People we spoke with were very positive about the care and support they received. They told us they liked living at the home and confirmed they were supported to make choices and decisions about the care they received. They told us they were assisted to be as independent as possible. Comments included "It's good, I like it living here" and "You are able to do what you want and I get a bath when I ask for one".

They told us they were well cared for and were very happy with the activities available to them. Comments included "I have improved and I am able to do things for myself now", "I am well looked after" and "There are plenty of activities".

They told us they felt safe and that they liked the staff.

What we found about the standards we reviewed and how well Westbridge House Rehabilitation Unit 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

Our review of this service has shown us that people who use the service are respected and involved in their care. However people's capacity to understand the choices available that relate to their care, treatment and support had not always been assessed.

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

Our review of this service has shown us that people who use the service receive care that meets their individual needs.

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

Our review of this service has shown us the service has policies and procedures in place to protect people who use the service and staff are trained to recognise signs of abuse and how to report this.

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

Our review of this service has shown us that the health and welfare needs of people who use the service are met by sufficient numbers of suitably qualified, skilled and experienced staff.

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

Our review of this service has shown us that the provider is monitoring the quality of service that people receive through audit and feedback.

Actions we have asked the service to take

We have asked the provider to send us a report within 28 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 were very positive about the care and support they received. They told us they liked living at the home and confirmed they were supported to make choices and decisions about the care they received. They told us they were assisted to be as independent as possible. Comments included "It's good, I like it living here" and "You are able to do what you want and I get a bath when I ask for one".

Other evidence

During this visit we spoke with people who use the service, we spoke with staff and looked at care records. Staff spoke positively about the service and told us that care was centred on the individual needs of each person ensuring that they are involved in planning their care.

We looked at care records and found that each person had a support plan in place that had been produced following assessment and identification of their individual needs. The support plans were centred on the person and had been discussed and agreed with each person to help them understand their own plan.

Where people required additional support to keep them safe due to their mental health problems care plans had been developed and people had agreed to these care plans.

However we found that people's capacity to make decisions about keeping themselves safe had not always been assessed. For example in one case a person we spoke to did not understand why a particular action was taken to discourage them from leaving the building in order to keep them safe although the care plan had been agreed by them. There was no evidence in the care file that a mental capacity assessment had been undertaken to establish that the person was able to make an informed choice about their care and the actions taken to keep them safe. The staff were able to describe the care and the rationale behind this and there was evidence in the care file that this action was agreed by the funding authority on placement and in subsequent reviews.

The views of people who use the service were sought through questionnaires and regular meetings. We saw an example of a survey carried out with people living in the home in October 2011 and responses were very positive.

There was an extremely happy atmosphere in the home throughout our visit and we saw that people living in the home were involved in all aspects of the daily routine such as the activities and the menu for lunch. We observed very positive interactions between the staff and people living in the home and we saw that people were offered choices in all areas.

Our judgement

Our review of this service has shown us that people who use the service are respected and involved in their care. However people's capacity to understand the choices available that relate to their care, treatment and support had not always been assessed.

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 were very positive about the care and support they received. They told us they were well cared for and were encouraged to be independent as possible. They told us they were very happy with the activities available to them. Comments included "I have improved and I am able to do things for myself now", "I am well looked after" and "There are plenty of activities".

Other evidence

During this visit we spoke with people who use the service, we spoke with staff and looked at care records.

Staff spoke positively about the care and service provided and they were knowledgeable about people's needs and the care required to meet their needs. We looked at the care records of two people who were living at the home. We found that assessments had been carried out prior to and on admission and care was planned to meet their individual needs. Risk assessments had been carried out to identify specific risks to each individual and care had been planned to manage these risks. (See outcome 1)

The home regularly evaluated the care provided and held regular reviews with people living in the home and their representatives to ensure that the care continued to meet their needs and expectations.

We saw that staff involved people in meaningful activities throughout the day and there

was a very lively and happy atmosphere within the home.

A visitor to the home told us that staff ensure they are involved with their relatives care. For example They told us that the home communicates well with them and informs them of any changes. They told us that there are plenty of activities in the home and that they were able to accompany their relative on excursions. They told us that the staff ensure special occasions such as birthdays are celebrated and family are involved in these. They told us that their relative is well looked after and their personal appearance is attended to. For example they prompt and encourage their relative to attend the hairdressers regularly and ensure they are dressed appropriately.

Our judgement

Our review of this service has shown us that people who use the service receive care that meets their individual 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

People we spoke with were very positive about the care and support they received. They told us they were happy living in the home and confirmed they felt safe.

Other evidence

During this visit we spoke with people who use the service, we spoke with staff and looked at care records.

Safeguarding and whistle blowing procedures were in place. These gave some information as to what constituted abuse and the action to take in the event of suspected abuse. They did not provide contact details for the local safeguarding team and did not give accurate information in relation to the investigation of an allegation of abuse or the referral of a staff member to the Independent Safeguarding Authority. This was discussed with the manager who stated she would update the procedure.

Staff we spoke with told us that they had received training in safeguarding adults and were clear of the process to follow in raising any concerns they may have and they felt confident that this would be acted upon. Staff were clear about reporting concerns directly to the local authority safeguarding team where necessary.

The training records showed that all but 2 staff had received training in safeguarding vulnerable adults procedures. The majority of staff had also received training to assist them to safely manage challenging or inappropriate behaviour.

Our judgement

Our review of this service has shown us the service has policies and procedures in place to protect people who use the service and staff are trained to recognise signs of abuse and how to report this.

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

People we spoke with were very positive about the care and support they received. They told us they liked the staff and described how key workers supported them. Comments included "They are alright; they help me with my bills".

Other evidence

During this visit we spoke with people who use the service and with staff and looked at records.

There were twenty people living in the home at the time of the inspection. There were three care staff on duty with the manager and deputy manager on the day of our visit together with a cleaner and maintenance person.

The manager assessed the dependency of the people living in the home on a regular basis and used this information to determine staffing levels using the residential forum guidance tool.

During this review we found that people's personal care needs were met, accident rates were low and there was no indication that people were at risk of physical harm. Activities were provided on a daily basis and additional staff hours were provided to accommodate this.

Staff confirmed that staffing levels were maintained and if cover for holidays or sickness was required this was arranged within the staff group.

Staff confirmed they had received a wide variety of training to enable them to meet people's needs and were encouraged to gain qualifications in care.

Our judgement

Our review of this service has shown us that the health and welfare needs of people who use the service are met by sufficient numbers of suitably qualified, skilled and experienced staff.

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 we spoke with were very positive about the care and support they received. They told us they liked living at the home. Comments included "It's good, I like it living here", "I have improved and I am able to do things for myself now", "I am well looked after" and "There are plenty of activities".

Other evidence

During this visit we spoke with people who use the service, we spoke with staff and looked at records.

The service carries out a wide range of audits and we looked at examples of recent audits that had been carried out these included medication, staff training and staff recruitment records. We found that where areas for improvement had been identified action plans had been developed and improvements made. For example the manager had identified that staff required training in the Mental Capacity Act 2005 and this had been provided.

The views of people who use the service were sought through regular meetings and questionnaires. We saw an example of a survey carried out in October 2011. These indicated that people who use the service were satisfied with the care they received. The manager planned to give people feedback about the survey in the residents meeting which were held bi-monthly. We found that the manager consulted people about changes in the home and had completed a number of "mini" surveys. For example we saw that a survey had been undertaken when it had been suggested by

people living in the home that the Sunday roast was changed to meat pie once a month. The outcome of the survey had been summarised and posted on the notice board.

People living in the home were also encouraged to sit on the quarterly quality group meetings which also included relatives/representatives of people living in the home and staff. The people living in the home had influenced a number of developments within the home including the development of a tuck shop which is managed by the residents with the support of staff.

A visitor to the home told us "it is a lovely home". They confirmed they were also involved in the quality group.

Our judgement

Our review of this service has shown us that the provider is monitoring the quality of service that people receive through audit and feedback.

Action we have asked the provider to take

Compliance actions

The table below shows the essential standards of quality and safety that **are not being met**. Action must be taken to achieve compliance.

| 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>How the regulation is not being met: Our review of this service has shown us that people who use the service are respected and involved in their care. However people's capacity to understand the choices available that relate to their care, treatment and support had not always been assessed.</p> | |

The provider must send CQC a report that says what action they are going to take to achieve 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 28 days of the date that the final review of compliance report is sent to them.

Where a provider has already sent us a report about any of the above compliance actions, they do not need to include them in any new report sent to us after this review of compliance.

CQC should be informed in writing when these compliance 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

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