

Review of compliance

<p>Dimensions (UK) Limited Dimensions 2 Buckby Lane</p>	
Region:	South East
Location address:	2 Buckby Lane Basingstoke Hampshire RG21 4PS
Type of service:	Care home service without nursing
Date of Publication:	July 2012
Overview of the service:	Dimensions 2 Buckby Lane is a residential home for up to four residents with learning disabilities. It is situated in a residential area not far from Basingstoke town centre.

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

Our current overall judgement

Dimensions 2 Buckby Lane 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 28 June 2012, observed how people were being cared for and talked to staff.

What people told us

The people using the service had complex needs so they were not able to tell us their experiences. The home had a friendly relaxed atmosphere and the residents were involved in all the house hold tasks. They all appeared well dressed, happy and content. Information recorded in the care plans showed that the residents considered 2 Buckby Lane to be their home and that they enjoyed living there.

What we found about the standards we reviewed and how well Dimensions 2 Buckby Lane 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's views and experiences were taken into account in the way the service was provided and delivered in relation to their care. We found that Dimensions – 2 Buckby Lane was meeting this standard.

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. We found that Dimensions 2 Buckby Lane was meeting this standard.

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

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. We found that Dimensions 2 Buckby Lane 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 peoples needs. We found that Dimensions – 2 Buckby Lane 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 the people using the service and others. We found that Dimensions – 2 Buckby Lane 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

We used a number of different methods to help us understand the experiences of people using the service. This was because the people using the service had complex needs which meant they were not able to tell us their experiences.

We observed the people living in the house and saw that they appeared happy and content and that they interacted well with the care staff. The staff members we spoke with described how one resident did not communicate verbally. This information was reflected in their care plan.

Other evidence

People were supported in promoting their independence and community involvement and they were involved in making decisions about their care and treatment.

The house had a friendly relaxed atmosphere and we saw that the residents were involved in all activities within the house. We observed the staff members assisting the residents complete a variety of house hold tasks such as doing the washing, cleaning their rooms and making the meals. There were lots of picture guides on the walls in the kitchen to assist the residents with various tasks and there was a picture planner to show who was on cooking duty and what was on the menu.

We saw all three residents' care and support plans. These were 'person centred' with detailed information about the person and their support needs.. Each had been recently reviewed and it was clear that the resident and their family had been involved in the

process. Reference had been made to the Mental Capacity Act and Deprivation of Liberty Safeguards. One resident had a court appointed deputy and their care plan detailed who this was and how best interest decisions should be made.

We were shown one resident's daily activity flow plan. This was a picture chart of the various activities that they would be completing that day and at what time. The care staff worked through this with the person several times a day to help them to decide what they were going to do.

Each person who lived in the house had a full activities schedule. The care plans detailed the activities that had been tried and a chart had been completed for each detailing 'what worked' and 'what didn't work'. This enabled a decision to be made whether to make it a regular activity or not.

Risk assessments had been completed for each activity clearly centred on the individual's safety and encouraging community involvement. This meant that each resident was regularly encouraged and supported to participate in activities they enjoyed which varied from sailing, swimming and carriage driving to attending church, music and dance sessions or an evening out in the pub.

Our judgement

People's views and experiences were taken into account in the way the service was provided and delivered in relation to their care. We found that Dimensions – 2 Buckby Lane 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

We used a number of different methods to help us understand the experiences of people using the service. This was because the people using the service had complex needs which meant they were not able to tell us their experiences.

The residents were well dressed and appeared happy and content. We observed them approaching the staff members for assistance and saw that they were spoken to and treated with respect. We observed staff members ask the residents questions and wait for them to respond, including them in what happened in the house.

Other evidence

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

The house was clean and tidy with pictures of the residents' recent holiday displayed on the wall. Each person had their own room. These were full of personal items and looked homely.

We saw that the care plans were current and person centred; a full assessment had been completed for each person. This included a section called 'what's important for me, now and in the future'. There was also a section called 'the perfect week' and 'dreams for the future' which detailed what each person wanted to happen now and going forward and what was needed in order for it to happen and any obstacles that might stop it from happening.

The care plans gave both detailed information about each resident as well as a summary for quick reference. We saw a section detailing the skills, qualities and

interests of the resident and what qualities, skills and interests each resident's care workers needed in order to be able to fully support them.

For one resident who could not communicate verbally there were several detailed scenarios in their care plan describing what behaviour the person might display in a variety of situations, what it meant and what actions the person wanted the care worker to complete. This meant that all staff members were able to provide the individual with the support required, because they were aware of the resident's requirements and how to interpret non verbal communication..

We were told that recently one of the residents had begun to experience some difficulties when eating. A speech and language therapist had visited and made an assessment. They returned to reassess the individual while we were visiting. We saw that between visits they had asked for a detailed log to be kept of what foods had been eaten each day and any difficulty that the person had experienced. We saw that this had been completed each day for all meals.

Our judgement

People experienced care, treatment and support that met their needs and protected their rights. We found that Dimensions 2 Buckby Lane 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 used a number of different methods to help us understand the experiences of people using the service. This was because the people using the service had complex needs which meant they were not able to tell us their experiences.

Other evidence

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.

On our visit we saw that the organisation's current 2012 safeguarding policy, together with a CQC notification form were available to staff. The policy included detail on the different types of abuse and a clear flow chart describing the action to take to report a safeguarding concern. All staff members had signed to demonstrate that they had read it. There was a clear safeguarding information document displayed on the office wall alongside an 'easy read' booklet about how to report abuse.

Training records for the staff working at Buckby Lane showed that they had all received safeguarding training. This training had been reviewed and updated in line with the organisation's policy. We spoke with staff members and they were able to demonstrate a good understanding of abuse issues and the types of abuse that may occur.

There were financial safeguards in place to ensure that the residents' money was spent in accordance with their wishes. There was a clear process of how residents money should be handled to ensure that it was kept safe. We saw that the process was followed and that this was also checked and signed off by a senior member of staff

each week.

Our judgement

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. We found that Dimensions 2 Buckby Lane 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 used a number of different methods to help us understand the experiences of people using the service. This was because the people using the service had complex needs which meant they were not able to tell us their experiences

Other evidence

There were enough qualified, skilled and experienced staff to meet people's needs. There was a team of 'regular' staff working at 2 Buckby Lane. We saw the staffing rota for the last month which showed that there were always at least two staff on duty during the day and one person on a waking night duty. This did include the use of agency staff to cover sickness however we did not see an occasion when agency staff were not supported by a regular team member. We were told that the agency staff had to complete an induction and that they tried to send the same staff when possible.

We viewed the agency induction and saw that it covered numerous aspects about the house and the residents including the 'on call' and emergency procedure, introductions to the residents and other staff, summary of important issues relating to each resident and the basic care plan for each resident. This meant that all agency staff should have a good understanding of the support each resident required. We saw documentation to show that this had not worked in one case however this had been identified and action taken which meant it would not happen again.

We were told that the use of agency staff potentially limited some of the activities that the residents could participate in however the team of regular staff arranged their rota in a way to keep this to a minimum. One staff member said that the team was "fantastic" and that communication between the team and management was "very good". While we visited an extra member of staff was allocated time to spend on administration such

as updating and reviewing the care plans. This meant that time was not taken away from the residents in order to complete these tasks.

We saw that all staff members had completed all the mandatory training and refresher courses in line with the policy of the home. Some extra training had been completed when one of the residents temporarily required the assistance of a hoist to transfer between his wheelchair, arm chair and bed. We were told by staff that this had been provided by a visiting occupational therapist or the manager of the home.

Our judgement

There were enough qualified, skilled and experienced staff to meet peoples needs. We found that Dimensions – 2 Buckby Lane 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

We used a number of different methods to help us understand the experiences of people using the service. This was because the people using the service had complex needs which meant they were not able to tell us their experiences.

Other evidence

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

We were shown the internal audit that takes place every three months; this followed standards set by Dimensions – the provider, and linked in closely with the Care Quality Commission essential standards. Areas of concerns were identified in the internal audit and this triggered the creation of an improvement log. The improvement log detailed what was wrong, why it was wrong, what needed to be done to put it right, who was responsible and when the improvement needed to be done by. We saw the last three audits and the current improvement log which showed that areas that had been identified as a concern were currently being addressed.

We were shown the national 2011 'customer satisfaction' survey which was sent out to all residents and their families. It was clear and pictorial so that the residents were able to complete it. We were told that if a resident required assistance to complete the form then an independent person would be contacted to assist such as a family member or friend rather than a staff member. This meant that staff did not have an undue influence on the results of the survey. This survey was completed annually and the results analysed at head office. The results were fed back to each of the homes and the manager then considered any improvements that were required. The manager told us

that they had a 'resource ring' available to them such as a 'best practice coach' and a 'performance coach' who would advise on how to implement any changes.

Residents and their families were involved in how the home was run; the residents had meetings to make decisions about changes made in the home, such as what colour the kitchen was going to be painted. This was recorded as a formal meeting in February 2012 however there had been no formal meetings since. The manager explained that it was the intention to have formal monthly residents' meetings, but that many of the meetings and decisions were made in a less formal setting which hadn't been recorded.

We were given examples where each resident had chosen how to decorate the bathrooms.

Our judgement

The provider had an effective system in place to identify, assess and manage risks to the health, safety and welfare of the people using the service and others. We found that Dimensions – 2 Buckby Lane 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

Document purpose	Review of compliance report
Author	Care Quality Commission
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