

Review of compliance

Mrs Sarbjit Soor Acorn Care Home	
Region:	London
Location address:	83 Blythswood Road Goomayes Ilford Essex IG3 8SJ
Type of service:	Care home service without nursing
Date of Publication:	October 2011
Overview of the service:	Acorn care home is registered to provide accomodation and personal care for three people. There are three single bedrooms with communal bathing, sitting and dining areas.

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

Our current overall judgement

Acorn Care Home 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, looked at records of people who use services, talked to staff and talked to people who use services.

What people told us

People said they felt supported by the staff team and that they were included in decisions about their care as far as possible.

People told us they were happy with the choice of food at the home. One relative said, "They go out of their way to cook her indian meals and take her to the temple."

They told us they were happy with the general environment of the home and their rooms. One person told us, "I like my room."

What we found about the standards we reviewed and how well Acorn Care Home 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 using the service were treated with respect. They were encouraged to take part in decisions about their care and were supported by staff to be as independent as possible.

The provider is compliant with outcome 1: Respecting and involving people who use services.

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

People who use the service received appropriate care and treatment because their needs were properly assessed and regularly reviewed. As far as possible, people and their

relatives were involved in the planning of their care needs.
The provider is compliant with outcome 4: Care and welfare of people who use services.

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

People who use this service were protected from abuse and their human rights were respected.

The provider is compliant with outcome 7: Safeguarding people who use services from abuse .

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

People's needs at this home were met by competent staff.

The provider is compliant with outcome 14: Supporting workers

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

Quality assurance in the home is monitored and people benefit from safe care, treatment and support.

The provider is compliant with outcome 16: Assessing and monitoring the quality of service provision.

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

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 who use the service received appropriate information about the home prior to moving there. As well as having a limited conversation with people, we spent time observing them to see what effect the environment, and staff interactions had on people's wellbeing. We also spoke with the relatives of people living at the home. People told us that staff were kind.

We observed staff supporting people in a friendly and professional way and saw that they were being offered choices with regards to personal care, menus and activities. Relatives of people living at the home confirmed that staff had asked people about their cultural and spiritual needs.

Other evidence

Staff we spoke to were able to give examples of how they offered choice to people on a daily basis and maintained people's privacy and independence. People's likes and dislikes were recorded in their care plans including their cultural and spiritual needs. We saw that the service held regular meetings with people so that they could have a say in how the home was run as well as choose activities, outings, holidays and menus.

The manager said that most people were able to make choices about their care and if they were not able, the home consulted their family and other care professionals for

advise. Before someone moves in, they were offered the opportunity to visit the home so that they could see what the home was like. They were also given information about the services provided at the home.

Our judgement

People using the service were treated with respect. They were encouraged to take part in decisions about their care and were supported by staff to be as independent as possible.

The provider is compliant with outcome 1: Respecting and involving people who use services.

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 asked people who use the service what they thought about the care and treatment they received at the service. They responded positively and one person said, "I like it here."

Relatives of people spoken said that the staff team were supportive and included people in decisions about their care. Relatives told us that they could visit them at any time and that people were assisted to visit their families if they wished.

Other evidence

We looked at the files for the two people using this service. These files contained needs assessments, risk assessments and care plans. All people using the service had person centred plans which were drawn up with their keyworkers and with the involvement of their families where possible. Risk assessments were linked to the care plans and were up to date.

The person centred plans were used as working documents and evolved as people's needs and wishes changed. This showed that the service carried out regular reassessments of people's ongoing and changing needs.

People's diversity and cultural needs were fully taken into account. The dietary needs of one person who was Asian and vegetarian were fully met by the home. Staff also took her regularly to visit the local temple. Staff knew people well and were able to tell us about the care and support that each person needed. This was evidenced in ongoing monitoring and recording.

Our judgement

People who use the service received appropriate care and treatment because their needs were properly assessed and regularly reviewed. As far as possible, people and their relatives were involved in the planning of their care needs.
The provider is compliant with outcome 4: Care and welfare of people who use services.

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 told us they felt safe at the home.
One person said that, "The staff are nice here."

Other evidence

All staff had received training in safeguarding adults, which ensured the protection of people who used the service. The manager stated that staff had attended mandatory training about safeguarding processes. Staff were aware of the signs of abuse and knew the action to take, if there was suspicion of abuse.

Our judgement

People who use this service were protected from abuse and their human rights were respected.

The provider is compliant with outcome 7: Safeguarding people who use services from abuse .

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 told us that staff responded to their needs appropriately.

A relative told us that "staff go out of their way to meet her needs."

"There are regular staff at the home who know her well and are used to coping with her needs".

Other evidence

Staff records checked, confirmed that they received induction training and had supervision on a regular basis. The owner of the service was the registered manager and was always present at the home. Staff were able to discuss any issues that arose daily, with her as and when they needed to. Staff training certificates showed that they received regular relevant training to keep them informed of current practices, so that they could competently meet the needs of the people they cared for.

Our judgement

People's needs at this home were met by competent staff.

The provider is compliant with outcome 14: Supporting workers

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 had a limited discussion with people using the service about the quality of care they received at the home. People were positive about this and told us that they were happy.

Relatives of people who use the service told us, "I have had no problems with the home since she has been living there." "We stay in touch regularly with the staff and manager."

Other evidence

The owner was the registered manager of the service and was in charge of the day-to-day running of the home. She told us that as this was a small home, there were continuous discussions with people using the service and their relatives to seek their views and opinions. Any suggestions made were listened to and actioned if appropriate. Yearly surveys were also given to people who use the service, their relatives and other stakeholders. The manager said that they would then assess the comments and action any suggested improvements if appropriate.

The manager told us that regular health and safety checks were carried out and any maintenance issues identified were addressed to ensure the continued safety of both staff and people using the service.

Our judgement

Quality assurance in the home is monitored and people benefit from safe care, treatment and support.

The provider is compliant with outcome 16: Assessing and monitoring the quality of

service provision.

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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