

Review of compliance

Mr KC Lim Elm Park Lodge	
Region:	London
Location address:	4 Elm Park Road Finchley London N3 1EB
Type of service:	Care home service without nursing
Date of Publication:	October 2011
Overview of the service:	Elm Park Lodge care home is registered to provide accommodation and personal care for up to 27 persons with a mental disorder. The service consists of a large, three-storey detached house and a property next door, which accommodates four residents in two flats. There is a space at the front of the home for car parking, and there is a large, very attractive garden and patio at the rear of the premises. The provider

	is also the registered manager.
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Summary of our findings for the essential standards of quality and safety

Our current overall judgement

Elm Park Lodge 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, carried out a visit on 21 September 2011, observed how people were being cared for, looked at records of people who use services, talked to staff and talked to people who use services.

What people told us

Most people expressed overall satisfaction with the service and told us that they were satisfied with the accommodation, the meals served and overall levels of cleanliness. One person told us that "it's not bad, living here" and another person told us that they were "quite happy". However, one person said that they wanted to leave the service. They told us that staff listened to what they had to say and acted on this. Most people said that consent was sought before providing care although one person said "not all the time". They told us about the opportunities to make choices and confirmed that they were treated with respect and that their privacy and dignity was respected. When asked about how they spent their time they told us about art work and using a computer. They also told us about playing monopoly, playing games, a guitarist coming to play in the home and taking part in outings.

Although people did not appear to be familiar with their care plan they told us that they attended their Care Plan Approach (CPA) meetings and confirmed that they received the support that they needed. Not all people using the service spoke English as their first language and Mandarin, Cantonese and Gujarati are spoken by some members of staff. We asked people whether they felt safe and comfortable with the staff supporting them and with the other people using the service. While some people said that they "couldn't feel any safer" and "I feel very safe" another person said that some people using the service could be violent and fight on occasions although "most people are OK". When we asked people if there was someone they could talk to if they were worried or concerned about anything they told us that they "would tell the staff". Another person named their key worker as someone they could talk and also said that the managers "are approachable". People were satisfied with the home being responsible for the storage and administration of medication. One person was pleased that when staff noticed that the person had

forgotten to come for their medication "they come and find me".

We asked people for their views on the manner and conduct of the staff supporting them and of the sufficiency of overall staffing levels. They said that people were very helpful, courteous and polite. One person said that staff were "very nice but sometimes a bit too strict. They tell you off". When asked when this might happen they related it to refusing to take medication. Another person said that staff "tried their best". They told us that there were enough staff although one person said that staff spend a lot of time in the office. When we discussed with people using the service whether they were asked if they were satisfied with the service provided they were not sure although they told us that they attended residents' meetings and that "you can speak up".

What we found about the standards we reviewed and how well Elm Park Lodge 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 who use the service were able to exercise choice, which meant that their wishes were respected and their opinions valued. Their privacy and dignity was respected, promoting self esteem. Members of staff listened to what people said to ensure that people were able to receive the care they wanted and in the manner they preferred.

Overall, we found that Elm Park Lodge was meeting this essential standard.

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

People using the service had an individual care plan that was based on a comprehensive assessment, which addressed the needs that had been identified. This ensured that people received a service that met their needs and that the manner in which it was provided took into account their likes and dislikes and personal preferences.

Overall, we found that Elm Park Lodge was meeting this essential standard.

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

Safeguarding procedures, including a whistle blowing policy, were in place in the home to protect the welfare and well being of the people who use the service.

Overall, we found that Elm Park Lodge was meeting this essential standard.

Outcome 09: People should be given the medicines they need when they need them, and in a safe way

There were suitable arrangements for the administration of medication to protect the people who use the service. This ensured that people got their medication at the right time and in the prescribed dose to promote their overall health.

Overall, we found that Elm Park Lodge was meeting this essential standard.

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

Monitoring care practices and supporting members of staff helped to encourage and develop competence so that carers understood the needs of the people who use the service.

Overall, we found that Elm Park Lodge was meeting this essential 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

Systems were in place to assess and to monitor the quality of service provision and included obtaining feedback from people who used the service. Changes had been made to address any shortfalls identified, ensuring that the needs and preferences of people who use the service were incorporated into planning the development of the service.

Overall, we found that Elm Park Lodge was meeting this essential 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.

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

When asked whether people received the service that they wanted they told us that staff listened to what they had to say and acted on this. We enquired whether staff asked for their consent before providing care and support and while one person said "not all the time" other people said "yes". We observed that interactions between members of staff and people using the service were positive and that staff conducted themselves in a positive, respectful and supportive manner.

People using the service told us about the opportunities to make choices and confirmed that they were treated with respect and that their privacy and dignity was respected. When we asked how people living in the home spent their time they told us about art work and using a computer. We saw the art room and IT room at the back of the house. Other people told us about playing monopoly, playing games, or a guitarist coming to play in the home and taking part in outings. A person who had an interest in fishing said that staff had offered to take them to a place where they could fish.

Other evidence

Although only a couple of people received support, in the form of encouraging and prompting, with personal care we were told that self esteem was important when a person's mood was low or when motivation was lacking. People were encouraged to

be as independent as possible. We discussed the issue of consent and were informed that one person had an independent assessment in place. Generally staff encouraged people to exercise choice and control by asking the person what they wanted to do, listening and acting on this where at all possible. They talked about "setting achievable goals and developing from there".

Organised activities took place in the home and included art therapy and music therapy. Members of staff supported people on a one to one basis e.g. when the person went shopping for clothes and outings took place e.g. to Hampton Court.

Our judgement

People who use the service were able to exercise choice, which meant that their wishes were respected and their opinions valued. Their privacy and dignity was respected, promoting self esteem. Members of staff listened to what people said to ensure that people were able to receive the care they wanted and in the manner they preferred.

Overall, we found that Elm Park Lodge was meeting this essential 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

Although people did not appear to be familiar with their care plan they told us that they attended their Care Plan Approach (CPA) meetings. They confirmed that they received the support that they needed.

We observed that two people living in the home were Chinese and although they were able to understand English the manager spoke Mandarin and Cantonese and was able to speak to the people using their first language. There was a record of interpreters being used to support the people at meetings where the people needed to understand and respond to issues raised. Within the staff team there were staff members able to speak Gujarati and to communicate with another person in the person's first language.

Other evidence

Care plans were developed jointly between the care home and the Recovery Team. These were evaluated at CPA meetings and there was evidence in the case files that these meetings were held on a regular basis. People using the service confirmed that they attended these meetings, accompanied by a family member, if they wished. Support plans were developed and were evaluated on a regular basis. In addition, placement reviews were convened by the funding authority on an annual basis and the minutes of these meeting were placed on file. Risk assessments were in place so that people were able to have a lifestyle that accorded with their wishes but which promoted their health and safety. Information in case files identified relapse indicators so that prompt help could be sought, if needed.

Our judgement

People using the service had an individual care plan that was based on a comprehensive assessment, which addressed the needs that had been identified. This ensured that people received a service that met their needs and that the manner in which it was provided took into account their likes and dislikes and personal preferences.

Overall, we found that Elm Park Lodge was meeting this essential 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 asked people using the service whether they felt safe and comfortable with the staff supporting them and with the other people using the service. While some people said that they "couldn't feel any safer" and "I feel very safe" another person said that some people using the service could be violent and fight on occasions although "most people are OK". When we asked people if there was someone they could talk to if they were worried or concerned about anything they told us that they "would tell the staff". Another person named their key worker as someone they could talk and also said that the managers "are approachable".

Other evidence

At the time of the inspection visit there were no outstanding or ongoing safeguarding issues. The care home had an Adult Protection policy in its policies and procedures manual. Training records demonstrated that members of staff received safeguarding training when they were newly appointed and that this was refreshed on a regular basis. When talking with members of staff they were able to demonstrate knowledge of the procedure and confirmed that they would be confident to use the whistle blowing procedure, if the need arose.

We looked at staff records and noted that recruitment checks included obtaining a Criminal Records Bureau check, an Independent Safeguarding Authority check, references, and checking proof of identity. The recruitment process was designed to prevent unsuitable applicants from working in the home. There was a valid Employer's Public Liability insurance certificate on display to protect the welfare of people living in,

working in or visiting the care home.

Our judgement

Safeguarding procedures, including a whistle blowing policy, were in place in the home to protect the welfare and well being of the people who use the service.

Overall, we found that Elm Park Lodge was meeting this essential standard.

Outcome 09: Management of medicines

What the outcome says

This is what people who use services should expect.

People who use services:

- * Will have their medicines at the times they need them, and in a safe way.
- * Wherever possible will have information about the medicine being prescribed made available to them or others acting on their behalf.

What we found

Our judgement

The provider is compliant with Outcome 09: Management of medicines

Our findings

What people who use the service experienced and told us

We asked people if they were satisfied with the home being responsible for the storage and administration of medication and they confirmed that they were. One person was pleased that when staff noticed that the person had forgotten to come for their medication "they come and find me". Some residents were knowledgeable about the medication that they took and one person said that the health care professionals were trying to find something to alleviate the person's medical condition.

Other evidence

We discussed the issue of consent in respect of support with medication. The managers told us that the agreement was that the person came to the office at specific and allocated times for the administration of their medication. If the person did not come forward then prompting may be required. If medication was refused the person's social worker was informed and a review of medication may be arranged. Medication charts were looked at during CPA meetings to check that the person received the support needed. Members of staff confirmed that they had received medication training.

The managers told us that some people self medicate if they went on social leave and that this was recorded in an events plan that was drawn up with the involvement and agreement of all the professionals supporting the person. There was also a signed letter from the GP confirming that the person was able to meet this responsibility. Changes to the storage of medication have taken place to make this more secure.

Our judgement

There were suitable arrangements for the administration of medication to protect the people who use the service. This ensured that people got their medication at the right time and in the prescribed dose to promote their overall health.

Overall, we found that Elm Park Lodge was meeting this essential 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

We asked people for their views on the manner and conduct of the staff supporting them and of the sufficiency of overall staffing levels. They said that staff were very helpful, courteous and polite. One person said that staff were "very nice but sometimes a bit too strict. They tell you off". When asked when this might happen they related it to refusing to take medication. Another person said that staff "tried their best". They told us that there were enough staff although one person said that staff spent a lot of time in the office.

Other evidence

We discussed staffing levels in the home. On the day of the inspection visit the manager, two deputy managers, two support workers, an administrative person, housekeeper and maintenance person were on duty. The chef was on duty later in the day to prepare the evening meal. We were told that the number of support workers may increase if there is a need to escort a person to an appointment or CPA meeting. At night there was one support worker on waking night duties and one support worker who was asleep but on call. When we asked people working in the home if levels were sufficient they agreed that levels enabled people's needs to be met. Comments included "yes they are" and "the rotas are done well. There are enough staff".

When asked about support we were told by members of staff that there was an on call rota so that a manager could be contacted out of hours for advice and that the manager would return to the home, if necessary. Ongoing support consisted of regular individual supervision sessions, staff meetings and annual appraisals. The manager's open door policy and a sharing of information and advice during handover sessions provided

ongoing support and advice to staff. The manager said that incidents or events could be used "as a teaching point where everyone could share and learn from each other". When we asked about support from managers in particular they told us "the manager is approachable, excellent".

We viewed training records, including individual training profiles, and noted that staff completed a period of induction training after appointment. Staff had access to NVQ learning and all but the last person appointed had either a level 2 or a level 3 qualification. Some of the mental health training sessions that took place in the home were open to people using the service to help them understand their illness e.g. hearing voices, feeling isolated and low motivation. Staff undertook training in safe working practice topics and the home had regular sessions where members of staff researched a certain topic and presented their findings to the rest of the staff team.

Our judgement

Monitoring care practices and supporting members of staff helped to encourage and develop competence so that carers understood the needs of the people who use the service.

Overall, we found that Elm Park Lodge was meeting this essential 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

When we discussed with people using the service whether they were asked if they were satisfied with the service provided they were not sure although they told us that they attended residents' meetings and that "you can speak up".

Most people expressed overall satisfaction with the service and told us that they were satisfied with the accommodation, the meals served and overall levels of cleanliness. One person told us that "it's not bad, living here" and another person told us that they were "quite happy". However, one person said that they wanted to leave the service and their social worker has been made aware of this.

Other evidence

There were opportunities for people using the service to give feedback. The manager had an open door policy and people could discuss issues on a day to day basis, which we saw happening during the inspection visit. Regular residents' meetings took place and a suggestion box was placed in the hallway for people to post any comments that they wished to make anonymously. Fortnightly meetings between a person and their key worker took place, which were recorded. Staff told us that they could venture their opinions at staff meetings and that staff were listened to. Staff said that the home "runs smoothly and people seem to get better".

The manager showed us audits and checklists that were used to monitor the quality of the service provided and said that feedback was also sought from other members of the multi disciplinary team supporting the people living in the home. We saw the analysis of

the comments made by people using the service when responding to the 2010 survey. Most comments were positive and where a person had commented on a lack of motivation on their own part the manager told us how this had been followed through so that progress had now been made.

Our judgement

Systems were in place to assess and to monitor the quality of service provision and included obtaining feedback from people who used the service. Changes had been made to address any shortfalls identified, ensuring that the needs and preferences of people who use the service were incorporated into planning the development of the service.

Overall, we found that Elm Park Lodge was meeting this essential 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.

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
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Care Quality Commission

Website	www.cqc.org.uk
Telephone	03000 616161
Email address	enquiries@cqc.org.uk
Postal address	Care Quality Commission Citygate Gallowgate Newcastle upon Tyne NE1 4PA