

Review of compliance

Colleycare Limited (t/a B&M Care)
St Anns Care Home

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| Region: | East Midlands |
| Location address: | 12 The Crescent Kettering Northamptonshire NN15 7HW |
| Type of service: | Care home service without nursing |
| Date of Publication: | September 2011 |
| Overview of the service: | St Anns is a care home providing personal care and accommodation for 39 older people over the age of 65 years. |

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

Our current overall judgement

St Anns 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, carried out a visit on 28 July 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

People who were able to comment on their care told us they were happy and liked living at St Anns. They said the staff are friendly, helpful, and treat them kindly.

Comments included, for example;

- "I have a lovely room. They keep it so clean."
- "The food is really good here."
- "Whenever I visit I am made very welcome."

What we found about the standards we reviewed and how well St Anns 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

Each person is helped to make choices within their capabilities and they are treated with dignity and respected as individuals.

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

People get the support and care they need. They are encouraged to retain as much independence as their capabilities allow and to enjoy their surroundings as much as they can.

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

human rights

People are protected from the risk of harm or abuse of their rights. Staff know what to do if they have to deal with concerns about a person's wellbeing or safety.

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

St Anns has sufficient appropriately trained staff on duty so that people can rely upon getting the care they need.

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

People benefit from receiving a service that is monitored for its effectiveness and regularly reviewed to accommodate changing needs.

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

One person told us that she enjoys helping out with domestic tasks, such as dusting and clearing away cups and plates. She said, "It keeps me active. I like that."

A visiting relative said that her mother has been much happier since coming to live at St Anns. She told us, "She's settled well. The staff are very patient. They treat her so kindly."

We were told that the staff are "...always nice. They cheer me up."

Other evidence

We saw staff working on both floors of St Anns. They were busy but did not rush or hurry people and they always acknowledged people by name. We saw staff knock on bedroom doors and pause before going into the room. We heard staff explain what they were doing whilst helping people. The tone of their voice was gentle with lots of words of encouragement and reassurance.

We spoke to three people in the privacy of their own bedroom. They were able to tell us that the staff are respectful and friendly. They also said they choose where to spend their time, for example two people said they liked to stay in their room most of the time. They said they were comfortable there. They also said staff always told them what was going on in the home that day. One person said, "I can choose to join in if I want to."

When we spoke with staff they knew what people liked and disliked. They also

recognised the importance of being sensitive to each person's dignity when assisting them with intimate personal care.

We were told that people choose what they want to wear. People unable to dress or choose appropriate clothing because of their dementia are helped by staff. We saw people who had been helped and they were dressed appropriately in clean clothing. The manager told us that an activities organiser has been recruited to replace the person who has recently left this job. The new organiser will start work once satisfactory clearances have been obtained. This means that in addition to staff organised activities there will be a person employed whose role will be to create and organise stimulating activities.

Our judgement

Each person is helped to make choices within their capabilities and they are treated with dignity and respected as individuals.

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 told us they get the care and support they need at St Anns. One person pointed at her alarm cord and said, "If I need help I just pull it. I am never left waiting."

We saw lots of visitors coming and going throughout the day. The manager told us visitors are always welcome and that was confirmed by a relative we spoke with. She said she is always offered hospitality when she visits.

People told us the food is "really good" and always hot even if they choose to have their meal served in their room.

Other evidence

Each person has a plan of care which is agreed with them or their representative. We saw examples. These plans are kept up to date and are updated to reflect a person's changing needs.

There is documented evidence that people get the routine and emergency healthcare they need, with records kept of visits by community based professionals, such as doctors or nurses.

Staff maintain a daily record of events within the home, including details of the care and support they provide for each person on that particular day. This record also highlights any action staff need to take, such as calling a doctor because someone is feeling unwell. We saw completed examples of these records.

People appeared relaxed and happy to be in the company of staff.

We saw examples of the innovative use of everyday objects for people with more pronounced dementia to pick up and carry around with them if they want to. For example, attractive handbags are hung on pegs around the lounge and corridor areas

and we saw one person pick up a bag and walk off with it before returning to choose another one. There are laminated pictures for people to pick up and look at, as well as brightly coloured fabrics which have coarse and smooth sensory materials woven into them for people to touch.

The manager has attended training on how colour may affect people's moods, particularly people with dementia. Corridor areas have been tastefully decorated with a variety of colours specifically chosen for their visually pleasing and restful effect. One visitor told us that her relative has been much calmer since transferring to St Anns from another care home. She also praised the efforts of staff to create a homely living environment which is kept very clean and free from odours.

The people we were able to speak with had personalised their bedrooms with their belongings, such as photographs and other treasured items.

Our judgement

People get the support and care they need. They are encouraged to retain as much independence as their capabilities allow and to enjoy their surroundings as much as they can.

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

One person told us she liked being able to lock her bedroom door as occasionally someone has got disorientated and tried to come into her room. She said being able to lock her door made her feel safe. She also said that the staff always listen and know what to do. She said this was very "reassuring".

Another person told us that if she was worried about anything she would talk to the staff.

A visitor said that staff are "very approachable" and she was confident that if she needed to complain she would be taken seriously and the matter dealt with appropriately.

Other evidence

We saw documentary evidence confirming staff had attended training in, for example, safe moving and handling techniques, as well as safeguarding and protecting vulnerable adults. On the day we visited a group of staff were attending a training session on working with the Mental Capacity Act 2005. Staff understand what is expected of them when supporting a person who lacks capacity to make informed decisions about their care.

We also asked staff what action they would take if they were worried about a person's safety or welfare and they were able to demonstrate through discussion that they knew what to do.

There is a whistle blowing policy and procedure in place so that staff can raise concerns about abusive practice.

Staff told us their manager and deputy are always available to them if they have

concerns about a person.

There is a documented complaints procedure which is given to people or their representative on admission to St Anns. The Commission's contact details are also displayed on the notice board for people to see.

Our judgement

People are protected from the risk of harm or abuse of their rights. Staff know what to do if they have to deal with concerns about a person's wellbeing or safety.

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 spoke with people in their own bedroom and they told us there is always enough staff around if they need help. When we visited we found there were sufficient members of staff on duty to provide care and support for the people on both floors of the home.

Other evidence

Staff told us that the manager makes sure that they get the training they need to help them do their job safely and effectively.

We spoke to staff who confirmed that they attend regular training sessions. Examples include, 'understanding dementia', 'first aid', and 'food hygiene'. They are also encouraged to obtain their National Vocational Qualification (NVQ) in care practice. We spoke to staff who said they had got this qualification.

The manager also continues to update her training and, for example, attended a course run by the Alzheimer's Society on the value of leadership in providing care for people with dementia related needs.

Staff told us their manager meets with them on a regular basis throughout the year. Records are kept of these supervision meetings and these are signed and dated. We saw a supervision schedule for members of staff. This identifies when individual staff are expected to meet with their manager for their job appraisal. Staff also told us that the manager and her deputy encourage them to raise issues or come up with ideas which will improve people's care.

We were told there are regular staff meetings to discuss the day to day running of the home.

Staff told us that when they come on duty there is a 'handover' period when information

about what needs to be done is shared and documented. This means that people can be assured of getting the support and attention they need from staff arriving on duty.

Our judgement

St Anns has sufficient appropriately trained staff on duty so that people can rely upon getting the care they need.

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 people we were able to speak with said they are regularly asked about what they think of the service they get. They said they were encouraged to speak up if they were unhappy or did not like something.

A visitor told us she had recently been asked to complete a questionnaire about the quality of service her relative is receiving at St Anns.

Other evidence

The manager told us that visitors are frequently asked what they think about the home and the welcome they get from staff. A visitor we spoke with told us that the manager and staff come across as genuinely wanting to know if improvements need to be made to the day to day running of the St Anns.

Equipment throughout the home is regularly serviced to make sure it is in good working order and safe to use. We saw examples of maintenance records and they appeared to be accurate and informative, giving details of any remedial action taken to put faults right.

Risks are identified and documented so that staff know what precautions need to be observed to help keep people safe. We saw examples of risk assessment documents.

These records set out the nature of the assessed risk and what needs to be done by staff to make sure there are no adverse outcomes for the people they care for.

Staff told us that the quality of their record keeping is regularly checked to make sure that information is accurate and up to date.

Our judgement

People benefit from receiving a service that is monitored for its effectiveness and regularly reviewed to accommodate changing needs.

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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