

# Review of compliance

Elizabeth Finn Homes Limited  
Grove Court

**Region:**

East

**Location address:**

Beech Way  
Woodbridge  
Suffolk  
IP12 4BW

**Type of service:**

Care home service with nursing

**Date of Publication:**

August 2012

**Overview of the service:**

Grove Court is a residential and nursing home providing care to people with nursing or personal care needs. It is registered to provide accommodation for people who require nursing or personal care, and treatment of disease, disorder or injury.

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

## Our current overall judgement

**Grove Court 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 to check whether Grove Court had taken action in relation to:

Outcome 01 - Respecting and involving people who use services

## How we carried out this review

We reviewed all the information we hold about this provider, carried out a visit on 30 July 2012 and talked to people who use services.

## What people told us

People using the service told us that they knew about their care plan and knew where it was kept. They told us that they were involved in the monthly evaluation of it. One person said "I am involved together with my relative."

## What we found about the standards we reviewed and how well Grove Court 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**

The provider was meeting this standard. People's views and experiences were taken into account in the way the service was provided and delivered in relation to their care.

## 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 spoke with three people using the service, two on the unit for those with more complex care needs and one on the unit for those requiring a lower level of support for their needs. They all told us that they were involved in the monthly evaluation of their care plan, together with a relative if they wished. They knew that their care plans were kept in their rooms. They told us that their needs were being met as detailed in their plans. They described some of the activities that were arranged in the service. They could choose whether or not to take part. One person told us that they preferred to stay in their room. They all said that the choice of food was excellent and there was always something to suit their taste.

##### Other evidence

The clinical care manager showed us the computerised care plan records for three people. We also saw the paper versions which were kept in people's rooms. These showed when plans were drawn up on admission, and the monthly evaluation outcomes. Some people had signed to show they agreed with each element of the plans, but some chose to consent to signing once to cover all the pages. Comments were recorded on each aspect of the plan such as the activities of daily living, mobility, nutrition, personal care and moving and handling. The people we talked to were aware of their plans and of the monthly evaluations. One person told us about some changes

that had been made recently to support them. We saw that the service invited families, as well as professionals involved with the person's care, to an annual review of their care. We were told that all those invited received a letter detailing the outcome of the review.

The record also listed when a person had taken part in an activity such as skittles, or attending a talk or a film. There were two activity co-ordinators for the service. The service produced a regular newsletter which detailed all the activities, which relatives were also invited to attend. People were asked about their preferences so that either group or individual activities could be arranged to suit their interests.

We noted that one of the records we inspected contained a 'Do Not Attempt Resuscitation' form agreed by the person using the service and the appropriate doctor. This was part of the service's advance care planning for people at the end of their life. This followed the nationally recognised Gold Standard Framework. We saw evidence that the service had been commended for their work on developing this important aspect of people's care. This topic was included in monthly evaluations and we saw that the person had confirmed their continuing agreement at the most recent evaluation.

The evidence showed that people who use the service understood the care and treatment choices available to them. People expressed their views and were involved in making decisions about their care and treatment.

### **Our judgement**

The provider was meeting this standard. People's views and experiences were taken into account in the way the service was provided and delivered in relation to their care.

# 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

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