Review of compliance

BUPA Carehomes Ltd Ardenlea Court	
Region:	West Midlands
Location address:	Bucknell Close 39-41, Lode Lane Solihull West Midlands B91 2AF
Type of service:	Accommodation for persons requiring nursing care.
Date the review was completed:	May 2011
Overview of the service:	Ardenlea Court is a 55 bedded care home in the centre of Solihull. They provide nursing and dementia care for older people, and also hold a contract with Solihull Primary Care Trust to provide intermediate care for 18 people

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

What we found overall

We found that Ardenlea Court was meeting all the essential standards of quality and safety we reviewed but, to maintain this, we have suggested that some improvements are made.

The summary below describes why we carried out the 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. We asked the provider to complete Provider Compliance Assessments (PCA's) for the following outcome areas:

- Care and welfare of people who use services
- Meeting nutritional needs
- Safeguarding people who use services from abuse
- Cleanliness and infection control
- Management of medicines
- Supporting workers
- Complaints
- Records

We also looked at the following outcome areas during the review:

- Respecting and involving people who use services
- Consent to care and treatment
- Cooperating with other providers
- Safety and suitability of premises
- Safety, availability and suitability of equipment
- Requirements relating to workers
- Staffing
- Assessing and monitoring the quality of service provision

How we carried out this review

We reviewed the information we hold about this provider, and asked them to complete provider compliance assessments for some of the outcome areas. We then visited Ardenlea Court on 14 April 2011. We observed how people were being cared for, talked to people who live at the home, talked to staff, checked the providers records and looked at records of people who live at Ardenlea Court.

What people told us

People living at the home told us they were very happy there and felt safe. They said that staff cared for them very well and they were content. They also told us the food was very good. They received their medication from staff at the right times. People living at the home benefit from having a staff team who receive ongoing training to develop their skills.

What we found about the standards we reviewed and how well Ardenlea Court was meeting them.

Outcome 1: People should be treated with respect, involved in discussions about their care and treatment and able to influence how the service is run
People living at the home were involved in decision making regarding their day, and were treated with respect by the staff at the home.
Overall, we found that Ardenlea Court was meeting this essential standard.

Outcome 2: Before people are given any examination, care, treatment or support, they should be asked if they agree to it
People living at the home have their care and treatment explained to them fully. Where consent is required it is obtained prior to any procedure taking place.
Overall, we found that Ardenlea Court was meeting this essential standard.

Outcome 4: People should get safe and appropriate care that meets their needs and supports their rights
People living at the home received safe and appropriate care and treatment which was reflected in the care documentation.
Overall we found that Ardenlea Court was meeting this essential standard but, to maintain this, we have suggested that some improvements are made.

Outcome 5: Food and drink should meet people's individual dietary needs
People living at the home were supported to have an adequate nutritional intake and to keep well hydrated.
Overall, we found that Ardenlea Court was meeting this essential standard.

Outcome 6: People should get safe and coordinated care when they move between different services
People living at the home received co-ordinated care and treatment. Referrals were made to other healthcare professionals when needed.
Overall, we found that Ardenlea Court was meeting this essential standard.

Outcome 7: People should be protected from abuse and staff should respect their human rights
People living at the home were protected from the risk of abuse due to robust procedures and ongoing staff training.
Overall, we found that Ardenlea Court was meeting this essential standard.

Outcome 8: People should be cared for in a clean environment and protected from the risk of infection
People living at the home were protected by the comprehensive infection control procedures in place.
Overall we found that Ardenlea Court was meeting this essential standard.

Outcome 9: People should be given the medicines they need when they need them, and in a safe way
People living at the home received their medication safely from staff trained in medication administration procedures.
Overall we found that Ardenlea Court was meeting this essential standard but, to maintain this, we have suggested that some improvements are made.

Outcome 10: People should be cared for in safe and accessible surroundings that support their health and welfare
People living at the home benefit from living in a safe, secure, well maintained environment.
Overall, we found that Ardenlea Court was meeting this essential standard.

Outcome 11: People should be safe from harm from unsafe or unsuitable equipment
Equipment in the home was well maintained and safely used by the staff.
Overall, we found that Ardenlea Court was meeting this essential standard.

Outcome 12: People should be cared for by staff who are properly qualified and able to do their job
The recruitment procedure was robust and ensured that people were supported by skilled, competent staff.
Overall, we found that Ardenlea Court was meeting this essential standard.

Outcome 13: There should be enough members of staff to keep people safe and meet their health and welfare needs
People living at the home were supported by sufficient numbers of staff to meet their needs.
Overall, we found that Ardenlea Court was meeting this essential standard.

Outcome 14: Staff should be properly trained and supervised, and have the chance to develop and improve their skills
People living at the home had their health and welfare needs met by a competent staff team.
Overall we found that Ardenlea Court was meeting this essential standard but, to maintain this, we have suggested that some improvements are made.

Outcome 16: The service should have quality checking systems to manage risks and assure the health, welfare and safety of people who receive care
Robust systems were in place to monitor and action the quality of the service provided to people living at the home.
Overall, we found that Ardenlea Court was meeting this essential standard.

Outcome 17: People should have their complaints listened to and acted on properly
People living at the home felt that their concerns would be listened to and appropriate action taken.
Overall, we found that Ardenlea Court was meeting this essential standard.

Outcome 21: People's personal records, including medical records, should be accurate and kept safe and confidential
People living in the home had their safety and well being protected by accurate and well maintained records.

Overall, we found that Ardenlea Court was meeting this essential standard.

Action we have asked the service to take

We have asked the provider to send us a report within 14 days of them receiving this report, setting out the action they will take to improve. We will check to make sure that the improvements have been made.

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 1:
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 1: Respecting and involving people who use services.

Our findings

What people who use the service experienced and told us
People living at the home told us they were very happy there. They said that staff cared for them very well and they were content.

Other evidence
Prior to moving into the home, the manager carried out an assessment involving the individual and their family. This was to ensure that the home could meet the needs of the person and deliver the best care.

People can then experience a day at the home meeting other residents and staff, having a meal, joining in activities and looking around the home.

Their care records confirmed that an assessment had taken place, taking into account their past medical history, current issues, likes and dislikes. This information was then used to help plan their care whilst living at the home, and enable choice to be offered to them.

We observed excellent interaction between staff and people living at the home. People were treated with respect, and involved in making decisions about their day. For example, people were asked where they would like to sit, what drink they would like and if they would like to read a magazine.

Our judgement
People living at the home were involved in decision making regarding their day, and were treated with respect by the staff at the home.

Outcome 2:
Consent to care and treatment

What the outcome says

This is what people who use services should expect.

People who use services:
- Where they are able, give valid consent to the examination, care, treatment and support they receive.
- Understand and know how to change any decisions about examination, care, treatment and support that has been previously agreed.
- Can be confident that their human rights are respected and taken into account.

What we found

Our judgement

The provider is compliant with outcome 2: Consent to care and treatment.

Our findings

What people who use the service experienced and told us
People living at the home told us that the care they received was good.

Other evidence
People told us that they were fully involved in their care and treatment. We observed staff explaining procedures to them prior to carrying them out.

Where consent was required it was obtained from either the individual or a family member.

Regular reviews of the care given were carried out with the individual and their family members to ensure that the care given was appropriate to the persons current needs. The care reviews were documented and signed by both the staff member carrying out the review, and the individual or their family member

Our judgement
People living at the home have their care and treatment explained to them fully. Where consent is required it is obtained prior to any procedure taking place.

Outcome 4:
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 4: Care and welfare of people who use services.

Our findings

What people who use the service experienced and told us
People living at the home told us they were very happy living there. They said staff were very kind and attentive to their needs.

Other evidence
Prior to visiting the home we asked the provider to complete a Provider Compliance Assessment (PCA) about this outcome area. This told us how the home assessed and managed the individuals health and welfare needs. It told us that they use a care planning framework called QUEST to promote personalised care. On admission to the home a comprehensive assessment was completed involving the individual and their families to ascertain their needs, their likes, dislikes and preferences. This document was reviewed monthly and amended as changes occur.

Comprehensive risk assessments were also completed on admission, they included moving & handling, nutrition and pressure care. All of these documents gave staff the information they needed to ensure that people received the best care, treatment and support.

During our visit we looked at some of the QUEST documents, all of which were very well documented giving a good picture of the individual and their particular needs. The document also showed how staff were to meet those needs safely and

discreetly.

Families were very involved in the care planning process, particularly on the dementia unit. In the short stay unit families are involved in both the care planning and the discharge process. Staff at the home had recently developed a new assessment document known as QRISP for use in the short stay unit. This was now being piloted in a number of BUPA care homes.

Staff we spoke to knew the people living at the home very well and were able to tell us how they cared for them, and met their particular needs. In a recent resident satisfaction survey entitiled 'How well staff know you and your needs and Respectfulness of staff towards you', both scored 100%.

Monitoring officers from Solihull Primary Care Trust had recently audited the home and awarded them 100% for 'Improved Quality of Life' and for 'Making a Positive Contribution'.

From our observations we saw staff interacting well with individuals. We saw staff giving people choice and options throughout our visit.

We did advise that staff should be reminded when writing in the daily records to make the entry less task oriented and more person centred.

Our judgement
People living at the home received safe and appropriate care and treatment which was reflected in the care documentation.

Outcome 5:
Meeting nutritional needs

What the outcome says

This is what people who use services should expect.

People who use services:
- Are supported to have adequate nutrition and hydration.

What we found

Our judgement

The provider is compliant with outcome 5: Meeting nutritional needs.

Our findings

What people who use the service experienced and told us
People living at the home told us the food was very good. .

Other evidence
On admission to the home a full nutritional screening assessment was completed. This gave staff an idea of what the person liked or disliked, and if any special diets were required.

Nutrition was of prime importance at the home. As the home had a nursing unit, a dementia care unit and a short stay/intermediate care unit they had to cater for a number of different diets. The staff worked closely with the catering staff to ensure each person had the diet they needed, from diabetic to low fat to pureed, everyone was catered for.

People living at the home had the choice of where they wanted to eat. Staff told us that most people if they were able to, liked to eat in the dining rooms. We saw that the dining room tables were nicely laid with everything to hand.On the short stay unit people preferred to eat in their bedrooms. Where needed staff assisted people with their meals discreetly and attentively.

We looked at care records where people's nutritional intake was being monitored. People's weight was closely monitored and if issues were identified then advice from a dietician was sought. This was all well documented in the individuals care file.

Staff had completed training in food hygiene, and one of the nursing staff had undertaken a course in assessing swallowing. This was particularly useful in the dementia unit and where people had had a stroke that affected their swallowing.

Our judgement
People living at the home were supported to have an adequate nutritional intake and to keep well hydrated.

Outcome 6:
Cooperating with other providers

What the outcome says

This is what people who use services should expect.

People who use services:

- Receive safe and coordinated care, treatment and support where more than one provider is involved, or they are moved between services.

What we found

Our judgement

The provider is compliant with outcome 6: Cooperating with other providers.

Our findings

What people who use the service experienced and told us
We were told by people living at the home that they have full access to other services such as district nurses, gp's and opticians.

Other evidence
We looked at the care records of four people living at the home. The records showed that other health professionals such as doctors, opticians and dentist's regularly visited the home.

Where an individual required specialist treatment such as district nursing, dieticians or physiotherapy these services were accessed by the home.

We spoke with nursing and care staff who told us they would contact the relevant health professional where needed. From looking at care records we could see that all contact with other multi discipliniary professionals was documented in detail.

Our judgement
People living at the home received co-ordinated care and treatment. Referrals were made to other healthcare professionals when needed.

Outcome 7:
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 7: Safeguarding people who use services from abuse.

Our findings

What people who use the service experienced and told us
People living at the home told us they felt safe there.

Other evidence
We asked the provider to complete a PCA on this outcome area prior to our visit. This told us that the home had a robust policy for safeguarding vulnerable adults. Staff had access to the policy and procedures at all times. There had not been a safeguarding issue since September 2009.

People living at the home had access to an 'easy read' safeguarding document, which made the process easier to understand. Staff also found this document useful.

Safeguarding awareness began during recruitment, through staff induction and was continued via training and updates for staff. Staff we spoke to had a very good understanding of the process and what they would do if an incident occurred.

Each month the manager completed an audit on safeguarding. This involved asking individual staff about their knowledge of abuse, how to recognise it and who to report concerns to. This allowed the manager to plan training for those staff who required an update in safeguarding.

As the home had a specialist dementia unit, four of the nursing staff had attended a course specifically for safeguarding people with dementia.

Within the dementia unit staff had accessed training to allow them to deal with challenging behaviours and to defuse situations using behavioural management. This reduced the risk of safeguarding incidents occurring in the unit and reduced the risk of harm to others.

Our judgement
People living at the home were protected from the risk of abuse due to robust procedures and ongoing staff training.

Outcome 8:
Cleanliness and infection control

What the outcome says

Providers of services comply with the requirements of regulation 12, with regard to the *Code of Practice for health and adult social care on the prevention and control of infections and related guidance*.

What we found

Our judgement

The provider is compliant with outcome 8: Cleanliness and infection control.

Our findings

What people who use the service experienced and told us
People living at the home told us they were very happy there.

Other evidence
The provider had completed a PCA for this outcome area. It told us that the home had a comprehensive set of infection control and cleaning practices in place.

During our visit we saw some of these practices being carried out by staff. For example, staff were wearing protective aprons and gloves, domestic staff were following the correct cleaning routines and soiled linen was dealt with appropriately. Staff had recently had training on the correct handwashing procedures and demonstrated this well.

We looked at some of the equipment used in the home, such as commodes, wheelchairs and pressure relief cushions. These were all clean and fit for purpose.

The home also had to complete monthly infection control audits for the provider. This allowed the home to identify and action any issues that may arise. The manager told us that they had identified that mattresses were not checked for wear and tear. They had decided to add the checking of mattresses to the monthly audit to ensure they were fit for use.

The manager was responsible for infection control practices at the home and had identified a number of staff who had not fully completed the infection control training.

This was to be followed up by the manager to ensure that all staff were up to date with their knowledge.

The most recent inspection by the Environmental Health Officer evidenced good practice and the home was awarded 4 stars for excellence.

Our judgement
People living at the home were protected by the comprehensive infection control procedures in place.

Outcome 9:
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 9: Management of medicines.

Our findings

What people who use the service experienced and told us
People living at the home said that they received their medication from the staff at the right times.

Other evidence
The home had numerous procedures in place for staff to follow to ensure medication was administered safely.

Staff responsible for medication administration had regular ongoing training both "in house" and from the pharmacy (Lloyds) who supplied the medication to the home. Records of which were kept in the personnel records of the staff.

We looked at the MAR (Medication Administration Records) charts for this month and found them to be completed correctly with no gaps or ommissions. Staff were able to tell us how they administer medication and what they would do if an individual refused their medication.

Reviews of medication were carried out regularly in conjunction with the G.P to ensure the appropriate course of treatment was prescribed.

The manager completed a monthly medication audit which covered areas such as

ordering medication, administration, disposal and staff training. From this audit the manager had recently identified that there had been gaps on past MAR charts, and there had been discrepancies in stock levels. To rectify this the manager had implemented daily checks of the MAR charts and the night staff now had responsibility for checking stock levels were correct.

Regional managers conducted 'on the spot' checks on medication during their visits.

Our judgement
People living at the home received their medication safely from staff trained in medication administration procedures.

Outcome 10:
Safety and suitability of premises

What the outcome says

This is what people should expect.

People who use services and people who work in or visit the premises:

- Are in safe, accessible surroundings that promote their wellbeing.

What we found

Our judgement

The provider is compliant with outcome 10: Safety and suitability of premises.

Our findings

What people who use the service experienced and told us
The home provides very comfortable, spacious accommodation for the people living there. .

Other evidence
We looked around the home during our visit. All the rooms were comfortable, spacious and welcoming. Communal areas were light and airy with plenty of room to move around.

The home was well maintained, and all equipment was regularly serviced to ensure it was safe for staff to use. Risk assessments were completed for the use of equipment and were regularly reviewed.

Access to the home was via a secure front entrance where we were met by the home's reception staff.

Our judgement
People living at the home benefit from living in a safe, secure, well maintained environment.

Outcome 11:
Safety, availability and suitability of equipment

What the outcome says

This is what people should expect.

People who use services and people who work in or visit the premises:

- Are not at risk of harm from unsafe or unsuitable equipment (medical and non-medical equipment, furnishings or fittings).
- Benefit from equipment that is comfortable and meets their needs.

What we found

Our judgement

The provider is compliant with outcome 11: Safety, availability and suitability of equipment.

Our findings

What people who use the service experienced and told us
People living at the home had access to safe suitable equipment that met their needs.

Other evidence
We saw up to date records relating to equipment such as hoists, electrical items and fire extinguishers. Any faults were reported by staff and dealt with by the maintenance person or outside contractors.

We saw equipment being used by care staff. Hoists and wheelchairs were used appropriately and safely. Where pressure care mattresses were used, they were checked daily to ensure they were working properly.

Fire alarm systems were regularly tested and staff were able to explain the evacuation procedure in the event of a fire.

Our judgement
Equipment in the home was well maintained and safely used by the staff.

Outcome 12:
Requirements relating to workers

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 staff who are fit, appropriately qualified and are physically and mentally able to do their job.

What we found

Our judgement

The provider is compliant with outcome 12: Requirements relating to workers.

Our findings

What people who use the service experienced and told us
People living at the home told us that the staff were very kind and helpful. They told us that staff were very helpful and attentive.

Other evidence
The staff recruitment and induction process was very thorough. All the staff had gone through a period of induction working with another member of staff, and they all felt they had benefitted from the training programme provided.

All the staff we spoke to said they felt very well supported by senior staff and management. This was evident from our observations during our visit.

Staff interaction with people living at the home was very good. It was evident that staff had a very good understanding of individuals needs and how best to meet them.

Our judgement
The recruitment procedure was robust and ensured that people were supported by skilled, competent staff.

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
People felt very well supported by the staff at the home. They told us that staff were attentive and very kind.

Other evidence
Staff rotas showed that sufficient staff were employed by the home to meet the needs of the people living there. The home had no current staff vacancies. The manager told us that staff work well to cover shifts where needed and they also ran a bank system to cover when staff are on holiday.

As we said before staff were inducted and received ongoing training to help them develop their skills.

Staff meetings were regularly held, and gave staff the opportunity to raise any issues they may have had. Staff also told us that senior staff and managers were very accessible and easy to talk to if they had any concerns. All the staff felt very well supported by the management team at the home.

From talking to staff it was evident that they understood their roles and had a very good understanding of individuals needs and how to care for them safely and competently.

Our judgement
People living at the home were supported by sufficient numbers of staff to meet their needs.

Outcome 14:
Supporting workers

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 workers.

Our findings

What people who use the service experienced and told us
People living at the home benefit from having a staff team who receive ongoing training to develop their skills.

Other evidence
All the staff we spoke to during our visit were very friendly, helpful and professional. They told us that they felt very well supported by the management team at the home. Any issues they raised were dealt with promptly and satisfactorily by senior staff.

All the staff at the home participated in an ongoing training programme which included safeguarding vulnerable adults, moving and handling, food hygiene, nutrition, and fire safety. Specialist training for nursing staff was planned for the next few months and included: venepuncture, male catheterisation, palliative care, dementia care and diabetes awareness. From our observations we were able to see staff carrying out procedures such as moving & handling safely and unobtrusively.

The staff at the home benefitted from having a BUPA Regional Trainer who worked closely with the manager to ensure that all staff were up to date in their knowledge.

The home had a supervision programme in place and documented sessions took place with all staff regularly. Staff confirmed that they had individual supervisions and were able to raise any issues they may have with senior staff. The manager had

identified that the annual appraisal programme had not been completed for all staff and needed to be addressed.

Annual audits were undertaken by Solihull Council's Contract Officers looking at compliance with staffing and training. The last audit took place in October 2010 and the home received a score of 94%.

Our judgement
People living at the home had their health and welfare needs met by a competent staff team.

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
People living at the home benefit from a service that is managed well.

Other evidence
The manager constantly assessed the quality of care given to people living at the home. Monthly audits took place looking at different areas of the service from infection control to care planning. Any issues arising from these audits were discussed with staff and new systems implemented to improve the service given.

Quality assurance was monitored by the management team by holding regular resident and relative meetings, handing out regular satisfaction questionnaires and encouraging people living at the home to raise any concerns or suggestions they may have.

The manager also held 'open evenings' throughout the year where relatives or visitors were able to talk to the manager 'out of hours'. This allowed people who were not able to visit the home during the day to meet with the manager and discuss any issues.

Staff were also encouraged to suggest ways of improving the service provided in the

staff meeting forum and in general discussions.

The provider required the manager to complete a number of quality assurance reports monthly to provide an overall picture of the service, with action plans and timescales by which they will have achieved any improvements. Regional managers closely monitored the home and the service it provided to ensure quality care remained consistent.

Our judgement
Robust systems were in place to monitor and action the quality of the service provided to people living at the home.

Outcome 17: Complaints

What the outcome says

This is what people should expect.

People who use services or others acting on their behalf:

- Are sure that their comments and complaints are listened to and acted on effectively.
- Know that they will not be discriminated against for making a complaint.

What we found

Our judgement

The provider is compliant with outcome 17: Complaints.

Our findings

What people who use the service experienced and told us
People living at the home had access to the complaints procedure and knew how to raise a complaint. .

Other evidence
The home had a robust complaints procedure that was on display around the home for everyone to see. The management team operate an open door policy and welcome everyone's comments.

Over the last twelve months there had not been any complaints, only a couple of concerns. These had been dealt with by the manager and documented appropriately in the Customer Expectations file. We had not received any complaints about the home over the last year.

Staff were able to explain the complaints procedure to us and tell us what they would do if someone complained to them.

Our judgement
People living at the home felt that their concerns would be listened to and appropriate action taken.

Outcome 21:
Records

What the outcome says

This is what people who use services should expect.

People who use services can be confident that:

- Their personal records including medical records are accurate, fit for purpose, held securely and remain confidential.
- Other records required to be kept to protect their safety and well being are maintained and held securely where required.

What we found

Our judgement

The provider is compliant with outcome 21: Records.

Our findings

What people who use the service experienced and told us
We did not ask people living in the home about this outcome area.

Other evidence
All the records and documentation we saw during this planned review were comprehensive and up to date. Records were well maintained, held securely and for the appropriate length of time.

Our judgement
People living in the home had their safety and well being protected by accurate and well maintained records.

Action
we have asked the provider to take

Improvement actions

The table below shows where improvements should be made so that the service provider **maintains** compliance with the essential standards of quality and safety.

Regulated activity	Regulation	Outcome
Accommodation for persons requiring nursing care. Treatment of disease, disorder or injury. Diagnostic and/or screening services.	Regulation 9 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010.	Outcome 4 Care and welfare of people who use services.
	Why we have concerns: Entries made by staff in the daily records are task orientated, not person centred.	
Accommodation for persons requiring nursing care. Treatment of disease, disorder or injury. Diagnostic and/or screening services.	Regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010.	Outcome 8 Cleanliness and infection control.
	Why we have concerns: Not all staff have fully completed their infection control training.	
Accommodation for persons requiring nursing care. Treatment of disease, disorder or injury. Diagnostic and/or screening services.	Regulation 13 of the Health and Social Care Act 2008 (Reguated Activities) Regulations 2010.	Outcome 9 Management of medicines.
	Why we have concerns: There are gaps on the Medication Administration Records (MAR) charts, and stock levels do not always tally.	

Accommodation for persons requiring nursing care. Treatment of disease, disorder or injury. Diagnostic and/or screening services.	Regulation 23 of the Health and Social Care Act 2008 (Reguated Activities) Regulations 2010.	Outcome 14 Supporting workers
	Why we have concerns: The annual appraisal programme has not been completed.	

The provider must send CQC a report about how they are going to maintain compliance with these essential standards.

This report is requested under regulation 10(3) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010.

The provider's report should be sent within 14 days of this report being received.

CQC should be informed in writing when these improvement actions are complete.

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 Adult 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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