Review of compliance

Mrs Christine Dodge Westcliff House	
Region:	South West
Location address:	24-26 West Cliff Dawlish Devon EX7 9DN
Type of service:	Care home service without nursing
Date of Publication:	November 2011
Overview of the service:	Westcliff House is registered to provide accommodation with personal care for up to 34 people. The service is offered to people who have a learning disability. Some people may also have a mental health problem. The ages of people currently living at the home range from 26 to 86, and some people have physical frailty and/or health problems. Some people are aiming towards independent living while others require

	long term care and support. The house overlooks the sea, near Dawlish town centre.

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

Our current overall judgement

Westcliff House was meeting all the essential standards of quality and safety but, to maintain this, we have suggested that some improvements are made.

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 10 October 2011, checked the provider's records, observed how people were being cared for, looked at records of people who use services, talked to staff, reviewed information from stakeholders and talked to people who use services.

What people told us

When we went to Westcliff House we visited people in their own rooms, and in the lounges. We shared lunch with people in two of the three dining areas. A large and very varied group of people live at the home. Some have their own lounges in a flat they may share with another person.

One person told us they had lived in other care homes, and that this one is the best, because of the friendly atmosphere, and all the staff are nice. People have their own space and privacy, but can choose to be sociable when they want.

One person told us they are looking forward to moving to their own flat, which has been arranged and is due to happen soon. They told us that staff at Westcliff House have helped them get ready to move, but they did not say how. The manager told us that they will have the cooker in their flat connected, so they can have tuition and support with cooking their own meals, but that had not started. Several people have a kettle and microwave, and were pleased to tell us they make their own hot drinks and snacks.

We saw that people had keys to their own door, and some had a key to the back door of the house. Some people are assessed as safe to go out without support. One person currently had a job, while others are seeking employment, with support.

One person told us about their membership of a local club. Another said they would like to go on holiday again. There has been a group holiday each year. People had discussed

where they would like to go in a residents' meeting, and this year the choice was Butlins. Several people mentioned that the previous year's boat holiday was a great success. Not everyone chooses to go. Some people have been taken on individual days out, for example to the Pantomime.

One person told us they like to help their Mum when they go home, and they speak to her on the phone every day. Another person was pleased to tell us that they would be supported to visit a family member the following day.

We saw that menus had been discussed at the residents' meetings, which happen two or three times per year, and often there are discussions between people in the house. People told us they were looking forward to fish and chips the following day, but they did not know what they would be having for lunch that day.

The manager told us that when they are recruiting staff, one of the people who lives in the home had shown candidates around after their interview so they could meet the people who live in the house. They gave their impressions of the candidates to the manager, who said that this feedback had been useful.

What we found about the standards we reviewed and how well Westcliff House 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 live at Westcliff House have their views and preferences respected. They are appreciated as individuals, and support is given appropriately.

Overall, we found that Westcliff House was meeting this essential standard.

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

At Westcliff House, people with a wide range of health and social care needs have these needs met in a safe and satisfactory way.

Overall, we found that Westcliff House was meeting this essential standard.

Outcome 05: Food and drink should meet people's individual dietary needs

People are provided with a varied and nutritious diet. However, staff do not always make sure that people are aware of the choices available. Some people's experience of eating is disturbed because one dining area is by the back door and people often come in and out of the door during meal times.

We found that Westcliff House was meeting this essential standard, but in order to maintain this, we have suggested that some improvements are made.

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

People at Westcliff House are protected by staff who understand their vulnerability and take appropriate action to protect them.

Overall, we found that Westcliff House was meeting this essential standard.

Outcome 10: People should be cared for in safe and accessible surroundings that support their health and welfare

The on-going maintenance programme keeps the home safe and comfortable. There is sufficient space for people to have choice about when and where to be sociable. There are facilities for people to learn skills of daily living. Some parts of the house are not accessible to people with mobility problems. People with mobility problems are accommodated where they can access the essential facilities of the home.

Overall, we found that Westcliff House 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

The management at Westcliff House respond to daily needs and provide staff according to the tasks of the day. People's needs are met by appropriate staff. There is no system in place to keep staffing levels under review in relation to the overall needs of people using the service.

We found that Westcliff House was meeting this essential standard, but in order to maintain this, we have suggested that some improvements are made.

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

Training in good care practice is provided, and staff performance is regularly assessed. Between annual appraisals individual supervision meetings are not regularly provided but staff have ready access to the manager and assistant manager. Training in some particular conditions and support needs of people in the home are not provided, to help staff develop good care practice for people with conditions including dementia.

We found that Westcliff House was meeting this essential standard, but in order 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

There are good systems in place to monitor the safety of the service provision.

Overall, we found that Westcliff House was meeting this essential standard.

Actions we have asked the service to take

We have asked the provider to send us a report within 28 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.

Where we have concerns we have a range of enforcement powers we can use to protect the safety and welfare of people who use this service. When we propose to take enforcement action, our decision is open to challenge by a registered person through a variety of internal and external appeal processes. We will publish a further report on any action we have taken.

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
We saw that people were treated with respect by staff who understood them. Some people had signed their own care plans, showing that they had been involved. We could see from the personal details contained in other peoples' care plans, that although they were not able to sign, they had been involved and the keyworker drawing up the plan knew them well. A health and social care professional told us that the person they had been working with had complex needs that had been met in a sensitive way, and their independence had been carefully promoted, in a way that did not disturb them.

People all had their own room or flat, and we saw that people held the key to their own door, and also to the back door of the house for free access if they are assessed as competent for this.

Some people who live at Westcliff House are well able to speak for themselves. All have keyworkers who spend time with them and ensure that they understand their needs and help them express themselves. We found that the staff knew the people well, and had a good rapport with them.

One person had moved recently to Westcliff House. They had chosen the home, and

had settled well. Two people recently had made the positive choice to stay at the home when their health care needs had increased.

Although they did not always go, people from Westcliff House had attended local 'Speak Out' meetings, where they can give their views on local issues and services. One person told us about their membership of a local club. Another said they would like to go on holiday again. There has been a group holiday each year. People had discussed where they would like to go in a residents' meeting, and this year the choice was Butlins. Several people mentioned that the previous year's boat holiday was a great success. Not everyone chooses to go. Some people have been taken on individual days out, for example the pantomime. Some people need support to go out locally. We found that the staff manage to make time for people to get out, for example to the town for coffee, or to visit relatives.

Some people are assessed as safe to go out without support. One person currently had a job, while others are seeking employment, with support.
One person told us they were looking forward to moving to their own flat, which had been arranged. They told us that staff at Westcliff House have helped them get ready to move, but they did not say how. The manager told us that they will have the cooker in their flat connected, so they can have tuition and support with cooking their own meals, but that had not yet started.

Other evidence
Health and social care professionals had been involved when it was necessary for important decisions to be made concerning peoples' care needs when they were assessed as not competent to make those decisions. An advocate had represented people when this had been appropriate, to make sure that decisions were made in their best interest. Health and social care professionals who spoke to us said that people had chosen to stay at Westcliff House with additional support when their healthcare needs had increased.

Our judgement
People who live at Westcliff House have their views and preferences respected. They are appreciated as individuals, and support is given appropriately.

Overall, we found that Westcliff House 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
We looked at the care records of one person who suffered with epilepsy. We saw that though earlier in the year many seizures had been recorded, none had been recorded during the past two months. The manager told us that this had followed a medication review, and the person's quality of life had much improved. This shows good working between the home and healthcare services.

The manager was providing individual support to enable a person to attend important health care appointments.

Other evidence
We examined a sample of four care plans. We found that the basic details, risk assessments and guidance for staff were accurate and up to date. Detailed records had been kept when a person had been gravely ill. Health Action plans were being compiled for people, though not all were in place. These included good details about the person, including their social aims and any communication needs.

There was good evidence that staff had worked with health care professionals in order to enable a person to stay in the home when their health care needs had increased. Meetings had been held to consider and ensure that this decision was made in the person's best interest, a ground floor room was made available for them, and equipment and training were provided so that the staff could care for them in a safe way.

We heard one person coughing repeatedly while they ate their meal. Their care plan showed that they had been assessed as being at risk of choking when taking medication or when coughing. There had not been an assessment of their risk while eating, or whether any special observation or support might be required. The manager made a request for an assessment during the course of this review.
A health and social care professional told us that the manager had acted promptly in bringing a medication issue to their attention, and a medical review had been arranged for an individual.

Medication is checked by night care staff each time they come on duty, so that any queries or inaccuracies in recording can be clarified. The medicine administration records (MAR) that we saw were accurate and explained any administration of homely remedies. District nurses visit regularly for essential injections.

Our judgement
At Westcliff House, people with a wide range of health and social care needs have these needs met in a safe and satisfactory way.

Overall, we found that Westcliff House was meeting this essential standard.

Outcome 05:
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 05: Meeting nutritional needs

Our findings

What people who use the service experienced and told us
We observed lunch in two of the three dining areas. Currently no-one in the home was cooking their own meals, although some flats have kitchenettes.

The lunch served on the first day of our visit was beef burgers, boiled potatoes and green beans, followed by a baked pudding with custard, or jelly with or without custard.

One person needed soft food, and they were brought a meal with each of the foods blended separately, which was nicely presented. They said they could not manage it, and shortly after, soup was brought for them, which was well accepted. Other people were satisfied with their meal.

There was a small blackboard on the wall in this area, and we were told the menu of the day should be written there, but it was blank.

This dining area looked attractive from the entrance, but it was not a pleasant place to eat, as it is by the back door to the house. Some of the people who eat in this dining area eat slowly, and people from other dining rooms who had finished their lunch earlier were passing by and calling out to them. Workmen leaving the house also passed by, so it felt like eating in a corridor. One the people is known for calling out 'shut that door'. We observed that was an accurate reflection of the number of people passing through their dining area and going in and out of the back door.

Lunch on the second day of our visit was ham, mashed potatoes and baked beans, followed by tinned fruit and cream. We observed this meal time in a different dining

room, on the lower ground floor. People were satisfied with their meal, and this was a calm and friendly time. Some people were waiting for their meal, while staff put meals in empty places where the person had not yet arrived. They also put mugs of tea out before people had arrived. One person did not want tinned fruit, and asked if there was anything else. A senior carer went to have a look in the kitchen and came back saying there wasn't anything.

Menus are discussed frequently, including at the residents' meetings, which are convened two or three times per year. Staff knew what people did not like, and usually gave them an alternative that they would like. The menus for the week were displayed on the wall in the office, but they had not been written on the blackboard for people to see. Most people we spoke to did not know at lunch-time what they were about to be served. However, people were confident that they would be given something that they liked. Several people said they were looking forward to fish and chips the following day.

Other evidence
We saw that no fresh vegetables apart from potatoes were served. The manager showed us nutritional advice that frozen and tinned vegetables are equally nutritious. We were told that salad could be offered as an alternative when a person does not like the main course. There is no dedicated cook. A senior member of care staff cooks for this large group of people.

There had previously been an arrangement for a food allowance, so that people who have paid for full board could have money from the home's budget and cook some of their own meals. The manager told us that this had been stopped because it was found that the money was not being spent on food, or not on suitable food.

Our judgement
People are provided with a varied and nutritious diet. However, staff do not always make sure that people are aware of the choices available. Some people's experience of eating is disturbed because one dining area is by the back door and people often come in and out of the door during meal times.

We found that Westcliff House was meeting this essential standard, but in order to maintain this, we have suggested that some improvements are made.

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 that they feel safe at Westcliff House, and that this was very important to them as they came here to escape bad memories.

The manager told us of situation that had recently been dealt with, when an advocate had been called in to support a person when there was concern that people outside the home were taking advantage of them.

Other evidence
The manager told us about financial arrangements that had been made on behalf of some people living at Westcliff House to protect their rights and ensure that they had sufficient money to meet their daily requirements. Some people have their cash administered by the manager. We checked the system that is in place to deal with this and found it to be secure and accurately recorded.

We looked at documents from recent recruitment, and saw that the proper checks had been carried out to ensure that suitable people were appointed who will not pose a risk of harm to people.

Staff had received training in the protection of vulnerable adults from abuse, and were aware of their duty to report any allegation of abuse or poor practice.

The manager provides this training in-house to ensure that all staff can attend, and that the principles are discussed using examples that help staff understand how people in

this home might suffer abuse.

The correct action was taken by staff and by the manager when a person was the subject of an offence from outside the home.

Our judgement
People at Westcliff House are protected by staff who understand their vulnerability and take appropriate action to protect them.

Overall, we found that Westcliff House was meeting this essential standard.

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
We met some people in their flats and rooms. People were pleased with their personal accommodation, which we saw was personalised. People had plenty of space and choice of places to be sociable. One person had a pool table in their room, several were watching television with a friend or flat-mate.

As recorded in Outcome 5, one of the dining areas did not provide a calm and pleasant place for people to eat. There were two other dining areas.

People all had a shower for their private use. There is a walk-in bath on the ground floor. People with mobility problems did not have access to the whole house. There were no stair lifts, but there were a small number of rooms on the ground floor for people who cannot manage stairs.

There are small gardens at the front where people can watch the world go by and look across to the sea, and a small courtyard at the back of the house which provides a sociable space for smokers.

Other evidence
One stair-carpet was badly worn. The provider told us that a replacement had been ordered. The house is large and old, and therefore constantly needs maintenance and refurbishment. We found most areas of the house were bright and smart, but some looked rather shabby. Work was on-going to maintain safety and comfort.

The laundry was clean and efficient, with two large washing machines and one large

dryer. People who live in the house were not enabled to do their own laundry. The manager said that when people move to independent living they would be tutored in the use of their own machine. Some people had a kitchenette in their flat, with a kettle and microwave cooker, which they could use independently, subject to risk assessment. There were cookers in some flats which were disconnected, but could be reconnected if the occupant were ready for training in preparing their own meals.
We toured most of the building, and found it to be kept clean and tidy throughout.

Our judgement
The on-going maintenance programme keeps the home safe and comfortable. There is sufficient space for people to have choice about when and where to be sociable. There are facilities for people to learn skills of daily living. Some parts of the house are not accessible to people with mobility problems. People with mobility problems are accommodated where they can access the essential facilities of the home.

Overall, we found that Westcliff House was meeting this essential standard.

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 observed staff communicating well with people who live at Westcliff House, and people were pleased to tell us they get on well together. Staff who spoke to us were knowledgeable about people's health and social care needs.

Other evidence
We were given the staff rota for the week of our visit which showed that the provider was available in the home all day through the week, and the manager was on duty from Monday to Thursday.

There were three support staff on duty seven days per week from 8 – 8 pm, including at least one senior, and two at night.
One full time and one part time domestic were also employed.
No cook was employed, and a senior member of staff was spending a major part of each day cooking for this large group of people.
The manager told us that he often accompanies people to health care appointments, because there is often no-one else able to drive. He took someone to an important healthcare appointment during this inspection, and made time to take them to visit their family.
One of the care staff told us they would be able to take out a resident who needs support when they had done the laundry and taken round the three o'clock drinks. They would help people with their medicated skin creams after the evening meal. Time available for social support was limited.
One member of staff called in sick on the first day of this visit. The manager made arrangements to cover for the absence from the regular staff group. On the second day

of the visit we saw that a senior member of staff had been asked to work additional hours to do shopping for the house. We saw that there was very little food left in the fridge and freezer, so this was an essential task that day.
Before each person moves into Westcliff House, an assessment is conducted, which includes their care needs, and how this impacts on staffing and costs. Reviews are held to identify and consider people's changing needs. The management had not carried out a risk assessment to consider the health, social care and behavioural needs of each person in the home as the basis for deciding sufficient staffing levels for the service as a whole.

Our judgement
The management at Westcliff House respond to daily needs and provide staff according to the tasks of the day. People's needs are met by appropriate staff. There is no system in place to keep staffing levels under review in relation to the overall needs of people using the service.

We found that Westcliff House was meeting this essential standard, but in order to maintain this, we have suggested that some improvements are made.

Outcome 14:
Supporting staff

What the outcome says

This is what people who use services should expect.

People who use services:
* Are safe and their health and welfare needs are met by competent staff.

What we found

Our judgement

The provider is compliant with Outcome 14: Supporting staff

Our findings

What people who use the service experienced and told us
People we met in the dining room said that, 'All the staff are nice'. Someone who was working towards independent living said, 'They have helped me'.

One of the people who lives at Westcliff House shows candidates round when they come for their interview, so that the people may meet them and see how they might get on.

Other evidence
We saw that a full induction programme is in place for new staff. We saw that a newly recruited support worker had started on the programme. The assistant manager was due to carry out an assessment of competence which would be followed by a one to one supervision meeting between the manager and the new recruit.

We saw the training matrix, which recorded the staff achievements and training needs. Many of the staff had undertaken training in first aid, health and safety, moving and handling, control of infection, fire safety. Appropriate staff had received training in food hygiene and diet and nutrition. There was a high level of achievement in National Vocational Qualifications, at levels 2 – 4 in care. Staff had also received training in care of people with epilepsy. Further training in conditions of people living in the house would be good practice, including dementia. The manager told us that training in dealing with challenging behaviour had been delivered by the local Additional Support Team.

We saw that staff meetings had been held periodically. The main purpose had been to

bring staff attention to good practice with respect to incident records, medication, and care planning. The manager said that staff also had the opportunity to raise concerns.

The manager had carried out annual appraisals with all staff. This had included assessment of their caring attitude towards the people they work with, their practical ability to perform their duties, teamwork, communication skills, and how they deal with stress at work. Training needs were also discussed, and the manager and staff members had both signed these records to show their agreement. Between these appraisals there were not regular one to one supervision meetings.

The Manager and the provider were both present in the home most weekdays and available out of hours, for support and guidance.

Our judgement
Training in good care practice is provided, and staff performance is regularly assessed. Between annual appraisals individual supervision meetings are not regularly provided but staff have ready access to the manager and assistant manager. Training in some particular conditions and support needs of people in the home are not provided, to help staff develop good care practice for people with conditions including dementia.

We found that Westcliff House was meeting this essential standard, but in order to maintain this, we have suggested that some improvements are made.

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 in the home have opportunities to talk individually with their keyworker at least monthly. The home gives responsibility to the staff to help each person consider their wants and needs, and let them know whether they are having their needs met satisfactorily.

Other evidence
The provider carries out a monthly quality assurance check. Residents' finances are checked, the medication system is audited and the environment is checked. The provider checks that any complaints are being dealt with properly. The care plans are checked as to whether they have been reviewed and are up to date.

Our judgement
There are good systems in place to monitor the safety of the service provision.

Overall, we found that Westcliff House was meeting this essential standard.

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 who require nursing or personal care	Regulation 14 HSCA 2008 (Regulated Activities) Regulations 2010	Outcome 05: Meeting nutritional needs
	Why we have concerns: Staff do not always make sure that people are aware of the choices available at meal times. Some people's experience of eating is disturbed because one dining area is by the back door and people often come in and out of the door during meal times.	
Accommodation for persons who require nursing or personal care	Regulation 22 HSCA 2008 (Regulated Activities) Regulations 2010	Outcome 13: Staffing
	Why we have concerns: There is no system in place to keep staffing levels under review in relation to the overall needs of people using the service.	
Accommodation for persons who require nursing or personal care	Regulation 23 HSCA 2008 (Regulated Activities) Regulations 2010	Outcome 14: Supporting staff
	Why we have concerns: Between annual appraisals, individual supervision meetings are not regularly provided. Training in some particular conditions and support needs of people in the home are not provided, to help staff develop good care practice for people with conditions including dementia.	

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 to us within 28 days of the date that the final review of compliance report is sent to them.

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 Social Care Act 2008 and relevant regulations. These enforcement powers are set out in the law and mean that we can take swift, targeted action where services are failing people.

Information for the reader

Document purpose	Review of compliance report
Author	Care Quality Commission
Audience	The general public
Further copies from	03000 616161 / www.cqc.org.uk
Copyright	Copyright © (2010) Care Quality Commission (CQC). This publication may be reproduced in whole or in part, free of charge, in any format or medium provided that it is not used for commercial gain. This consent is subject to the material being reproduced accurately and on proviso that it is not used in a derogatory manner or misleading context. The material should be acknowledged as CQC copyright, with the title and date of publication of the document specified.

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