

Review of compliance

Northern Counties Eventide Home Limited
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Region:	North West
Location address:	36 Lancaster Road Birkdale Southport Merseyside PR8 2LE
Type of service:	Care home service without nursing
Date of Publication:	February 2012
Overview of the service:	Eventide Home is a care home providing accommodation and personal care for up to 29 people. The home is a charitable trust with strong links to the Christian religion. The home is in Southport, within close distance of the promenade and the town centre.

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

Our current overall judgement

Northern Counties Eventide Home Limited was not meeting one or more essential standards. Improvements are needed.

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 13 January 2012, talked to staff and talked to people who use services.

What people told us

We spoke with some of the people who live at the home and with friends and family members who visit them. One person said that she has lived at Eventide for two years and it's lovely, she's really happy there. When we explained the purpose of our visit to another of the people who live there he said "You won't have a hard job here, we are very well cared for." Another person told us that he goes out regularly with members of his family.

One visitor we spoke with said that the person they visit has no close family. It was her own choice to go and live at the home and she had past connections with it. She is quite happy and never has any complaints.

Another person told us that her relative has lived at the home for several years. She is very satisfied with his care and he seems happy living there. She has never had to make any complaints.

Another person said that her relative has lived at Eventide for eight years. She is now very frail but she has been happy at the home and they look after her very well. The family has had no complaints and they have nothing but praise for the home.

All of the people we spoke with expressed their satisfaction with the standard of hygiene at the home.

What we found about the standards we reviewed and how well Northern Counties Eventide Home Limited 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 Eventide home are able to choose how they spend their time and are supported to practice their religious beliefs.

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

The health and personal care needs of people who live at the home are met and this is recorded in their care plans.

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

The people living at the home may not always be protected from abuse because Government and local guidance about safeguarding has not been put into place at the home.

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

People who live at the home enjoy a spacious, comfortable and well maintained environment with aids and adaptations to meet their needs.

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

The people who live at the home are supported by a stable and experienced team of staff, however staff training and supervision were inconsistent across the workforce.

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 spoke with some of the people who were living at the home and with friends and family members who visited them. One person said that she had lived at Eventide for two years and it's lovely, she's really happy there. When we explained the purpose of our visit to another of the people who live there he said "You won't have a hard job here, we are very well cared for." Another person told us that he goes out regularly with members of his family.

One visitor we spoke with said that the person they visit has no close family. It was her own choice to go and live at the home and she had past connections with it. She is quite happy and never has any complaints.

Another person told us that her relative has lived at the home for several years. She is very satisfied with his care and he seems happy living there. She has never had to make any complaints.

Another person said that her relative has lived at Eventide for eight years. She is now very frail but she has been happy at the home and they look after her very well. The family has had no complaints and they have nothing but praise for the home.

Other evidence

When we visited Eventide on 13 January 2012 there were 18 people living at the home. The home has a very strong Christian ethos and people are made aware of this when choosing a place to live. It has been a care home for 50 years and is a non-profit making charitable trust. People who live there are from various parts of the North West of England.

We saw that people were able to choose where to spend their time and some people spent most of their time in their bedrooms while others liked to use the communal lounges. There is a morning and evening religious service known as 'devotions'.

The home does not employ an activities organiser but they have volunteers who visit weekly to do craft work with some of the people who live there. An exercise session is held one morning a week and there is a weekly trip out in the home's minibus, with a longer trip once a month. We saw that a weekly activity plan was displayed on the main notice-board. There was a wide selection of books available in one of the lounges, as well as a large screen TV. While we were in the office, the manager was helping one person to order some DVDs that she wanted to buy.

The notice-board also had details of the day's menu and this showed that a choice of meals was available for people.

People who live at the home are able to express their views at residents' meetings, which are held three times a year. There is also an annual satisfaction questionnaire for people who live at the home and their families.

Our judgement

People who live at Eventide home are able to choose how they spend their time and are supported to practice their religious beliefs.

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

All of the people we spoke with were completely satisfied with the care that people living at the home receive. A contracts monitoring officer from Sefton Council told us that they were not aware of any concerns regarding the care of people using this service.

Other evidence

When we visited the home the care manager told us that nobody was very ill, however some people have lived there for several years and are now frail.

We looked at the care plan folders for three people. We found that detailed daily reports were written by the care staff. Plans for people's care were written in clear plain English and had been reviewed every month or every two months. Risk assessments had been recorded for nutrition and for pressure sore risk, and people's weights were checked and recorded monthly. There was a moving and handling assessment for each person and a list of their prescribed medicines. There were records to show when people had visits from their GP, district nurse, chiropodist, dentist, optician, hearing aid technician, and when they attended hospital appointments.

One of the care plans we looked at related to a person who is diabetic and it described how she is supported to administer her own insulin. We looked at a care plan for a person who has a bowel problem and saw that it had been written in a sensitive manner and detailed how the person's diet is adjusted to meet their needs.

There is a treatment room on the ground floor where people can see visiting health professionals in private without having to go to their bedroom. We saw that equipment was provided to meet people's needs for example sit-on weighing scales, adjustable beds and various walking aids.

Our judgement

The health and personal care needs of people who live at the home are met and this is recorded in their care plans.

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

There are moderate concerns with Outcome 07: Safeguarding people who use services from abuse

Our findings

What people who use the service experienced and told us

The people we spoke with said that they felt safe and well cared for at Eventide home.

Other evidence

The records we looked at showed that staff had attended training about safeguarding and were aware of the definitions of abuse and could recognise mistreatment and abuse if they witnessed it. There had not been any training about this in 2011. A Criminal Records Bureau disclosure had been received for each member of staff.

Neither the general manager nor the care manager was familiar with the 'No Secrets' guidance for responding to allegations of abuse and they did not have copies of any locally agreed protocols about reporting allegations to the safeguarding team.

This was commented on at the last Commission for Social Care inspection of the home in 2008 when the inspector found that: 'Staff were not aware of any external policies such as Sefton's local procedures on safeguarding and were unsure as to the role of statutory bodies in any investigation. The home's policy on managing and reporting abuse does not reference the locally agreed policies and is unclear as to who to report allegations to, and the home's role in any investigation. This needs clarification so that staff and managers are clear and fully aware of the wider management of allegations of abuse.'

The home's own safeguarding procedure, dated 2006, states 'All reports of abuse no matter how minor should immediately be investigated and acted on by the person in

charge'. This does not conform to the Sefton's Safeguarding Adults Policy that was published in 2011, and may result in evidence being invalidated. The home's whistle-blowing policy is included in the staff grievance policy and is out of date, referring to a CSCI office which has been closed for several years.

Our judgement

The people living at the home may not always be protected from abuse because Government and local guidance about safeguarding has not been put into place at the home.

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

All of the people we spoke with expressed their satisfaction with the standard of hygiene at the home.

Other evidence

Eventide home is a large Victorian house set in its own grounds in a residential area of Southport. It is within a short distance of the promenade and the main shopping area. The gardens at the front and back of the building are well maintained and accessible for people using a wheelchair. There is car parking space at the front of the house and a ramp with handrails to the main entrance.

On the ground floor there is a choice of spacious, comfortable sitting rooms and a large dining room that can accommodate everyone at one sitting. The medicine trolley is kept in the dining room which detracts a little from the homely appearance. There is also a sitting area on the first floor. Staff and management share a large office on the ground floor.

Bedrooms are on three floors with stairs and a passenger lift for access. At the time we visited, two married couples had double rooms and other people were all accommodated in single rooms. Most bedrooms have en suite toilet and some have a shower. The bedrooms we looked at were tastefully decorated and carpeted. They were personalised with people's belongings that they had brought with them. Some people have their own telephone. Bedroom doors have locks and there was a number on each door but no names.

We saw that there was good provision of assisted bathing and shower facilities on each floor. The home employs a maintenance person part-time and all of the areas we saw were well maintained. The standard of cleanliness throughout the building was high and there were no unpleasant smells. The home has a spacious and well equipped kitchen which was awarded an A score (very good) by an environmental health officer in June 2011.

Our judgement

People who live at the home enjoy a spacious, comfortable and well maintained environment with aids and adaptations to meet their needs.

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 spoke with were happy with the home's staff and described them as kind and caring. One person said that the staff come quite quickly if he uses the call bell. His bedroom is on the top floor and staff don't use the lift during the night so it takes them a few minutes.

Other evidence

The home has a general manager, who is registered with CQC, and a care manager. There are three team leaders who supervise the care staff. In addition there are ancillary staff for laundry, cleaning and catering. Some of the staff have worked at the home for many years.

A notice-board in the office showed the training that had been provided in 2011. This was training about the Mental Capacity Act, and training about medicines that three members of staff had attended. Staff records showed that some members of staff had also attended training about dementia in 2011. There was no record of any training about fire safety or moving and handling, which should be refreshed periodically to ensure that staff are familiar with safe ways of working. Training is provided by a local training company and we saw that places had been booked for some staff to attend a 'leadership and management' course in January 2012.

We looked at a selection of staff files. This included a care assistant who started working at the home in January 2011. There were copies of training certificates from previous employment but no record of any training at Eventide. Another member of staff who joined the home in July 2009 did not have any record of attending any training.

Other members of staff had completed training about moving and handling, first aid and fire safety in 2010.

There were some records of staff having individual supervision meetings with their manager, however these meetings were infrequent with sometimes more than a year in between.

Our judgement

The people who live at the home are supported by a stable and experienced team of staff, however staff training and supervision were inconsistent across the workforce.

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 23 HSCA 2008 (Regulated Activities) Regulations 2010	Outcome 14: Supporting staff
	Why we have concerns: The people who live at the home are supported by a stable and experienced team of staff, however staff training and supervision was inconsistent across the workforce.	

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.

Compliance actions

The table below shows the essential standards of quality and safety that **are not being met**. Action must be taken to achieve compliance.

Regulated activity	Regulation	Outcome
Accommodation for persons who require nursing or personal care	Regulation 11 HSCA 2008 (Regulated Activities) Regulations 2010	Outcome 07: Safeguarding people who use services from abuse
	How the regulation is not being met: The people living at the home may not always be protected from abuse because Government and local guidance about safeguarding has not been put into place at the home.	

The provider must send CQC a report that says what action they are going to take to achieve 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.

Where a provider has already sent us a report about any of the above compliance actions, they do not need to include them in any new report sent to us after this review of compliance.

CQC should be informed in writing when these compliance 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

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