

Review of compliance

Scimitar Care Hotels plc Five Oaks

Region:	London
Location address:	377 Cockfosters Road Hadley Wood Hertfordshire EN4 0JT
Type of service:	Care home service without nursing
Date of Publication:	November 2011
Overview of the service:	<p>Five Oaks is a private care home owned by Scimitar Care Hotels PLC. The home is registered to provide accommodation and personal care for 44 older people some of whom may have dementia.</p> <p>The home is purpose built and has 42 single rooms and two double rooms on three floors. The registered manager has recently resigned.</p>

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

Our current overall judgement

Five Oaks 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 to check whether Five Oaks had made improvements in relation to:

- Outcome 04 - Care and welfare of people who use services
- Outcome 05 - Meeting nutritional needs
- Outcome 09 - Management of medicines
- Outcome 12 - Requirements relating to workers
- Outcome 13 - Staffing
- Outcome 17 - Complaints
- Outcome 21 - Records

How we carried out this review

We reviewed all the information we hold about this provider, carried out a visit on 11 October 2011, observed how people were being cared for, talked to staff and talked to people who use services.

What people told us

On the day of our inspection we were informed that the registered manager had very recently resigned from her post and that the service manager would be providing full time management of the home.

People who use the service were generally very positive about the care and treatment they receive at the home. People told us the staff were kind and professional. One person who had recently moved into the home told us, "It's a good home, it's clean and the carers are very good".

We observed staff supporting people in a friendly and respectful manner.

People told us that the quality of food provided by the home had improved since our last inspection. Comments included, "The variety of food is better", "It's improved a lot", "It's OK" and "It's really nice".

People confirmed that there was a choice of menu and that they always had enough to eat.

We observed that lunch time was relaxed and sociable and staff were providing discreet

support when needed.

We observed medicines given to three people and saw that they were given professionally, with patience and explanation.

Other people we spoke with said they were happy with the arrangements that the home makes for their medicines.

People who use the service were positive about the staff team at Five Oaks. Comments made by them included, "They are all hard working" and "I've no complaints about the staff".

Staff we spoke to told us they enjoyed working at the home and understood the need to improve service delivery.

People who use the service were generally positive about the staffing levels at Five Oaks. Some people told us that, as there were only three staff on duty during the night, the night staff were very busy during this time. One person commented, "They are so busy".

Staff we spoke to told us that there were sometimes problems with managing people with dementia who may not sleep throughout the night.

People told us that they had no complaints about the service. However some people told us they were unclear about how and who to make a complaint to if they did have concerns. One person told us, "I like to make suggestions rather than complaints".

What we found about the standards we reviewed and how well Five Oaks was meeting them

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

People who use the service generally received the appropriate care and treatment because their needs had been assessed and regularly reviewed. As far as possible, people were involved in the planning of their care needs.

Although peoples' dependency levels were being reviewed, this process was not always detailed enough to ensure the home was responding to all the changes in the needs of people using the service.

Overall, we found that Five Oaks was meeting this essential standard but, to maintain this, we suggested that some improvements were made.

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

The quality of food provided by the home had improved since our last inspection. People who use the service were being offered a choice from a nutritious and appetising menu.

Overall, we found that Five Oaks was meeting this essential standard.

Outcome 09: People should be given the medicines they need when they need them, and in a safe way

Arrangements were in place for the recording, handling and use of medicines. The service therefore, does protect people against the risks associated with the unsafe use and management of medication.

Overall, we found that Five Oaks 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 service has recently reviewed recruitment procedures and ongoing monitoring of staff to ensure that the home only employs suitable and appropriate staff.

Overall, we found that Five Oaks 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

There was an appropriate level of staffing during the day of the inspection to meet the needs of the people at the home.

However dependency levels of people using the service had not been carried out in sufficient detail and so it is difficult for the service to evidence there are enough staff on duty during the night.

Overall, we found that Five Oaks was meeting this essential standard but, to maintain this, we suggested that some improvements were made.

Outcome 17: People should have their complaints listened to and acted on properly

The service takes complaints seriously and responds to any concerns and complaints in a professional and appropriate way. However, people who use the service did not always know the correct procedure for making a complaint or for making a suggestion about the service.

Overall, we found that Five Oaks was meeting this essential standard but, to maintain this, we suggested that some improvements were made.

Outcome 21: People's personal records, including medical records, should be accurate and kept safe and confidential

The service had the necessary essential records. The records were generally well maintained, up to date and fit for purpose.

Overall, we found that Five Oaks was meeting this essential standard.

Actions 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.

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 04: Care and welfare of people who use services

What the outcome says

This is what people who use services should expect.

People who use services:

* Experience effective, safe and appropriate care, treatment and support that meets their needs and protects their rights.

What we found

Our judgement

The provider is compliant with Outcome 04: Care and welfare of people who use services

Our findings

What people who use the service experienced and told us

People who use the service were generally very positive about the care and treatment they receive at the home. People told us the staff were kind and professional. One person who had recently moved into the home told us, "It's a good home, it's clean and the carers are very good".

We observed staff supporting people in a friendly and respectful manner.

Other evidence

We examined care plans which provide staff with information about the individual care and treatment needs of people using the service. These plans were generally detailed and there was evidence that people using the service and their representatives had been involved in developing their own plan of care.

Care plans included risk assessments in relation to moving and handling, pressure management and nutrition. These risk assessments had been dated to enable staff to review people's risk and needs on an ongoing basis.

Although peoples' dependency levels were being reviewed, this process was not always detailed enough to ensure the home was responding to all the changes in needs of people using the service. Issues in relation to pressure care and nutrition were not always included in potential triggers that would alert staff that someone was becoming more dependent and therefore required more staffing and healthcare input.

The service manager agreed to review the format of care plans and include a more detailed nutritional assessment as well as a more detailed dependency assessment so that any changes in peoples' needs could be identified and addressed. We saw evidence that people's weight was being monitored on a monthly basis.

The level of detail of records of doctors and other health care professionals' visits had improved since our last inspection. This means that staff have a better understanding of the outcomes of any visits by health care professionals and any follow up action needed as a result.

Our judgement

People who use the service generally received the appropriate care and treatment because their needs had been assessed and regularly reviewed. As far as possible, people were involved in the planning of their care needs.

Although peoples' dependency levels were being reviewed, this process was not always detailed enough to ensure the home was responding to all the changes in the needs of people using the service.

Overall, we found that Five Oaks was meeting this essential standard but, to maintain this, we suggested that some improvements were made.

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

People who use the service told us that the quality of food provided by the home had improved since our last inspection. Comments included, "The variety of food is better", "It's improved a lot", "It's OK" and "It's really nice".

People confirmed that there was a choice of menu and that they always had enough to eat.

We observed that lunch time was relaxed and sociable and staff were providing discreet support when needed.

Other evidence

There was evidence from residents' meeting minutes and satisfaction surveys, undertaken by the service, that people felt the quality of food had improved.

We were invited to have lunch with people who use the service and found that the food provided was appetizing and of good quality. The cook on the day of the inspection had a good understanding of the dietary needs of individuals and confirmed that they had attended the appropriate food hygiene training.

Our judgement

The quality of food provided by the home had improved since our last inspection.

People who use the service were being offered a choice from a nutritious and appetising menu.

Overall, we found that Five Oaks was meeting this essential standard.

Outcome 09: 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 09: Management of medicines

Our findings

What people who use the service experienced and told us

We observed medicines given to three people and saw that they were given professionally and with patience and explanation.

Other people we spoke with said they were happy with the arrangements that the home makes for their medicines.

Other evidence

We visited the home on two occasions to review progress made following a warning notice issued on 25th August 2011, because of concerns about the safe handling of medication.

On 31st October 2011 we looked at the recording of receipts and administration on the Medication Administration Records and noted improvements in the home's systems. We observed no omissions in the recording the administration of medication. When medicines were not given the appropriate reason was stated. Variable doses such as 1 or 2 were recorded accurately so that the prescriber could review the medicines appropriately.

We counted several medicines including an anticoagulant to verify the records; Managers were also carrying daily stock counts. All our audits tallied and we were satisfied that medicines were being given as prescribed.

Staff have now received medication training from the supplying pharmacist and had

also started their distance learning training. There was evidence of regular assessments of competency so that safe practice could be regularly monitored.

All medicines including controlled drugs were stored securely. Balances could be reconciled with records in the register and the administration record. Managers told us that the new medicines policy which included reporting errors and safe administration and leave medicines would be available for all staff to refer to.

We were reassured by the acting manager that auditing would be robustly maintained to ensure that medicines continued to be managed safely.

The Warning notice issued on 25th August 2011 had been complied with and the home is now compliant with Regulation 13 of the Health and Social Care 2008 (Regulated Activities) Regulations 2010.

Our judgement

Arrangements were in place for the recording, handling and use of medicines. The service therefore, does protect people against the risks associated with the unsafe use and management of medication.

Overall, we found that Five Oaks was meeting this essential standard.

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 who use the service were positive about the staff team at Five Oaks. Comments from them included, "They are all hard working" and "I've no complaints about the staff". Staff we spoke to told us they enjoyed working at the home and understood the need to improve service delivery.

Other evidence

A recent investigation by Enfield Social Services highlighted an issue with some staff not having the required authorisation to work in this country. Action has been taken to address this matter. The service manager is currently managing the home full time due to the existing manager resigning recently. He told us that the organisation had learnt lessons from this and staffing procedures in the organisation have been reviewed and tightened up to ensure that staffing records and documents are monitored annually. This should ensure that only staff with the required authorisation are employed at the home.

Our judgement

The service has recently reviewed recruitment procedures and ongoing monitoring of staff to ensure that the home only employs suitable and appropriate staff.

Overall, we found that Five Oaks 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

People who use the service were generally positive about the staffing levels at Five Oaks. Some people told us that, as there were only three staff on duty during the night, the night staff were very busy during this time. One person commented, "They are so busy".

Staff we spoke to told us that there were sometimes problems with managing people with dementia who may not sleep throughout the night.

Other evidence

At the last inspection we issued an improvement action that staffing levels at night were to be reviewed in light of peoples' comments about call bell response times.

The service manager informed us that this review had taken place. Call bell times had been examined and the service concluded that staff were responding to people in a timely manner.

However as dependency levels were not being carried out in sufficient detail and in light of comments made by both people who use the service and staff at this inspection we have issued an improvement action that peoples' dependency levels are reviewed on a regular basis and staffing levels adjusted accordingly.

Our judgement

There was an appropriate level of staffing during the day of the inspection to meet the needs of the people at the home.

However dependency levels of people using the service had not been carried out in sufficient detail and so it is difficult for the service to evidence there are enough staff on

duty during the night.

Overall, we found that Five Oaks was meeting this essential standard but, to maintain this, we suggested that some improvements were made.

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 told us that they had no complaints about the service. However some people told us they were unclear about how and who to make a complaint to if they did have concerns. One person told us, "I like to make suggestions rather than complaints".

Other evidence

The written record of complaints was examined. Complaints were being recorded, however minor and included information about how the complaint was resolved. We discussed the need to improve awareness and information for people using the service about how to and who to make a complaint. The service manager told us he would review the procedures regarding complaints so that people who use the service know how to make complaints and suggestions for improvements.

Our judgement

The service takes complaints seriously and responds to any concerns and complaints in a professional and appropriate way. However, people who use the service did not always know the correct procedure for making a complaint or for making a suggestion about the service.

Overall, we found that Five Oaks was meeting this essential standard but, to maintain this, we suggested that some improvements were made.

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

People who use the service did not make any comments about this outcome area.

Other evidence

We issued a compliance action at the last inspection that records in relation to care plans and risk assessment must improve. This was because people who use the service were being put at risk of receiving unsafe or inappropriate care as their risk assessments were not being dated and important information about visits by health care professionals were not always being recorded in peoples' care plans.

We saw evidence from care plans we examined that the level of detail in peoples' records had improved. Care plans included detailed information about visits by health care professionals so staff were clear about any further actions they needed to take. Risk assessments were being dated and peoples' weight was now being monitored monthly.

Our judgement

The service had the necessary essential records. The records were generally well maintained, up to date and fit for purpose.

Overall, we found that Five Oaks 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 9 HSCA 2008 (Regulated Activities) Regulations 2010	Outcome 04: Care and welfare of people who use services
	Why we have concerns: People who use the service generally received the appropriate care and treatment because their needs had been assessed and regularly reviewed. As far as possible, people were involved in the planning of their care needs. Although peoples' dependency levels were being reviewed, this process was not always detailed enough to ensure the home was responding to all the changes in the needs of people using the service.	
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 was an appropriate level of staffing during the day of the inspection to meet the needs of the people at the home. However dependency levels of people using the service had not been carried out in sufficient detail and so it is difficult for the service to evidence there are enough staff on duty during the night.	
Accommodation for persons who require nursing or personal care	Regulation 19 HSCA 2008 (Regulated Activities) Regulations 2010	Outcome 17: Complaints
	Why we have concerns: The service takes complaints seriously and responds	

	to any concerns and complaints in a professional and appropriate way. However, people who use the service did not always know the correct procedure for making a complaint or for making a suggestion about the service.
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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 14 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

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