Review of compliance

MPS Care Limited Stilecroft	
Region:	North West
Location address:	51 Stainburn Road Stainburn Workington Cumbria CA14 5QL
Type of service:	Care Home for older people providing accommodation for persons who require nursing or personal care
Publication date:	July 2011
Overview of the service:	Stilecroft residential care home is registered to provide accommodation for up to forty-four older people, some fourteen of whom may have dementia. Stilecroft is run by MPS Care Homes Ltd and the Registered Provider is Mr Paul Gray. The home is on the outskirts of

	Workington in a quiet residential suburb. The property is a large, extended older building that has been adapted for use as a care home. The home is surrounded by attractive grounds with car parking facilities. Accommodation for residents is provided over three floors and there is a passenger lift. The home provides shared accommodation in the form of two large lounges, and two dining rooms. A separate wing for people who have dementia has a small lounge/dining room, part of which is a conservatory. The majority of bedrooms have a wash hand basin and bedrooms in the newer part of the building have en-suite toilet facilities. The home has sufficient accessible bathrooms and toilets available close to all the accommodation used by residents. The home has a range of aids and equipment to assist residents to maintain their independence. The home has the use of a shared 'people carrier'.

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

What we found overall

We found that Stilecroft was meeting all the essential standards of quality and safety we reviewed.

The summary below describes why we carried out the review, what we found and any action required.

Why we carried out this review

We carried out this review as part of our routine schedule of planned reviews.

How we carried out this review

We reviewed all the information we hold about this provider, carried out a visit on 26th May 2011, observed how people were being cared for, talked with people who use services, talked with staff, checked the provider's records, and looked at records of people who use services.

What people told us

All those we spoke to were very happy with the care and support they received.
Comments included,
'I was a physical wreck when I came in and look at me now'.
'The staff are lovely and so kind'.
'I am looked after wonderfully well'.
'I only have to ring the bell once and someone comes to help me'.

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

Outcome 1: People should be treated with respect, involved in discussions about their care and treatment and able to influence how the service is run

People using this service can express their views, so far as they are able, and are involved in making decisions about their care and support.

Overall, we found that Stilecroft was meeting this essential standard.

Outcome 2: Before people are given any examination, care, treatment or support, they should be asked if they agree to it

People using this service can be confident that their human rights are respected and taken into account.

Overall, we found that Stilecroft was meeting this essential standard.

Outcome 4: People should get safe and appropriate care that meets their needs and supports their rights

People who use this service experience effective, safe and appropriate care and support that meets their needs and protects their rights.

Overall, we found that Stilecroft was meeting this essential standard

Outcome 5: Food and drink should meet people's individual dietary needs

Although the catering was of a high standard this provider needs to make sure that there are robust systems in place so that nutritional needs are always met.

Overall, we found that Stilecroft was meeting this essential standard

Outcome 6: People should get safe and coordinated care when they move between different services

This service supports people to access other health and social care services they need.

Overall, we found that Stilecroft was meeting this essential standard

Outcome 7: People should be protected from abuse and staff should respect their human rights

People in this service were kept safe and were confident that the owners and the staff team would deal with any concerns appropriately.

Overall, we found that Stilecroft was meeting this essential standard

Outcome 8: People should be cared for in a clean environment and protected from the risk of infection

This home had good standards of cleanliness and the staff took care to make sure that infection was controlled appropriately.

Overall, we found that Stilecroft was meeting this essential standard

Outcome 9: People should be given the medicines they need when they need them, and in a safe way

Medicines are, on the whole, administered appropriately but the provider must ensure the audits cover all aspects of medication.

Overall, we found that Stilecroft was meeting this essential standard

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

Stilecroft provided a comfortable and suitable home where people felt relaxed and safe.

Overall, we found that Stilecroft was meeting this essential standard

Outcome 11: People should be safe from harm from unsafe or unsuitable equipment

Equipment in this home is suitable for purpose but the provider needs to keep this under review so that in the long term all equipment remains suitable to meet peoples' needs.

Overall, we found that Stilecroft was meeting this essential standard

Outcome 12: People should be cared for by staff who are properly qualified and able to do their job

All members of staff are suitably recruited so that only people with the right kind of ability and background work with vulnerable older people.

Overall, we found that Stilecroft was meeting this essential standard

Outcome 13: There should be enough members of staff to keep people safe and meet their health and welfare needs

People using this service are safe and their health and welfare needs are met by sufficient numbers of appropriate staff.

Overall, we found that Stilecroft was meeting this essential standard

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

People who use this service receive care, treatment and support from staff who are competent to carry out their role.

Overall, we found that Stilecroft was meeting this essential standard

Outcome 16: The service should have quality checking systems to manage risks and assure the health, welfare and safety of people who receive care

People who live in the home were happy with the way the standards of care and services were being monitored.

Overall, we found that Stilecroft was meeting this essential standard

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

People in this service trusted the manager and staff to deal with complaints effectively.

Overall, we found that Stilecroft was meeting this essential standard

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

People using this service can be confident that the personal records for their care treatment and support are properly managed and securely stored.

Overall, we found that Stilecroft was meeting this essential standard

Action we have asked the service to take

What we found
for each essential standard of quality and safety we reviewed

The following pages detail our findings and our regulatory judgement for each essential standard and outcome that we reviewed, linked to specific regulated activities where appropriate.

We will have reached one of the following judgements for each essential standard.

Compliant means that people who use services are experiencing the outcomes relating to the essential standard.

A **minor concern** means that people who use services are safe but are not always experiencing the outcomes relating to this essential standard.

A **moderate concern** means that people who use services are safe but are not always experiencing the outcomes relating to this essential standard and there is an impact on their health and wellbeing because of this.

A **major concern** means that people who use services are not experiencing the outcomes relating to this essential standard and are not protected from unsafe or inappropriate care, treatment and support.

Where we identify compliance, no further action is taken. Where we have concerns, the most appropriate action is taken to ensure that the necessary improvements are made. Where there are a number of concerns, we may look at them together to decide the level of action to take.

More information about each of the outcomes can be found in the *Guidance about compliance: Essential standards of quality and safety*.

Outcome 1:
Respecting and involving people who use services

What the outcome says

This is what people who use services should expect.

People who use services:

- Understand the care, treatment and support choices available to them.
- Can express their views, so far as they are able to do so, and are involved in making decisions about their care, treatment and support.
- Have their privacy, dignity and independence respected.
- Have their views and experiences taken into account in the way the service is provided and delivered.

What we found

Our judgement

The provider is compliant with outcome 1: Respecting and involving people who use services

Our findings

What people who use the service experienced and told us

All the people we spoke to during our visit told us how happy they were. Comments included,

‘I was a physical wreck when I was admitted and look at me now. I am so much better’.

‘I have been treated at all times with care and kindness’

‘The staff are good and helpful and I receive all the help I need’.

‘I love living here’.

Other evidence

We reviewed the information we hold about this service including that received from other agencies such as Social Services and the Fire Department. .

Stilecroft is an older building that has been adapted and extended for its present use as a care home. We spent some time in the home and were able to speak with

residents, care staff, domestic staff and the manager. All the residents spoke highly about the care they received and were pleased because they could make their own decisions about how they spent their days. There is plenty of communal space for residents to enjoy that is also available for activities and entertainment

We saw that people using this service were treated with dignity and staff were respectful in the way they addressed people's needs. They obviously knew the residents well and were aware of their needs and the level of support required to meet those needs whilst allowing the residents to retain their independence. Some of the residents we spoke with had lived in the home for some time and were very happy with the care they received

One lady told us she was able to take responsibility for her own medicines and the home had provided lockable facilities for her to keep her medication securely. She also said that she was not afraid to voice her opinions and she would speak up for those that were not able to express their views.

Our judgement
People using this service can express their views, so far as they are able, and are involved in making decisions about their care and support

Outcome 2:
Consent to care and treatment

What the outcome says

This is what people who use services should expect.

People who use services:

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

What we found

Our judgement

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

Our findings

What people who use the service experienced and told us

People living in the home did not comment on how the service was meeting this outcome

Other evidence

The people we spoke to during our visit were all very positive about the care and support they received.

The manager told us that prospective residents and their families are invited to the home to meet the staff and discuss the level of care and support required. It is not always possible for residents to visit so often family members take this responsibility on their behalf.

We reviewed a sample of individual care plans and found that in most instances they were signed by the resident indicating that they had agreed to the care and support required to meet their needs. However one resident did tell us that she didn't know about her care plan and hadn't seen it. The manager should make sure

all residents are given the opportunity to be involved in the care planning process. Their choice regarding this should be documented.

Residents are given choices about how and where to spend their time during the day. There is enough sufficient communal space for residents to meet with friends and family and to take part in organised activities if they wish.

One lady told us that she chose to be responsible for her own medication and the manager has made this possible.

The residents we spoke to told us they could approach the manager at any time for a chat or to voice a concern, knowing they would be listened to.

The care staff we spoke with during our visit told us they knew the residents well and were interested in their care plans and because of this were able to provide the appropriate level of care and support.

Our judgement
People using this service can be confident that their human rights are respected and taken into account.

Outcome 4:
Care and welfare of people who use services

What the outcome says

This is what people who use services should expect.

People who use services:
- Experience effective, safe and appropriate care, treatment and support that meets their needs and protects their rights.

What we found

Our judgement

The provider is compliant with outcome 4: Care and welfare of people who use services

Our findings

What people who use the service experienced and told us

People using this service told us they were happy in the home and that the staff were very kind. Comments included,
'I have been treated with care and kindness by the staff'.
'I am very pleased with my room and the home is very clean'.
'If I ring the call bell for assistance the staff come right away'.
'I can get up when I want to and stay up late if I wish'.
'I was a physical wreck when I came and look at me now'

Other evidence

We spoke to people about their experiences living in Stilecroft and were told the staff provided sensitive, flexible and personal care support. They felt well cared for and were treated as an individual at all times with their privacy and dignity preserved. Staff were available when needed, they only had to 'press the bell and a member of staff came immediately'. This was very much appreciated during the night.

Observations during our visit confirmed people were receiving safe and appropriate

care that was meeting their assessed needs. We saw staff using equipment safely and explaining and chatting to residents whilst they were assisting them. They were gentle and thoughtful and made sure clothing was properly arranged when transferred to and from a wheelchair.

Full assessments of needs are completed prior to admittance to the home and from this a plan of care is generated. The resident and their family are invited to participate in the care planning process so the manager can obtain as much information as possible. Family members, if this acceptable, are also invited to be part of the monthly reviews with the resident and staff. The opinion of the residents is always taken into account with regards to the delivery of care. Likes and dislikes are noted as are food preferences.
We looked at a small sample of care records and found them, in the main, to contain sufficient information for staff to provide an appropriate level of care. However in some cases more detailed and up date information regarding food and dietary requirements is required and all residents should have a full nutritional assessment recorded in their plan of care.
Monthly reviews take place and the manager also undertakes audits on the care plans to ensure they are up to date and sufficiently detailed.

Our judgement

People who use this service experience effective, safe and appropriate care and support that meets their needs and protects their rights.

Outcome 5:
Meeting nutritional needs

What the outcome says

This is what people who use services should expect.

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

What we found

Our judgement

The provider is compliant with outcome 5: Meeting nutritional needs

Our findings

What people who use the service experienced and told us
People told us that, on the whole, they enjoyed their meals and they could eat in their rooms if they wished. However one lady commented that 'The quality of the meals can depend on which cook is on duty'.

Other evidence
People told us that they enjoyed their meals and that there was always plenty to eat. However one resident did remark that the quality of the food did depend upon which cook was on duty. When we discussed this with the manager she confirmed that she knew about this situation and steps were being taken to address it. Another cook has recently been appointed.

We spoke to the cook who was preparing the evening meal and had a look at the menus. These indicated a variety of nutritious meals with choices available at each meal.

We briefly observed lunch being served and noted that there were 'two sittings'. The earlier one enabled the staff to give more time to those residents who needed assistance with eating their meal. This was given with the minimum of fuss and in a relaxed manner. The system also ensured all the residents always had a hot meal.

There is a variety of diets and the cook confirmed that she is able to deal with diabetic meals, soft diets and pureed meals.

Likes and dislikes are shown on care plans and weights are recorded. We saw that peoples' weights were constant. However we noted a lack of detailed nutritional assessments on some care plans and the manager should ensure these are completed for all those living in the home.

Our judgement
Although the catering was of a high standard this provider needs to make sure that there are robust systems in place so that nutritional needs are always met.

Outcome 6:
Cooperating with other providers

What the outcome says

This is what people who use services should expect.

People who use services:

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

What we found

Our judgement

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

Our findings

What people who use the service experienced and told us
There were no specific comments made by people using this service with regards to this outcome.

Other evidence
Discussions with the manager confirmed that people had access to their own doctor and other healthcare professionals including the district nursing service when required.
Optical and dental services are accessed as and when necessary.

Prior to our visit we contacted social services who confirmed that they had no concerns regarding this service. The manager keeps in touch with social workers especially when new residents are admitted as this keeps the 'moving in' process as smooth as possible.

We spoke to some residents and they confirmed that they were able to see their doctor when they wanted although one lady said she didn't need to see him as she 'felt very well'

Our judgement
This service supports people to access other health and social care services they need.

Outcome 7:
Safeguarding people who use services from abuse

What the outcome says

This is what people who use services should expect.

People who use services:

- Are protected from abuse, or the risk of abuse, and their human rights are respected and upheld.

What we found

Our judgement

The provider is compliant with outcome 7: Safeguarding people who use services from abuse

Our findings

What people who use the service experienced and told us

People told us the staff ere kind and considerate and treated them well. Comments included,

‘The staff are very kind’.

‘I am treated with nothing but care and kindness’.

‘I am looked after very well and I feel safe’.

Other evidence

This service has a full set of policies and procedures in place for dealing with allegations of abuse. Staff we spoke with confirmed that they understood the principles of safeguarding and what to do if they saw anything that gave them concern. They told us they would not have any hesitation in reporting any incident that gave them cause for concern. Training has been completed in Protection of Vulnerable Adults and Deprivation of Liberties.

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As there is a unit in the home that care for people with more complex needs training has also been completed in dementia care and how to care for people with very complex needs.

Prior to our visit we contacted Social Services who confirmed that they had not

received and safeguarding referrals and the Care Quality Commission had not received any concerns about care practices.

Our judgement
People in this service were kept safe and were confident that the owners and the staff team would deal with any concerns appropriately.

Outcome 8:
Cleanliness and infection control

What the outcome says

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

What we found

Our judgement

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

Our findings

What people who use the service experienced and told us

People we spoke with were happy with their accommodation. Comments included,

'The home is always clean'

My room is always lovely and clean'.

'There are no offensive smells'.

Other evidence

On the day of our visit the home was clean, tidy and free from any offensive smells. A tour of the building showed that the bathroom and toilet areas were clean with hand washing dispensers in each of them .Although there were paper towels in all the bathrooms some of them lacked dispensers and this should be addressed as soon as possible. Information from the Environmental Health department confirmed that they had no concerns regarding this service.

Staff have completed training in infection control and all risk assessments are up to date. The manager confirmed that she was aware of the Department of Health Code of Practice regarding the prevention and control of infections.

Our judgement

This home had good standards of cleanliness and the staff took care to make sure that infection was controlled appropriately.

Outcome 9:
Management of medicines

What the outcome says

This is what people who use services should expect.

People who use services:
- Will have their medicines at the times they need them, and in a safe way.
- Wherever possible will have information about the medicine being prescribed made available to them or others acting on their behalf.

What we found

Our judgement

The provider is compliant with outcome 9: Management of medicines

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Our findings

What people who use the service experienced and told us

There were no specific comments made by people with regards to this outcome.

Other evidence

There have been concerns raised in the past with regards to the safety of medicine administration and the manager has worked hard to ensure medication is administered in a safe manner. She told us that she completed weekly checks and audits of medications, including the recording charts, labelling, ordering, the medication trolleys and direct observation of staff practice. There are procedures in place covering all aspects of medication. These include the administration of 'as and when' medication.

Medication is provided by a local pharmacy but they do not provide staff training in safe handling of medicines. The manager told us that staff training had been provided in a variety of ways including open learning courses (e.g. Learn Excel) via colleges.

The manager confirmed that there are residents at the home who are prescribed: medication for complex needs and the district nurses come into the home to

administer this and keep their own records on file.

Although the manager does conduct weekly audits of medication administration and records we did request that, in future, more in depth audits should be completed to cover all aspects of the management of medicines. She should also ensure that when she audits the care plans the recording of all medicines information is up to date. All weekly audits should be recorded and we will request details of the audits be forwarded to CQC in due course.

Our judgement
Medicines are, on the whole, administered appropriately but the provider must ensure the audits cover all aspects of medication to ensure documentation is always up to date.

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

People told us they were happy with their accommodation. Comments included,

'I am very happy with my room'.

'The home is always clean and tidy'.

'There are no unpleasant smells'.

'I like being able to use any of the lounges'.

Other evidence

The manager and the maintenance man confirmed that the work required by the Fire and Rescue Authority had been completed and we were shown examples. Fire notices were on display, the designated staircase had been made more secure and the self closing doors, all of which appeared in good working order, were not wedged open. The emergency exits were no longer blocked.

We undertook a tour of the building – there are two large communal lounges and a conservatory in the main building together with a dining area. There is a separate unit for people who may have dementia type illnesses. This is equipped with a lounge and small dining room. There is a small kitchen in this unit so that staff can easily make drinks and snacks for the residents. Throughout the home there are communal facilities such as baths, showers, toilets and a wet room (the radiator was extremely hot here. The maintenance man did turn it down and showed us the cover

he was making for it). Some of the individual bedrooms have en-suite toilet and hand wash basin. There are several staircases and a passenger lift to help people access all areas of the home. Outside there were pleasant gardens and car parking facilities.

We noted that there were minor adjustments that needed attention and discussed these with the manager who told us the maintenance manager would deal with these immediately.

The bedrooms were all clean, tidy and well furnished. The bed linen matched and was of reasonable quality. Every bed was made and clean towels were provided to each resident every day. Bedrooms were personal to each resident with pictures, ornaments and photographs.

We did note that some of the windows did not have restrictors on them, or if they did they were not in use. We asked the manager to carry out an audit of these as they need to be attended to quickly. She confirmed that this would be done as soon as our visit was completed.

The service employs maintenance and cleaning staff in order to ensure the environmental standards are maintained. Risk assessments are in place and reviewed monthly with the care plans.

Our judgement
Stilecroft provided a comfortable and suitable home where people felt relaxed and safe.

Outcome 11:
Safety, availability and suitability of equipment

What the outcome says

This is what people should expect.

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

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

What we found

Our judgement

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

Our findings

What people who use the service experienced and told us

People told us they had aids to help with the activities of daily living like bathing and being able to move freely around the home. One lady commented that 'If I use my call bell the staff come immediately'.

Other evidence

We checked on the equipment we saw during our site visit and we judged that there was suitable equipment in the building to help people with their mobility and the manager confirmed that this equipment had regular maintenance and safety checks.

We saw that equipment was available where required, such as mobile hoists, slings, wheelchairs, handling belts, bed rails and pressure relieving equipment such as mattresses and cushions.

The bathrooms and showers were suitable for people who may have a physical disability and handrails on the corridors assisted people to access all parts of the building.

We observed staff assisting a resident by using a hoist. They used the equipment safely and explained and chatted to the resident whilst they were assisting her. They were gentle and thoughtful; making sure clothing was arranged properly when

transferred t and from her wheelchair.

There is a call bell system throughout the building and residents told us that when they used the bell staff the staff attended them very quickly.

Our judgement

Equipment in this home is suitable for purpose but the provider needs to keep this under review so that in the long term all equipment remains suitable to meet peoples' needs.

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 we spoke with told us they were happy with the staff. Comments included,

'The staff are lovely and very kind'

'The staff treat me with care and kindness'

'When I ring the call bell they come straight away'.

Other evidence

The home has a robust system in place with regards to the recruitment and selection of staff. The manager told us that all new staff undergo suitable checks so that only people with the appropriate kind of background are taken on to work with vulnerable people.

We looked at a small sample of staff files and noted that completed application forms, written references and a formal interview all form part of the recruitment process. All staff must have a full Criminal Records Bureau check completed before they start work.

The company has an equal opportunities system to make sure recruitment is fair and equitable and that any new appointment is made on these terms. There is an induction programme for new starters to complete.

Our judgement
All members of staff are suitably recruited so that only people with the right kind of ability and background work with vulnerable older people.

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 told us they were happy with the number of staff on duty and that there was always enough to assist them when they needed help.

Other evidence

On the day of our visit there were five members of the care staff team, a student on work placement, the deputy manager and the registered manager. There was also a maintenance manager, domestic and catering staff making up the full staff compliment.

We saw that the care staff had time to speak to the residents and provide personal care in a relaxed and unhurried manner. We spoke to some of the people living in Stilecroft and they said, ‘When I ask for help there is always someone available’, and ‘The girls are always round and about’.

We looked at the staff rosters for the 4-week period encompassing the date of our visit and found that the manager ensured staffing levels remained steady over that period of time.

When we looked at numbers and dependency levels we judged that these ratios

were acceptable to provide a good level of personal care and support to those living in the home

Our judgement
People using this service are safe and their health and welfare needs are met by sufficient numbers of appropriate staff.

Outcome 14:
Supporting workers

What the outcome says

This is what people who use services should expect.

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

What we found

Our judgement

The provider is compliant with outcome 14: Supporting workers

Our findings

What people who use the service experienced and told us

The people we spoke to did not comment directly on the competency of the staff but did say, 'The staff are very good at their job and always seem to know what they are doing'.

Other evidence
On the day of the site visit we asked for and received a copy of the training record and the training plan for staff. We could see that staff had attended training in all the core subjects necessary for their role and also extra subjects such as, Protection of Vulnerable Adults, Fire Safety, Health and Safety and Infection Control. Staff that are responsible for the administration of medicines have also completed training in this subject, and over 90% of the care staff have completed their NVQ awards at level 2 or 3. The manager also accesses training from visiting healthcare professionals to ensure care staff have a good knowledge in how to deal with conditions that may affect older people.

The staff we spoke to during our visit all confirmed that they received good support from the home manager and her deputy. The manager operates an 'open door' policy and the staff know they can approach her at any time for advice and support.

Staff supervision, which takes the form of one to one meetings or observations of

the delivery of care, is ongoing. Both processes aid the personal and professional development of the staff working in Stilecroft.

Our judgement

People who use this service receive care, treatment and support from staff who are competent to carry out their role.

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 we spoke to were happy with the quality of care and services provided and they said that staff asked them if everything was satisfactory. We also heard that the manager was always available to speak to them every day and this gave them the opportunity to voice their opinions if they wished.

Other evidence

We asked the provider to complete a self assessment for this outcome and this told us about the systems in place for monitoring the quality of the provision of care.

The home requests questionnaires to be completed by those living in Stilecroft, where they are able, and also asks the families and visitors. These highlight any areas where there may be concerns or areas which need improvement. The manager also conduct audits on different areas in the home, allowing her to monitor the quality of the service provided.The home has clear policies and guidelines relating to adverse events, incidents and near misses.

We saw the results of the latest survey completed and noted that the areas covered included, food, activities, standard of the existing service, cleanliness of the home, communal facilities, laundry and standard of rooms. Residents were also asked to comment on the standard of care and the attitude of the staff. In all the areas covered many of the residents considered all aspects as ‘excellent’ whilst others considered them as ‘good’. Where the responses were less than ‘excellent’ or ‘good’ the manager is working towards improvements.

The management also continually seeks feedback from residents who have been in the home for respite care and act on any negative comments in a positive way to improve the provision of care. The service learns from any incidents or near misses and improves the care for those living in the the home.

Our judgement
People who live in the home were happy with the way the standards of care and services were being monitored.

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

On the day of our visit no one we spoke to had any concerns to tell us about. All the comments we received were positive.

One lady told us, 'I would certainly speak up on my behalf or any for any other resident if there was a problem that needed attention'.

Another lady said, 'I certainly have no complaints, the staff are wonderful'.

Other evidence

The home has a complaints procedure in place and there are copies on display for people to read. It is also outlined in the Statement of Purpose.

Staff said they would support people who had any complaints and didn't see this as a problem as they understood that this was the way to make things better in the home. The manager and the staff said they dealt with complaints when they were first brought to them so that they could be quickly resolved.

There is a complaints log in place but there had been none to record. Social services contracts department confirmed they had no concerns at all about the service and the Care Quality Commission has not received any.

Our judgement
People in this service trusted the manager and staff to deal with complaints effectively.

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

The people using this service had no specific comments to make about this outcome.

Other evidence

We learnt from the self-assessments sent by the manager that the home has suitable systems in place so that important things are evidenced in records. We also saw that all records were stored securely in locked cabinets in the manager's office. Computers are password protected as a further security measure.

On the whole the records kept were up to date and generally reflected the care needs of those living in Stilecroft. We did judge, however, that some part of the care planning system needed updating to ensure the staff were fully informed about the provision of care required and the lifestyle choices of the residents. However this did not detract from the fact that the outcomes for people using this service are good and that every person we spoke to were very happy with their care.

Our judgement
People using this service can be confident that the personal records for their care treatment and support are properly managed and securely stored. .

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 needing nursing or personal care.	**Regulation 14 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010**	Outcome 5 Meeting nutritional needs.
	Why we have concerns: Although the catering was of a high standard this provider needs to make sure that there are robust systems in place so that nutritional needs are always met by ensuring all residents have a full nutritional assessment	
Accommodation for persons needing nursing or personal care.	**Regulation 13 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010**	Outcome 9 Management of medicines
	Why we have concerns: Medicines are, on the whole, administered appropriately but the provider must ensure the audits cover all aspects of medication administration.	

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

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

The provider's report should be sent within 10 days of this report being received.

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
	<Enter regulation number>	<Enter outcome number and title>
	How the regulation is not being met: Copy and paste the 'our judgement' text from the end of the 'our findings' section in each relevant outcome above	
	<Enter regulation number>	<Enter outcome number and title>
	How the regulation is not being met: Copy and paste the 'our judgement' text from the end of the 'our findings' section in each relevant outcome above	
<Enter activity>	<Enter regulation number>	<Enter outcome number and title>
	How the regulation is not being met: Copy and paste the 'our judgement' text from the end of the 'our findings' section in each relevant outcome above	

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 <XX> days of this report being received.

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.

Enforcement action we have taken to protect the welfare and safety of people using this service

The table below shows enforcement action we have taken because the service provider is not meeting the essential standards of quality and safety shown below.

<table>
<tr><th colspan="4">Enforcement action we have taken</th></tr>
<tr><td colspan="4"><Enter enforcement action>
This action has been taken in relation to:</td></tr>
<tr><td>Regulated activity</td><td>Regulation or section of the Act</td><td>Outcome</td><td>To be met by (if applicable)</td></tr>
<tr><td rowspan="3"><Enter activity></td><td><Regulation number or Section Act></td><td><Enter outcome number and title></td><td rowspan="3">DD Month YYYY</td></tr>
<tr><td>How the regulation or section is not being met:</td><td>Registered manager:</td></tr>
<tr><td>Copy and paste the 'our judgement' text from the end of the 'our findings' section in each relevant outcome above</td><td>Include the name of the registered manager if relevant or put N/A</td></tr>
</table>

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
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