

***We are the regulator:** Our job is to check whether hospitals, care homes and care services are meeting essential standards.*

Cuerden Developments Limited - Alexandra Court

Alexandra Court, Howard Street, Pemberton,
Wigan, WN5 8BH

Tel: 01942215555

Date of Inspection: 28 January 2015

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2015

We inspected the following standards to check that action had been taken to meet them. This is what we found:

Complaints

✘ Action needed

Details about this location

Registered Provider	Cuerden Developments Ltd
Registered Manager	Mrs Judith Lesley Melling
Overview of the service	<p>Alexandra Court is a 40 bed intermediate care centre that provides a time limited period of assessment and rehabilitation for people who may have had a hospital admission but are not ready to be discharged home safely or to be supported at home.</p> <p>It is a purpose built two storey building with bedrooms on both floors. There is a car park at the front of the home.</p> <p>As an integral part of the purpose and function of Alexander Court staff members employed by the NHS or social services such as physiotherapists, occupational therapists, social workers and a GP are either based there or work there on a regular basis.</p> <p>It is located in Pemberton, near Wigan and is close to shops and public transport links.</p>
Type of service	Care home service with nursing
Regulated activities	Accommodation for persons who require nursing or personal care Diagnostic and screening procedures Treatment of disease, disorder or injury

Contents

When you read this report, you may find it useful to read the sections towards the back called 'About CQC inspections' and 'How we define our judgements'.

	Page
<hr/>	
Summary of this inspection:	
Why we carried out this inspection	4
How we carried out this inspection	4
What people told us and what we found	4
What we have told the provider to do	4
More information about the provider	5
<hr/>	
Our judgements for each standard inspected:	
Complaints	6
<hr/>	
Information primarily for the provider:	
Action we have told the provider to take	8
<hr/>	
About CQC Inspections	9
<hr/>	
How we define our judgements	10
<hr/>	
Glossary of terms we use in this report	12
<hr/>	
Contact us	14

Summary of this inspection

Why we carried out this inspection

We carried out this inspection to check whether Cuerden Developments Limited - Alexandra Court had taken action to meet the following essential standards:

- Complaints

This was an unannounced inspection.

How we carried out this inspection

We looked at the personal care or treatment records of people who use the service, carried out a visit on 28 January 2015, observed how people were being cared for and talked with people who use the service. We talked with carers and / or family members, talked with staff, reviewed information given to us by the provider and reviewed information sent to us by other regulators or the Department of Health. We talked with other regulators or the Department of Health.

What people told us and what we found

We carried out an unannounced focused inspection of this service on 28 January 2015. This inspection was to follow up on whether action had been taken to address previous non-compliance with Regulation 19 HSCA 2008 (Regulated Activities) Regulations 2010 Complaints.

The provider had submitted an action plan to describe what they would do to meet legal requirements. We found that the provider had reviewed their complaints policy and procedure and this was on display. However systems were not in place to ensure an appropriate and timely response to complaints and we saw no audits of compliance to the revised policy. This means legal requirements had not been met.

You can see our judgements on the front page of this report.

What we have told the provider to do

We have asked the provider to send us a report by 13 June 2015, setting out the action they will take to meet the standards. We will check to make sure that this action is taken.

Where providers are not meeting essential standards, we have a range of enforcement powers we can use to protect the health, safety and welfare of people who use this service (and others, where appropriate). When we propose to take enforcement action, our decision is open to challenge by the provider through a variety of internal and external appeal processes. We will publish a further report on any action we take.

More information about the provider

Please see our website www.cqc.org.uk for more information, including our most recent judgements against the essential standards. You can contact us using the telephone number on the back of the report if you have additional questions.

There is a glossary at the back of this report which has definitions for words and phrases we use in the report.

Our judgements for each standard inspected

Complaints

✘ Action needed

People should have their complaints listened to and acted on properly

Our judgement

The provider was not meeting this standard.

There was an effective complaints system available. However complaints people made were not responded to in a timely and appropriate manner.

We have judged that this has a minor impact on people who use the service, and have told the provider to take action. Please see the 'Action' section within this report.

Reasons for our judgement

We undertook an unannounced focused inspection of Alexandra Court on 28th January 2015. This inspection was done to check that improvements to meet legal requirements planned by the provider after our 21 July 2014 inspection had been made. The provider had submitted an action plan to meet CQC essential standards on 24 October 2014.

The complaints procedure had been reviewed and was displayed on notice boards in the public areas of the home.

Despite a number of active complaints since July 2014 we saw no audits in place to review the complaints procedure in use and monitor compliance to the reviewed policy.

Although the registered manager told us she had done staff updates in meetings and used staff supervision to raise awareness of the complaints procedure she could not show us evidence of this. The action plan included the registered manager receiving senior staff support from the company directors and provision of a buddying system with other managers. We saw no evidence that these improvements had taken place. The registered manager told us that she regularly discussed complaints with the clinical commissioning group representatives and they work with the hospital trust to improve systems which have given rise to complaints.

We reviewed a number of written complaints and saw that timescales for acknowledgement and a full response as laid out in the policy and procedure were not being met. We saw no evidence of either written notes of investigations of complaints or outcomes being recorded on the complaints log. The registered manager told us several complaints had been referred to the safeguarding team and these had not been closed.

We saw a new leaflet which was introduced to encourage the open expression of complaints at the home and a leaflet produced in partnership with the hospital and community trusts regarding Intermediate Care Services which aimed to improve

information to people who used the service and their families.

We spoke with several people who used the service and one family member who commented positively on the home. One person said: "I feel very safe." Another person said: "The staff are pleasant with me." None of those we spoke with had made complaints about the home but they knew who to speak with if they had concerns.

This section is primarily information for the provider

✕ Action we have told the provider to take

Compliance actions

The table below shows the essential standards of quality and safety that **were not being met**. The provider must send CQC a report that says what action they are going to take to meet these essential standards.

Regulated activities	Regulation
Accommodation for persons who require nursing or personal care	Regulation 19 HSCA 2008 (Regulated Activities) Regulations 2010 Complaints
Diagnostic and screening procedures Treatment of disease, disorder or injury	How the regulation was not being met: The provider did not take appropriate steps to respond to complaints, which was a breach of regulation 19 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010, which corresponds to regulation 16 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

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 by 13 June 2015.

CQC should be informed when compliance actions are complete.

We will check to make sure that action has been taken to meet the standards and will report on our judgements.

About CQC inspections

We are the regulator of health and social care in England.

All providers of regulated health and social 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 essential standards are described in the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009. We regulate against these standards, which we sometimes describe as "government standards".

We carry out unannounced inspections of all care homes, acute hospitals and domiciliary care services in England at least once a year to judge whether or not the essential standards are being met. We carry out inspections of other services less often. All of our inspections are unannounced unless there is a good reason to let the provider know we are coming.

There are 16 essential standards that relate most directly to the quality and safety of care and these are grouped into five key areas. When we inspect we could check all or part of any of the 16 standards at any time depending on the individual circumstances of the service. Because of this we often check different standards at different times.

When we inspect, we always visit and we do things like observe how people are cared for, and we talk to people who use the service, to their carers and to staff. We also review information we have gathered about the provider, check the service's records and check whether the right systems and processes are in place.

We focus on whether or not the provider is meeting the standards and we are guided by whether people are experiencing the outcomes they should be able to expect when the standards are being met. By outcomes we mean the impact care has on the health, safety and welfare of people who use the service, and the experience they have whilst receiving it.

Our inspectors judge if any action is required by the provider of the service to improve the standard of care being provided. Where providers are non-compliant with the regulations, we take enforcement action against them. If we require a service to take action, or if we take enforcement action, we re-inspect it before its next routine inspection was due. This could mean we re-inspect a service several times in one year. We also might decide to re-inspect a service if new concerns emerge about it before the next routine inspection.

In between inspections we continually monitor information we have about providers. The information comes from the public, the provider, other organisations, and from care workers.

You can tell us about your experience of this provider on our website.

How we define our judgements

The following pages show our findings and regulatory judgement for each essential standard or part of the standard that we inspected. Our judgements are based on the ongoing review and analysis of the information gathered by CQC about this provider and the evidence collected during this inspection.

We reach one of the following judgements for each essential standard inspected.

✓ Met this standard This means that the standard was being met in that the provider was compliant with the regulation. If we find that standards were met, we take no regulatory action but we may make comments that may be useful to the provider and to the public about minor improvements that could be made.

✗ Action needed This means that the standard was not being met in that the provider was non-compliant with the regulation. We may have set a compliance action requiring the provider to produce a report setting out how and by when changes will be made to make sure they comply with the standard. We monitor the implementation of action plans in these reports and, if necessary, take further action. We may have identified a breach of a regulation which is more serious, and we will make sure action is taken. We will report on this when it is complete.

✗ Enforcement action taken If the breach of the regulation was more serious, or there have been several or continual breaches, we have a range of actions we take using the criminal and/or civil procedures in the Health and Social Care Act 2008 and relevant regulations. These enforcement powers include issuing a warning notice; restricting or suspending the services a provider can offer, or the number of people it can care for; issuing fines and formal cautions; in extreme cases, cancelling a provider or managers registration or prosecuting a manager or provider. These enforcement powers are set out in law and mean that we can take swift, targeted action where services are failing people.

How we define our judgements (continued)

Where we find non-compliance with a regulation (or part of a regulation), we state which part of the regulation has been breached. Only where there is non compliance with one or more of Regulations 9-24 of the Regulated Activity Regulations, will our report include a judgement about the level of impact on people who use the service (and others, if appropriate to the regulation). This could be a minor, moderate or major impact.

Minor impact - people who use the service experienced poor care that had an impact on their health, safety or welfare or there was a risk of this happening. The impact was not significant and the matter could be managed or resolved quickly.

Moderate impact - people who use the service experienced poor care that had a significant effect on their health, safety or welfare or there was a risk of this happening. The matter may need to be resolved quickly.

Major impact - people who use the service experienced poor care that had a serious current or long term impact on their health, safety and welfare, or there was a risk of this happening. The matter needs to be resolved quickly

We decide the most appropriate action to take to ensure that the necessary changes are made. We always follow up to check whether action has been taken to meet the standards.

Glossary of terms we use in this report

Essential standard

The essential standards of quality and safety are described in our *Guidance about compliance: Essential standards of quality and safety*. They consist of a significant number of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009. These regulations describe the essential standards of quality and safety that people who use health and adult social care services have a right to expect. A full list of the standards can be found within the *Guidance about compliance*. The 16 essential standards are:

Respecting and involving people who use services - Outcome 1 (Regulation 17)

Consent to care and treatment - Outcome 2 (Regulation 18)

Care and welfare of people who use services - Outcome 4 (Regulation 9)

Meeting Nutritional Needs - Outcome 5 (Regulation 14)

Cooperating with other providers - Outcome 6 (Regulation 24)

Safeguarding people who use services from abuse - Outcome 7 (Regulation 11)

Cleanliness and infection control - Outcome 8 (Regulation 12)

Management of medicines - Outcome 9 (Regulation 13)

Safety and suitability of premises - Outcome 10 (Regulation 15)

Safety, availability and suitability of equipment - Outcome 11 (Regulation 16)

Requirements relating to workers - Outcome 12 (Regulation 21)

Staffing - Outcome 13 (Regulation 22)

Supporting Staff - Outcome 14 (Regulation 23)

Assessing and monitoring the quality of service provision - Outcome 16 (Regulation 10)

Complaints - Outcome 17 (Regulation 19)

Records - Outcome 21 (Regulation 20)

Regulated activity

These are prescribed activities related to care and treatment that require registration with CQC. These are set out in legislation, and reflect the services provided.

Glossary of terms we use in this report (continued)

(Registered) Provider

There are several legal terms relating to the providers of services. These include registered person, service provider and registered manager. The term 'provider' means anyone with a legal responsibility for ensuring that the requirements of the law are carried out. On our website we often refer to providers as a 'service'.

Regulations

We regulate against the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009.

Responsive inspection

This is carried out at any time in relation to identified concerns.

Routine inspection

This is planned and could occur at any time. We sometimes describe this as a scheduled inspection.

Themed inspection

This is targeted to look at specific standards, sectors or types of care.

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