

Review of compliance

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| <p>Ryecroft Care Limited Ryecroft Private Residential Care Home</p> | |
| Region: | North West |
| Location address: | 1 Kings Avenue Meols Wirral Merseyside CH47 0NH |
| Type of service: | Care home service without nursing |
| Date of Publication: | May 2012 |
| Overview of the service: | Ryecroft Care Home is registered to provide care for 14 people in total. The service is situated in Meols Wirral and is close to local amenities such as shops, cafes, restaurants and bars. It is close to local transport links to all parts of the Wirral, Liverpool and Chester. |

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

Our current overall judgement

Ryecroft Private Residential Care Home was not meeting one or more essential standards. Action is needed.

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

Why we carried out this review

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

How we carried out this review

We reviewed all the information we hold about this provider, carried out a visit on 20 April 2012, observed how people were being cared for, looked at records of people who use services, talked to staff, reviewed information from stakeholders and talked to people who use services.

What people told us

We spoke with people who used the service they told us they felt well cared for and respected by the care workers. Some comments made were;

"I have my routines that I like to stick to the girls are very good and understand what help I need."

"I pretty much take care of myself but it's nice to know that the staff are here if I need them."

"This is my home from home."

"The staff are very attentive and kind."

A family member spoken with said they felt their mother was well cared for and the staff team were approachable and very kind.

We observed people being supported in a respectful and sensitive manner.

People spoken with told us they felt safe and supported by the staff team and would feel comfortable raising concerns with the registered manager or one of the providers. We were also told that they felt confident in speaking to the care workers and registered manager about the level of support they felt they needed. Some comments were;

"This is a small home and that is one of the reasons I chose it the girls are very gentle and

respectful I feel very comfortable here."

We sought information about the service offered at Ryecroft from Wirral Department of Adults Social Services (DASS) and Wirral Local Involvement Networks (LINKs). No issues of concern were raised.

What we found about the standards we reviewed and how well Ryecroft Private Residential Care Home was meeting them

Outcome 01: People should be treated with respect, involved in discussions about their care and treatment and able to influence how the service is run

People's privacy, dignity and independence were respected.

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

People did not experience care, treatment and support that met their needs.

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

People who use the service were protected from the risk of abuse, because the provider had taken reasonable steps to identify the possibility of abuse and prevent the abuse from happening.

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

People were cared for by staff who were supported to deliver care and treatment safely to an appropriate 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

The provider had an effective system to regularly assess and monitor the quality of the service that people receive.

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. We will check to make sure that this action has been taken.

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.

Where we judge that a provider is non-compliant with a standard, we make a judgement about whether the impact on people who use the service (or others) is minor, moderate or major:

A minor impact means that 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.

A moderate impact means that 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.

A major impact means that 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.

Where we identify compliance, no further action is taken. Where we have concerns, the most appropriate action is taken to ensure that the necessary changes are made.

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

Outcome 01: Respecting and involving people who use services

What the outcome says

This is what people who use services should expect.

People who use services:

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

What we found

Our judgement

The provider is compliant with Outcome 01: Respecting and involving people who use services

Our findings

What people who use the service experienced and told us

At the time of the inspection visit there were 12 people living at Ryecroft Care Home.

We observed people being supported in a respectful and sensitive manner.

We spoke with four people who used the service. All said they felt cared for and respected. Some comments made were:

"This is my home from home."

"The staff are very attentive and kind."

"I do my own thing and that's ok with everyone."

"We have meetings to discuss things like the menus and activities."

We spoke with a family member who confirmed their relative had visited the service prior to being offered a place and moving into the service.

We sought information about the service offered at Ryecroft from Wirral Department of

Adults Social Services (DASS) and Wirral Local Involvement Networks (LINKs). No issues of concern were raised.

Other evidence

Records showed the service actively engaged with people who used the service to keep them informed of the information recorded about them. Requests for consent to share this information with other professionals such as health and social care were also sought. This meant people were involved in decision making processes about their care.

We looked at three care files and saw evidence that people's daily routines were recorded in detail. People who used the service confirmed their key workers spent time with them to discuss their preferred routines and lifestyle choices. This meant people were able to express their views and were involved in making decisions about their care and treatment.

The provider may find it useful to note care plans had not been signed by the people who used the service or where appropriate a family member. To demonstrate their agreement to the care and support to be provided.

Our judgement

People's privacy, dignity and independence were respected.

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 non-compliant with Outcome 04: Care and welfare of people who use services. We have judged that this has a moderate impact on people who use the service.

Our findings

What people who use the service experienced and told us

We observed people being supported in a supportive and respectful manner.

A family member spoken with said they felt their mother was well cared for and the staff team were approachable and very kind.

We spoke with people who used the service they told us they felt well cared for and respected by the care workers. Some comments made were;

"I have my routines that I like to stick to the girls are very good and understand what help I need."

"I pretty much take care of myself but it's nice to know that the staff are here if I need them."

"Yes I know who my key worker is and we get on very well".

Other evidence

We looked at the care plan of three people who used the service. The following information was gained from these records;

All had an assessment document completed by the service in place. However these records did not include care needs information provided by the social services

departments who funded the placements. This meant people were at risk of receiving inappropriate care and support.

One care plan had not been updated to reflect a significant change in the care and support needs of the individual. This meant this person was at risk of not receiving the level and type of support needed to meet their changed care needs

Records showed regular contact was made with healthcare services such as GP, district nurses and podiatry services. Records also showed when necessary the service called emergency medical services to maintain people's health and well being.

The accident/incident book held detailed information about falls. However records showed the service had not analysed or put in place an action plan where a person had fallen on multiple occasions in a short period of time. This meant people were left at risk of continued injury due to the lack of proactive falls management by the service.

Risk assessment had not been updated to reflect people's changing needs particularly following falls and discharge from hospital. This meant people who used the service were left at risk of receiving care and support that did not meet their needs.

Care plans provided detailed information about people's preferred routines, life histories and hobbies. The service employed an activities co-ordinator who worked approximately 20 hours per week. There was a full range of activities both in house and community based for people to become involved in if they wished. On the afternoon of the visit there was a general knowledge quiz taking place in the lounge seven people and two staff were taking part. This showed people were supported in promoting their independence and community involvement.

There was a key worker system (A system that required care workers to be responsible to support individuals in their daily lives such as personal care, laundry and social activities) in place. People spoken with confirmed this system was in place and were happy with the support offered by their key worker.

Our judgement

People did not experience care, treatment and support that met their needs.

Outcome 07: Safeguarding people who use services from abuse

What the outcome says

This is what people who use services should expect.

People who use services:

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

What we found

Our judgement

The provider is compliant with Outcome 07: Safeguarding people who use services from abuse

Our findings

What people who use the service experienced and told us

Observations showed care workers were respectful towards the people who used the service. Throughout the visit we observed people were treated in a friendly and dignified manner.

People spoken with told us they felt safe and supported by the staff team and would feel comfortable raising concerns with the registered manager or one of the providers.

A relative spoken with told us he felt confident any issues of concern they raised would be dealt with by the registered manager or providers.

Other evidence

We spoke with two care workers who told us they had received training in the safeguarding of vulnerable adults. The provider may find it useful to note care workers became confused with some of their roles and responsibilities regarding safeguarding procedures.

Training records showed the staff team had received training around the safeguarding of vulnerable adults from abuse during their induction. Follow on training in this area was also provided by Wirral (DASS). Care workers spoken with confirmed this.

The service had policies and procedures in place for the protection of vulnerable people. A copy of Wirral Local Authority's safeguarding procedure was available at the service.

Records showed the provider responded appropriately to any allegations of abuse.

Our judgement

People who use the service were protected from the risk of abuse, because the provider had taken reasonable steps to identify the possibility of abuse and prevent the abuse from happening.

Outcome 14: Supporting staff

What the outcome says

This is what people who use services should expect.

People who use services:

* Are safe and their health and welfare needs are met by competent staff.

What we found

Our judgement

The provider is compliant with Outcome 14: Supporting staff

Our findings

What people who use the service experienced and told us

We observed care workers seeking permission and direction from people who used the service with regard to how and when they wished to be supported.

People who used the service told us they felt confident in speaking to the care workers and registered manager about the level of support they felt they needed. Some comments were;

"This is a small home and that is one of the reasons I chose it, the girls are very gentle and respectful I feel very comfortable here."

Other evidence

Discussions with care workers and records showed staff received an induction to work at Ryecroft. This was to ensure they had the skills and knowledge to support the people who used the service. This included shadowing an experienced staff member until the person was assessed as competent and safe to carry out their role.

We spoke with two care workers. Both reported that they felt they had good training opportunities. All said they have received training in how to promote safe working practices and meeting the needs of older people. Records showed all staff had completed a National Vocational Qualification (NVQ) or equivalent qualification relevant to their role. The care workers spoken with said the training provided was good and equipped them to appropriately support the people who used the service. This meant people were supported by care workers who understood their basic care needs and respected their rights to be fully involved in how support was provided.

Care workers spoken with said there was good communication between care workers and the registered manager and providers. Both stated they felt well supported in their roles and enjoyed working at the service. Information provided by care workers showed team meetings and supervision took place at regular intervals during the year.

The provider may find it useful to note training for specialist care needs such as dementia and stroke care were not recorded on staff training records.

Our judgement

People were cared for by staff who were supported to deliver care and treatment safely to an appropriate standard.

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 who used the service told us they felt happy with the service provided and felt they were listened to and their views were taken into account.

Other evidence

The providers told us they had reintroduced a detailed audit document. It is their intention to visit the service monthly to carry out a detailed audit of all aspects of the service. An audit was carried out in April 2012 which highlighted some areas that required attention. The registered manager was provided with an action plan to support her in addressing these issues.

The registered manager provided information about the current audits that were undertaken including medication, staff files, care plans and risk assessments. We were told the care plans and risk assessments were currently being reviewed to ensure they included all relevant healthcare needs and recorded detailed actions to be taken to maintain people's health and wellbeing.

The service was awarded the The Investors in People Bronze Award in 2010.

Records showed the service actively sought the views of people who used the service and kept them and their family members informed about their individual care and of any changes to the service.

Our judgement

The provider had an effective system to regularly assess and monitor the quality of the service that people receive.

Action we have asked the provider to take

Compliance actions

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

| Regulated activity | Regulation | Outcome |
|--|--|---|
| Accommodation for persons who require nursing or personal care | Regulation 9 HSCA 2008 (Regulated Activities) Regulations 2010 | Outcome 04: Care and welfare of people who use services |
| | How the regulation is not being met: People did not experience care, treatment and support that met their needs. | |

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 14 days of the date that the final review of compliance report is sent to them.

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

CQC should be informed in writing when these compliance actions are complete.

What is a review of compliance?

By law, providers of certain adult social care and health care services have a legal responsibility to make sure they are meeting essential standards of quality and safety. These are the standards everyone should be able to expect when they receive care.

The Care Quality Commission (CQC) has written guidance about what people who use services should experience when providers are meeting essential standards, called *Guidance about compliance: Essential standards of quality and safety*.

CQC licenses services if they meet essential standards and will constantly monitor whether they continue to do so. We formally review services when we receive information that is of concern and as a result decide we need to check whether a service is still meeting one or more of the essential standards. We also formally review them at least every two years to check whether a service is meeting all of the essential standards in each of their locations. Our reviews include checking all available information and intelligence we hold about a provider. We may seek further information by contacting people who use services, public representative groups and organisations such as other regulators. We may also ask for further information from the provider and carry out a visit with direct observations of care.

Where we judge that providers are not meeting essential standards, we may set compliance actions or take enforcement action:

Compliance actions: These are actions a provider must take so that they **achieve** compliance with the essential standards. 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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