

Review of compliance

Donisthorpe Hall Management Committee Donisthorpe Hall Company Limited by Guarantee

Region:	Yorkshire & Humberside
Location address:	Donisthorpe Hall Shadwell Lane Leeds West Yorkshire LS17 6AW
Type of service:	Care home service with nursing
Date of Publication:	May 2012
Overview of the service:	<p>Donisthorpe Hall is a large home set in its own grounds. Registered to provide care to 189 people in 6 units;</p> <ul style="list-style-type: none"> - Silver Lodge - residential care to 20 people and nursing care to 20 people. - Unit 1 - residential and nursing care to 41 people. - Unit 2 - nursing care to 24 people. - Unit 3 - nursing care to 36 people living with dementia.

	<ul style="list-style-type: none">- Unit 4 - residential care to 21 people living with dementia.- Unit 5 - residential and nursing care to 21 people living with dementia
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Summary of our findings for the essential standards of quality and safety

Our current overall judgement

Donisthorpe Hall Company Limited by Guarantee was meeting all the essential standards of quality and safety.

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 because concerns were identified in relation to:

Outcome 01 - Respecting and involving people who use services

Outcome 04 - Care and welfare of people who use services

Outcome 14 - Supporting staff

How we carried out this review

We reviewed all the information we hold about this provider, carried out a visit on 22 March 2012, observed how people were being cared for, talked to staff, reviewed information from stakeholders and talked to people who use services.

What people told us

This review was based within two of the three units providing services for people living with dementia. Most of these people were unable to verbally communicate with us but the two that we spoke to on the residential unit told us that they liked it and felt well looked after.

We spoke with a number of relatives who also told us that they were happy with the service and felt that they were involved in the decisions regarding care. They also told us that they felt that the staff respected the people using the service. One person told us "It is absolutely marvellous, the staff are very very good, I can't fault them."

People using the service appeared well looked after, they were dressed appropriately and supported by the staff at appropriate times.

What we found about the standards we reviewed and how well Donisthorpe Hall Company Limited by Guarantee 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

The provider has good systems in place including training and care planning to make sure that people who use the service are respected and involved as much as is possible.

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

The provider has a comprehensive system in place for assessment and care planning, which supports the people using the service to receive appropriate care and treatment.

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

The provider offers appropriate support to staff through appraisal and training.

Other information

Please see previous reports for more information about previous reviews.

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

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

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

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

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

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

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

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

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

Outcome 01: Respecting and involving people who use services

What the outcome says

This is what people who use services should expect.

People who use services:

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

What we found

Our judgement

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

Our findings

What people who use the service experienced and told us

Before the inspection we received information that suggested people were not always treated with respect. As this is a large home this review was based within two of the three units providing services for people living with dementia. Most of these people were unable to verbally communicate with us but the two that we spoke to on the residential unit told us that they liked it and felt well looked after.

We spoke with a number of relatives who also told us that they were happy with the service and felt that they were involved in the decisions regarding care. They also told us that they felt that the staff respected the residents. One person told us "It is absolutely marvellous, the staff are very very good, I can't fault them."

Other evidence

Considerable observation was used during the inspection and over the breakfast period care was observed in the nursing unit for people with dementia.

The dining area was clean and tidy but the tables were bare with no table cloths or condiments. People were offered aprons to protect their clothing and paper napkins were available. Each table was supported by one member of staff although we observed more than one when required.

The observations made during the breakfast period were positive. One person was very distressed and calling out at the start of breakfast, a carer who spoke her language was quick to respond and talked to her in her native language. The result was positive and the resident proceeded to enjoy a full breakfast.

Other staff interactions were seen to be genuinely respectful and empowering.

Only one person appeared to have received limited staff interaction but on further investigation this was in line with her care plan.

We observed the lunch time period on the residential unit for people living with dementia. The dining area was clean and well presented with tablecloths on the tables. It was a very relaxed atmosphere and everyone was observed to be enjoying their meal with appropriate support from staff.

The staff interactions with the people using the service were genuinely enabling. Again each table was supported by at least one member of staff. Conversation was facilitated but they were respectful of those who did not want to join in.

During the visit a number of people were seen supporting their relative. They were openly involved in the care and had good interactions with the staff.

The staff we spoke with told us that "we try to involve the family as much as possible , they are very involved in all the activities."

The staff explained that person centred care was important to them as the residents are all individuals and this is their home. They praised the training that they had received and felt that it helped them to understand and meet the needs of the people using the service.

Our judgement

The provider has good systems in place including training and care planning to make sure that people who use the service are respected and involved as much as is possible.

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

Due to the number of people who were unable to talk to us evidence of their experience was gained through our observations.

Everyone using the service appeared well looked after, they were dressed appropriately and supported by the staff at appropriate times.

Other evidence

Our observations during the breakfast and lunchtime periods demonstrated that everyone who was assisted to eat their meal was supported appropriately.

We spoke with both unit managers and reviewed some individual care records. All had appropriate risk assessments and care plans and had been regularly reviewed. The care plans are audited on all the dementia units by the dementia care manager.

We observed medications being administered by the unit manager. This was undertaken in an appropriate manner and time was given to ensuring that everyone received their medication.

We spoke with two members of staff who both said that they felt that the care plans supported them in their work. They felt involved in the planning of care as they were encouraged to discuss residents needs with the nurses. They said that there was a person centred approach to care.

Our judgement

The provider has a comprehensive system in place for assessment and care planning, which supports the people using the service to receive appropriate care and treatment.

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 did not speak with residents regarding this outcome.

Other evidence

The home has a dedicated training and development manager who supports all staff within the home.

Staff that we spoke with felt that they were fully supported to do their job. They receive a full induction programme on commencing work at the home. One member of staff told us "It was a refresher for me as I had worked in other homes but it was really good." Another told us that "they offer lots of training to us all, some of it is on-line which is easier to access and they encourage us to do as much as possible."

We saw from the training matrix for the staff working in the dementia units that all staff were up to date with training and further training was planned.

Staff also told us that they receive one to one support and supervision.

Our judgement

The provider offers appropriate support to staff through appraisal and training.

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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