

Review of compliance

Prudential Care Home Limited
Prudential Care Home Limited (No 146)

Region:	London
Location address:	146 Carlingford Road, London N15 3EU
Type of service:	Care home services without nursing
Date the review was completed:	June 2011
Overview of the service:	146 Carlingford Road provides support for up to six adults with mental health needs including those subject to conditions of Section 37/41 of the Mental Health Act 1983. The home's provider owns other residential services in the area. The property is a large three storey building with six bedrooms with a bathroom and separate toilet facility on each floor. There is a communal lounge, staff office, and kitchen /diner area as well as a seated area in the rear garden. The stated aims of the home are to 'provide a safe homely environment in which the residents have as much control over their lives as possible, enabling them to achieve the maximum degree of independence whilst

	<p>retaining their dignity. To provide each individual with an opportunity to build new skills for life and adapt old ones. To provide a therapeutic programme under the care programme approach which is appropriate and relevant to individual needs, and to enable each individual to function to his/her potential.' The home is approximately ten minutes walk from Turnpike Lane Underground Station, local buses, shops and other public amenities.</p>
--	--

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

What we found overall

We found that Prudential Care Home Ltd - No 146 Carlingford Road was meeting the essential standards we reviewed but, to maintain this, we suggested that some improvements are made.

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 24th June 2011 lasting approximately five hours, observed how people were being cared for, and talked to two people living at the home in depth and met with two others briefly. We also spoke to the acting manager, two staff members, and the manager of another care home owned by the provider who provides support to the home. At the time of the visit six men were living at the home. We checked the provider's records, including looking at three records of people living at the home, staff records, and administrative and health and safety records.

What people told us

We talked to people living in the home and spent time observing the support and lifestyle they experienced. People were very positive about the home, and advised that they were provided with the care that they need, and that they were well settled in the home. They are given choices and have formed good and supportive relationships with staff and management. One person noted 'the staff are so good.' They confirmed that they saw healthcare professionals when needed, and they received their medication at the prescribed times. They were happy with the food served in the home, and positive about the home environment.

A variety of activities were available, however not all people chose to engage in them. People were clear about who they could speak to if they had a complaint or

felt at risk of harm. There were appropriate quality control procedures are in place for the home. One person noted 'I like it here.' A relative, had noted in a feedback questionnaire 'I have been very impressed with the standard of care my [relative] has received whilst he has been at 146 Carlingford Road.'

What we found about the standards we reviewed and how well Prudential Care Home Limited No 146 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 living in this home are treated with respect, consulted about the care provided to them, and encouraged to make decisions about their care.

- Overall, we found that Prudential Care Home Limited No 146 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

Staff listen to people's views, and are aware of the need to protect people's ability to give informed consent to care.

- Overall, we found that Prudential Care Home Limited No 146 was meeting this essential standard.

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

The home provides a good standard of support to people, with staff attempting to meet people's individual needs. People's needs and preferences are recorded in current care plans and risk assessments to ensure they experience safe and appropriate care, and are offered a range of activities.

- Overall, we found that Prudential Care Home Limited No 146 was meeting this essential standard.

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

The home provides people with a range of food and drinks of their choice at all times.

- Overall, we found that Prudential Care Home Limited No 146 was meeting this essential standard.

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

Staff support people living at the home to obtain the health and specialist support they need. They cooperate with professionals involved to provide a good standard of care according to people's needs.

- Overall, we found that Prudential Care Home Limited No 146 was meeting this essential standard.

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

Staff are trained regarding action to take in the event of suspected abuse, and people receive appropriate support to protect them from financial abuse.

- Overall, we found that Prudential Care Home Limited No 146 was meeting this essential standard.

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

People living at the home are protected by appropriate standards of hygiene and cleanliness.

- Overall, we found that Prudential Care Home Limited No 146 was meeting this essential standard.

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

People living at the home are provided with their prescribed medicines appropriately.

- Overall, we found that Prudential Care Home Limited No 146 was meeting this essential standard.

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

People live in a safe and comfortable environment.

- Overall, we found that Prudential Care Home Limited No 146 was meeting this essential standard.

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

The equipment that people use is maintained to ensure it is safe and suitable for use.

- Overall, we found that Prudential Care Home Limited No 146 was meeting this essential standard.

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

The home has an effective system in place to check the suitability of staff before they are employed in the home.

- Overall, we found that Prudential Care Home Limited No 146 was meeting this essential standard.

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

There are sufficient numbers of experienced staff working to meet the needs of people currently living in the home.

- Overall, we found that Prudential Care Home Limited No 146 was meeting this essential standard.

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

Staff at this home are provided with supervision and relevant training to help them provide a good standard of care in line with best practice. However a lack of mental capacity act training, and team meetings for staff members may mean that people's best interests are not fully considered.

- Overall, we found that Prudential Care Home Limited No 146 was meeting this essential standard, but, to maintain this, we have suggested that some improvements are made.

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

Appropriate procedures are in place to assess and monitor the quality of service provision, proactively addressing areas for improvement, in the interests of people living at the home.

- Overall, we found that Prudential Care Home Limited No 146 was meeting this essential standard.

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

The home has a complaints system in place so that people can expect any complaint to be responded to appropriately.

- Overall, we found that Prudential Care Home Limited No 146 was meeting this essential standard.

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

The home's record keeping generally helps to protect people against the risk of unsafe or inappropriate care. However this may be compromised by insufficiently current recording of staff on duty, lack of detail regarding activities undertaken, and valuables kept in the office for safekeeping.

- Overall, we found that Prudential Care Home Limited No 146 was meeting this essential standard.

Action we have asked the service to take

We have asked the provider to send us a report within 28 days of them receiving this report, setting out the action they will take to improve. We will check to make sure that the improvements have been made.

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
People living at the home that we spoke to advised that staff asked them about their needs and preferences, and attempted to meet these as far as possible. Two people did not wish to speak to the inspector during the visit.

Observation of staff interactions with people living at the home indicated that these were supportive and respectful, and ensured that people were given choices and their dignity was maintained.

Other evidence
Detailed assessments were in place for each person's needs to ensure that these could be met effectively before they moved in.

The acting manager confirmed that people considering moving into the home were invited to spend some time in the home, prior to making an informed decision about whether to move in. Care plans for three people currently living at the home

described their needs and wishes in appropriate detail.

Our judgement

People living in this home are treated with respect, consulted about the care provided to them, and encouraged to make decisions about their care.

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
We saw people moving freely throughout the home and garden areas. They advised that they were able to go out independently, and that staff were available to support them with particular tasks/appointments.

Other evidence
Risk assessments were in place regarding people's particular mental health issues and risks associated with their independence in particular areas e.g. impulsivity, insight, health and safety issues, and substance misuse. These were also referred to in their care plans. All people living at the home had keys to their own bedrooms.

There was evidence in care plans viewed that people were consulted about their care. The manager advised that there were currently no people living at the home for whom a Deprivation of Liberty safeguard was needed (i.e. anyone unable to go out independently without serious risk of harm). A leaflet about the Mental Capacity Act 2005 was available in the office, which staff had been asked to read.

Our judgement

Staff listen to people's views, and are aware of the need to protect people's ability to give informed consent to care.

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
One of the people living at the home was celebrating their birthday during the review, with a number of friends and family members visiting. A barbeque was planned for later that evening, and a large birthday cake was bought by the home. This person and another person living at the home spent most of the day sitting out in the rear garden, with the visitors. Other people spent most of the time in their bedrooms or went out during the visit.

People spoke highly about the support provided by staff at the home, describing them as 'so good' and approachable. They confirmed that staff asked them what their needs and wishes were, and tried to meet these as far as possible. One person noted 'I had one [hospital] admission since I've been here, and I thought that I would top myself if that happened. But the staff here were so good, they made it painless, they came and visited me, so I didn't feel that way.'

People generally felt that there were sufficient activities available to them, including the opportunity to go outside the home when they wished. One person noted 'they offer more than we take up.' People went out independently in the local area to visit shops, friends and relatives. They did not feel that they would want more activities offered to them. Gym equipment was available in the rear garden, but people

spoken to advised that they had not been using it recently.

People felt that staff did their best to protect their privacy and generally treated them with respect, listening to them, and offering them choices about their care as far as possible. Two people had been supported to cut down on smoking, with one person giving up altogether, with support from the acting manager who had undertaken training in smoking cessation.

Other evidence

We used pathway tracking as part of this inspection. This involved looking at written assessments of particular people's needs and preferences, their care plans and other records, as well as spending time talking to, and observing staff interactions with these people.

We looked at care files belonging to three people, indicating that the home had assessed their care needs, with written assessments in each person's file. Each person had a care plan which described their care needs, and demonstrated that people had been asked about their needs and preferences. Care plans were being reviewed approximately three-monthly to ensure that they remained current. The acting manager advised that reviews were undertaken more frequently for new residents, or when people's needs were more changeable, with the frequency reduced once their needs became more stable. Relevant risk assessments were in place for each person, including those for people with risks relating to mental health state, drug use, behavioural issues, and health and safety issues. People's weights were recorded monthly, and relapse prevention plans were in place for each person. Each person had a monthly session with their keyworker during which particular areas relating to their goals were discussed, and this was recorded as appropriate. Minutes were also available of regular Care Programme Approach meetings held for each person, and actions agreed were carried through into each person's care plan.

Records of activities provided included regular computer skills sessions, cooking sessions, cinema trips, attending the gym, and barbeques. The home had provided gym cards and unlimited cinema cards to people wishing to attend regularly, and staff advised that cinema trips were arranged at least twice weekly, with weekend trips also being very popular. However an improvement action is made under Outcome 21 that more detail be recorded about activities people undertake. People advised that the activities coordinator visited people at the home, and organised a number of group activities across all the homes owned by the registered provider. Twenty-two people (including staff) had enjoyed a holiday in Brighton in December, including three people currently living at the home. A trip to Blackpool was being planned in September 2011.

Our judgement

The home provides a good standard of support to people, with staff attempting to meet people's individual needs. People's needs and preferences are recorded in current care plans and risk assessments to ensure they experience safe and appropriate care, and are offered a range of activities.

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 spoken to advised that they enjoyed the food at the home. They felt that they were able to make choices on the menu, and had sufficient food and drink available to them throughout the day. People were seen helping themselves to food and drink from the kitchen, and advised that staff generally cooked the evening meal, with some of them helping out from time to time. One person said 'the food is good. One guy [another resident] cooks curries that are a bit spicy.'

Fresh fruit and vegetables were available, and the menu appeared to be varied. The kitchen was well stocked, and foods stored in the refrigerator were labelled appropriately. A barbeque was planned for the day of the visit.

Other evidence
Records were maintained of the food served each day. Discussion with staff indicated that they were aware of people's preferences. Staff advised that meat bought for the home was all Halal, but that no current people living at the home had specific cultural or dietary needs. Appropriate records were in place regarding refrigerator and freezer temperature monitoring and cooking temperatures of high risk foods.

Our judgement

The home provides people with a range of food and drinks of their choice at all times.

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
Discussion with people living at the home indicated that they were able to see medical professionals when necessary, including their GPs, their consultants, care coordinators, community psychiatric nurses, dentists and opticians.

We checked health records for three people, and found that staff had supported them to attend medical appointments appropriately. During the visit, one person chose not to attend a hospital appointment that day, and this was respected. Staff explained that a new appointment would be obtained for this person.

Other evidence
There were clear records of people's medical appointments including a summary of the outcome of each appointment. The manager was knowledgeable about the current health needs of people living at the home, and detailed records of people's ongoing health conditions were recorded within care plans. Minutes of Care Programme Approach meetings indicated that staff were working with each person and other healthcare professionals in their best interests.

Our judgement
Staff support people living at the home to obtain the health and specialist support

they need. They cooperate with professionals involved to provide a good standard of care according to people's needs.

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
We asked people if they felt listened to, and able to speak to somebody if they were worried about their safety. All advised that there was someone they felt able to talk to, a particular staff member or the manager.

Other evidence
Staff at the home had undertaken training in safeguarding adults, and were aware of the action to be taken in the event of a safeguarding incident.

The manager had appropriate policies and procedures in the event of a safeguarding incident recorded within the office. Procedures were also in place to support people in managing their finances including budget support agreements. An improvement action is made under Outcome 21 that property kept for safekeeping such as passports, bank books etc. should be recorded in and out of the home, for people's further protection. The activities coordinator had attended the local authority's training in Safeguarding Adult, and the manager advised that she would be contacted about any relevant issues as she was familiar with local procedures.

Our judgement

Staff are trained regarding action to take in the event of suspected abuse, and people receive appropriate support to protect them from financial abuse.

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 advised that they were happy with the cleanliness in the home, and that staff helped them to keep their rooms and communal areas clean. Inspection of the home's environment indicated that there was a good standard of cleanliness with no unpleasant odours. Appropriate laundry facilities were available at the home.

Other evidence
We inspected the kitchen, lounge, corridors, dining area, some bedrooms and bathrooms in the home, and all were of a good standard of cleanliness, with appropriate hand washing and drying facilities. The manager advised that a domestic cleaner visits the home twice weekly to help maintain the cleanliness of the home. They were attending the home during the current review. Appropriate pest control measures were also in place for the home.

Our judgement
People living at the home are protected by appropriate standards of hygiene and cleanliness.

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

Our findings
<p>What people who use the service experienced and told us People spoken to confirmed that they were given their medicines on time, and that these were explained to them if they asked.</p> <p>Other evidence We looked at the medication storage arrangements, stock records and administration records for people living in the home. Medicines are stored in locked cabinets in the office, and the storage temperature is monitored. One prescribed topical lotion was stored appropriately in the refrigerator, with the temperature monitored as appropriate. A weekly audit is undertaken of medicines received and in stock. As recommended at the previous review, the pharmacist was now providing descriptions of each medicine provided in blister packs so that these could be checked into the home more accurately for the protection of people living at the home.</p> <p>Staff members have had training in administering medicines to people in the home. The manager advised that when people living at the home are able to self-medicate, there is a detailed procedure and risk assessment to be followed through with them. This was seen in place for one person currently self-administering their medication within the home.</p>

Our judgement

People living at the home are provided with their prescribed medicines appropriately.

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
The home was in a good state of repair, and comfortably furnished and decorated. People told us that they were satisfied with their bedrooms and furnishings in the communal areas. Inspection of some people's bedrooms indicated that they had been personalised according to their particular tastes. One person noted 'my bedroom's great. I chose it.'

Bathrooms and toilets were in a good state of repair. People confirmed that hot water was always available when needed, and the home was kept heated to a comfortable temperature. One person had an en suite toilet for their bedroom.

The lounge was comfortably furnished, and had a large screen television with a Sky box, and a computer available for people living in the home. The acting manager advised that a computer trainer comes in regularly in addition to staff supporting people in using the computer and internet facilities.

Appropriate security measures are available including a camera at the front door of the home, with a screen so that this can be monitored.

Other evidence
We checked a sample of records to see if the building was safe and well maintained. People spoken to reported that repairs are undertaken swiftly when

problems are reported. Current safety certificates were available for gas and electrical installation safety inspections.

We saw that the home has a risk assessment for the environment and a fire risk assessment, and emergency plan were in place. Regular servicing was in place for fire detection equipment and extinguishers. As recommended at the previous review more detailed records were in place to evidence regular fire drills, at varied times including night drills.

Our judgement

People live in a safe and comfortable environment.

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 spoken to advised that they were not aware of any faulty equipment in the home at the time of the visit, other than a problem with the computer in the lounge. The acting manager advised that the computer trainer was due to come out shortly to solve this. He noted that but when problems were reported, these were dealt with quickly, and the home benefited from having a handyman employed by the provider, available to undertake repairs swiftly. Staff advised that several items of kitchen equipment including the microwave, toaster and kettle had been replaced recently.

Other evidence
Records were in place at the home for servicing and safety checks of portable appliances as appropriate.

Our judgement
The equipment that people use is maintained to ensure it is safe and suitable for use.

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
We observed staff demonstrating supportive and respectful interactions with people living at the home.

People spoke highly of the support provided to them by staff. Staff spoken to confirmed that they had been through rigorous recruitment procedures prior to beginning work at the home.

Other evidence
We checked the recruitment process for three staff members employed at the home. Staff information sheets indicated that there had been checks for their suitability to work in the home, including two written references, satisfactory criminal records bureau disclosures, and identity checks.

Our judgement
The home has an effective system in place to check the suitability of staff before they are employed in the home.

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
During the visit, we observed staff spending time with people, indicating that there were generally good relationships between them.

People spoke well of the staff and manager, and felt they were supportive and treated them with respect, and that there were sufficient staff on duty at all times. Five staff members work regularly in the home, a smaller number than at the previous review (when more staff worked fewer hours each), thus people have more continuity of care and support from the core staff team.

Other evidence
The staff rota for the week of the visit indicated that there was at least one staff member on duty to support people both during the day and at night. A waking night support worker is provided. However the rota was not accurate regarding staff on duty on the day of the review, following a shift swapped between staff members. An improvement action is made under Outcome 21 accordingly.

Our judgement
There are sufficient numbers of experienced staff working to meet the needs of people currently living in the home.

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
Discussion with people living at the home indicated that they felt well supported by staff and management.

Other evidence
Two staff members spoken to advised that they received regular supervision, and appropriate support from other team members and management. We asked staff about the training they had been provided with, and looked at records of staff training. All staff members had undertaken NVQ (National Vocational Qualification) level 2 in Care or above.

There were certificates evidencing that staff had attended mandatory training in person centred care, first aid, infection control, manual handling, safeguarding adults, health and safety, food hygiene, risk assessment, communication, and fire safety, in addition to training in medication administration, mental health awareness, managing challenging behaviour, schizophrenia and team building. Induction programmes were in place for new staff.

Inspection of staff member's records indicated that regular supervision had been provided, and staff meetings were held regularly.

The acting manager has completed an MA in Health Psychology, and advised that

he would be undertaking a relevant management training course shortly. He had applied for registration with CQC as the registered manager of the home.

Our judgement

Staff at this home are provided with supervision and relevant training to help them provide a good standard of care in line with best practice.

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 generally advised that they were consulted about their views on the home, and were satisfied about how the home was run. Some participated in resident meetings, and most felt able to speak to the manager or provider about their views on the home.

Other evidence
Minutes were available of residents meetings held on a regular basis. These indicated that people were contributing their views about how the home was run. Recent meetings had included discussions about food hygiene, shopping, activities, hygiene, drugs and alcohol, appointments, and inhouse entertainment.

Staff meetings were also held regularly, with topics discussed including the individual needs of people living at the home, food labelling, punctuality, room cleaning, travel, and stock.

Completed feedback questionnaires had been received from four people living at the home, one relative, and two healthcare professionals in October 2010. These were all very positive about the home. The manager advised that these are

distributed annually, and that the results of these are fed into the continuous development plan for the home. A business plan and continuous development plan were seen for the home dated April 2011 to February 2012. This included a strengths, weaknesses, opportunities and threats analysis of the service, distribution of questionnaires, a holiday to be provided, and staff training to NVQ level 3. Visits by the provider continue to be undertaken approximately monthly, with a range of areas audited and recommendations made regarding improvements that should be made.

Our judgement

Appropriate procedures are in place to assess and monitor the quality of service provision, proactively addressing areas for improvement, in the interests of people living at the home.

Outcome 17: Complaints

What the outcome says

This is what people should expect.

People who use services or others acting on their behalf:

- Are sure that their comments and complaints are listened to and acted on effectively.
- Know that they will not be discriminated against for making a complaint.

What we found

Our judgement

The provider is compliant with outcome 17: Complaints

Our findings

What people who use the service experienced and told us
People spoken to were generally aware of the procedure for making a complaint, and most advised that they would talk to staff, or the manager if they were unhappy about anything.

No complaints had been made since the last review. However on the day of the visit, management were involved in speaking to a neighbour regarding concerns expressed about noise levels in the home at night. Discussion with the acting manager indicated that this issue was being addressed appropriately, with cordless headphones being purchased for people wishing to play their music loud at night.

Other evidence
Staff members were aware of the systems to follow if someone wanted to make a complaint.

Our judgement
The home has a complaints system in place so that people can expect any complaint to be responded to appropriately.

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

There are minor concerns with outcome 21: Records

Our findings

What people who use the service experienced and told us
People living at the home were aware of their support plans and some other records kept at the home.

Other evidence
We looked at care records for three people in detail. These included up to date care plans and risk assessments, and records of medical appointments. We also looked at staff records including rotas, recruitment records, training and supervision records. Care plans indicated that they would be reviewed monthly, although the acting manager advised that the frequency of review would vary depending on each person's need. It was recommended that they be altered accordingly to specify the frequency of review expected in each case. The home's staff rota was not accurate on the day of the visit, and an improvement action is made accordingly. There was also insufficient detail recorded about people's activities, e.g. the nature of some trips out with staff were not specified, and insufficient records of people's property held for safekeeping in the office.

Other records inspected included complaints records, weight records, medication records, weekly fire alarm and fire door testing records, records of fire drills, and

temperature records for refrigerators and freezers. These were all accurate and up to date.

Our judgement

The home's record keeping generally helps to protect people against the risk of unsafe or inappropriate care. However this may be compromised by insufficiently current recording of staff on duty, lack of detail regarding activities undertaken, and valuables kept in the office for safekeeping.

Action we have asked the provider to take

Improvement actions

The table below shows where improvements should be made so that the service provider **maintains** compliance with the essential standards of quality and safety.

Regulated activity	Regulation	Outcome
Accommodation for persons who require nursing or personal care.	20	21 Records
	<p>Why we have concerns: The home's record keeping generally helps to protect people against the risk of unsafe or inappropriate care. However this may be compromised by insufficiently current recording of staff on duty, lack of detail regarding activities undertaken, and valuables kept in the office for safekeeping.</p>	

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 28 days of this report being received.

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

What is a review of compliance?

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

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

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

When making our judgements about whether services are meeting essential standards, we decide whether we need to take further regulatory action. This might include discussions with the provider about how they could improve. We only use this approach where issues can be resolved quickly, easily and where there is no immediate risk of serious harm to people.

Where we have concerns that providers are not meeting essential standards, or where we judge that they are not going to keep meeting them, we may also set improvement actions or compliance actions, or take enforcement action:

Improvement actions: These are actions a provider should take so that they **maintain** continuous compliance with essential standards. Where a provider is complying with essential standards, but we are concerned that they will not be able to maintain this, we ask them to send us a report describing the improvements they will make to enable them to do so.

Compliance actions: These are actions a provider must take so that they **achieve** compliance with the essential standards. Where a provider is not meeting the essential standards but people are not at immediate risk of serious harm, we ask them to send us a report that says what they will do to make sure they comply. We monitor the implementation of action plans in these reports and, if necessary, take further action to make sure that essential standards are met.

Enforcement action: These are actions we take using the criminal and/or civil procedures in the Health and Adult 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
Further copies from	03000 616161 / www.cqc.org.uk
Copyright	Copyright © (2010) Care Quality Commission (CQC). This publication may be reproduced in whole or in part, free of charge, in any format or medium provided that it is not used for commercial gain. This consent is subject to the material being reproduced accurately and on proviso that it is not used in a derogatory manner or misleading context. The material should be acknowledged as CQC copyright, with the title and date of publication of the document specified.

Care Quality Commission

Website	www.cqc.org.uk
Telephone	03000 616161
Email address	enquiries@cqc.org.uk
Postal address	Care Quality Commission Citygate Gallowgate Newcastle upon Tyne NE1 4PA