

# Review of compliance

<p>Withins (Brightmet) Limited Withins (Brightmet) Limited</p>	
<b>Region:</b>	North West
<b>Location address:</b>	38-40 Withins Lane Brightmet Bolton Lancashire BL2 5DZ
<b>Type of service:</b>	Care home service without nursing
<b>Date of Publication:</b>	July 2012
<b>Overview of the service:</b>	<p>Withins (Brightmet) Limited is a purpose built home providing accommodation and care for up to 65 adults. The home is located in a residential area in Brightmet, about two miles from the centre of Bolton. Accommodation is provided on three floors and there is good wheelchair access throughout the home. A passenger lift provides access to all</p>

	<p>three levels of the home. On the day of our inspection 64 people were living at Withins (Breightmet) Limited.</p>
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# Summary of our findings for the essential standards of quality and safety

## Our current overall judgement

**Withins (Brightmet) Limited was meeting all the essential standards of quality and safety inspected.**

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 28 June 2012, talked to staff and talked to people who use services.

### What people told us

The three people we spoke with said they were happy with the care they received at Withins (Brightmet) Limited. One person said "We don't want for anything" and another said "I wouldn't change anything". People were very complimentary about the care workers. Everyone said that care workers asked permission before carrying out any care, and one person said care workers always gave them choices.

The people we spoke with told us they had no concerns about the cleanliness of the home. We were told that their rooms were cleaned daily. They all said they knew about how to make a complaint.

### What we found about the standards we reviewed and how well Withins (Brightmet) Limited was meeting them

#### **Outcome 02: Before people are given any examination, care, treatment or support, they should be asked if they agree to it**

The provider was meeting this standard.

Before people received any care or treatment they were asked for their consent and the provider acted in accordance with their wishes.

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

The provider was meeting this standard.

People experienced care, treatment and support that met their needs and protected their rights.

**Outcome 08: People should be cared for in a clean environment and protected from the risk of infection**

The provider was meeting this standard.

People were protected from the risk of infection because appropriate guidance had been followed.

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

The provider was meeting this standard.

People were cared for, or supported by, suitably qualified, skilled and experienced staff.

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

The provider was meeting this standard.

There was an effective complaints system available. Comments and complaints people made were responded to appropriately.

**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 02: 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 02: Consent to care and treatment

#### Our findings

##### What people who use the service experienced and told us

We spoke with three people living at Withins (Brightmet) Limited. They all said that care workers asked permission before carrying out any care, and one person said care workers always gave them choices.

##### Other evidence

During our inspection we observed care workers asking people's permission before they carried out any aspects of care or support. We looked at the care record for six people. We saw that where aspects of care or support had been refused by the person this was recorded by the care worker.

We spoke with two care workers and the manager. They told us that they had not had formal training in the Mental Capacity Act 2005. However, they all said that they assumed people could make decisions themselves, sometimes with support, and they would seek advice if they thought someone was becoming confused and unable to make their own decisions.

##### Our judgement

The provider was meeting this standard.

Before people received any care or treatment they were asked for their consent and the

provider acted in accordance with their wishes.

## 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

The three people we spoke with said they were happy with the care they received at Withins (Brightmet) Limited. One person said "We don't want for anything" and another said "I wouldn't change anything". People were very complimentary about the care workers.

One person said that the care workers went through their care plans with them but they didn't really understand it. She said she liked to be informed but preferred to let the care workers complete everything.

##### Other evidence

During our inspection we looked at the care records for six people. In all cases a pre admission assessment had been completed to ensure the home could meet people's individual needs. Care plans were in place for all aspects of care and support. These contained information regarding exactly what assistance was required and why. We saw that care plans were reviewed monthly. We saw an example of a person's needs changing mid month and in this case a new care plan was put in place as soon as the needs changed. It was not recorded that people were involved in their care planning, but preferences for all aspects of care and daily living were recorded, providing evidence that people had been consulted. All the care plans we saw had been individually written, with no standardised plans in place.

We saw care workers transferring people from their wheelchair to an armchair using a hoist and other support equipment. This was done gently with people showing no signs

of distress during their transfer. The activity coordinator was organising a game of Bingo in the dining room during our inspection. People had the choice of joining in, watching television in the main lounge, spending time in a quieter lounge, or spending time in their own rooms.

**Our judgement**

The provider was meeting this standard.

People experienced care, treatment and support that met their needs and protected their rights.

## Outcome 08: 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 08: Cleanliness and infection control

#### Our findings

##### What people who use the service experienced and told us

The people we spoke with told us they had no concerns about the cleanliness of the home. We were told that their rooms were cleaned daily while they were in the lounge.

##### Other evidence

During our inspection we saw people being cared for in a clean, hygienic environment. The bathrooms we saw were clean and contained liquid soap and paper towels. All bedrooms had en-suite toilets and hand wash basins, and soap and towels were provided. All rooms and communal areas had recently been re-carpeted.

Withins (Brightmet) Limited participated in the Bolton Preventing Infection Together in Care Homes (PITCH) programme. A nurse from NHS Bolton had been to give advice and provide audit tools for infection control. We saw that there was an infection control lead care worker, and they were responsible for giving information to other staff and conducting audits.

A selection of staff were assessed each week to ensure they followed the correct procedures when hand washing. Checks were made of peoples' rooms, equipment, and general areas of the home to ensure they had been cleaned to the appropriate standard.

##### Our judgement

The provider was meeting this standard.

People were protected from the risk of infection because appropriate guidance had been followed.

## 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 spoke with people during our inspection but their comments did not relate to this standard.

##### Other evidence

We looked at the personnel records of four staff members. Each file contained a photograph of the staff member. The application form was available and a full employment history was available in each file. Two references had been received prior to an applicant starting work, and a Criminal Records Bureau (CRB) check had also been returned before a formal job offer was made. In all cases the staff member's identity had been checked.

All personnel files contained evidence of the training each staff member had participated in.

##### Our judgement

The provider was meeting this standard.

People were cared for, or supported by, suitably qualified, skilled and experienced staff.

## 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

The three people we spoke with said that they had been told how to make a complaint. One person said that if there was anything wrong she would tell a care worker and she was confident the manager would put it right.

##### Other evidence

We looked at the complaints file kept by the home. We saw that two formal complaints had been made in the previous 12 months. In both cases the complaints policy was followed. The provider investigated the complaints and responded appropriately. The provider also involved the local authority commissioning team to ensure they were happy with the responses that had been given.

Information about how to make a complaint was provided in the service user guide that was given to people living in the home and their families. We saw the current complaint's policy, updated in May 2009. The provider may find it useful to note that this policy should be updated to include the current details of the Care Quality Commission, rather than the predecessor organisation (the Commission for Social Care Inspection).

##### Our judgement

The provider was meeting this standard.

There was an effective complaints system available. Comments and complaints people made were responded to appropriately.

# 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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