Review of compliance

Kirklees Metropolitan Council Castle Grange	
Region:	Yorkshire & Humberside
Location address:	Ings Lane Newsome Huddersfield West Yorkshire HD4 6LT
Type of service:	Care home service without nursing
Date of Publication:	October 2012
Overview of the service:	The registered provider is Kirklees Metropolitan Council; Castle Grange is a purpose built two-storey Dementia Care unit with enclosed landscaped gardens that provides long and short stay/respite care for older people.

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

Our current overall judgement

Castle Grange 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 24 September 2012, observed how people were being cared for, talked to staff and talked to people who use services.

What people told us

People using the service had complex needs, which meant they were not able to tell us their experiences. However, we were able to speak with three people who regularly visited their relative living at the home. They all told us that they were very satisfied with the quality of the services and the care provided to their relatives. They also told us that the staff kept them informed of any changes to their relatives health and involved them in making best interest decisions on their behalf. They were included in care and treatment planned reviews.

What we found about the standards we reviewed and how well Castle Grange 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.

The provider was meeting this standard.

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

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

The provider was meeting this standard.

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 abuse from happening.

The provider was meeting this standard.

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 and to an appropriate standard.

The provider was meeting this 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 service that people receive.

The provider was meeting this standard.

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
People using the service had complex needs, which meant they were not able to tell us their experiences. However, we were able to speak with three people who regularly visited their relative living at the home. They told us that they were included in reviewing their relatives care and treatment. They also told us that staff consulted and involved them in making best interest decisions on behalf of their relatives.

Other evidence
We looked at 10 sets of care records for people who use the service and found that they contained information about each person's lives, families, friends, interests, hobbies and past medical histories. Information was person centred and included the involvement of the person using the service and or their relative/carer. If a person did not have the mental capacity to make a decision about their care then staff sought the views of people's relatives or the person who "knew them best" in order to gain an insight into what the person may have chosen. For example, we looked at the six monthly care reviews for the people who use the service and saw that people who use the service and or their relatives/carer were involved in making decisions about their care and treatment. This helps staff to get to know and understand people's individual preferences and needs.

At the time of our visit, we saw staff encouraging people to live as independently as is possible by actively encouraging and offering them choices to manage their daily routines. We spent time observing care and we saw staff maintaining people's dignity by responding to their requests for assistance in a discreet, timely and sensitive manner. We saw staff adjusting their body positions appropriately, whilst communicating with people who use the service and whilst helping them to eat and drink. However, the provider may wish to note that we also saw some examples of staff not being respectful of people's dignity. These included one member of staff feeding two people at the same time and staff holding conversations between each other over people's heads. These issues were brought to the attention of the coordinators in charge at the time of our visit and they told us that this would be raised at the staff meeting on the following day.

Our judgement
People's privacy, dignity and independence were respected.

The provider was meeting this standard.

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
People using the service had complex needs, which meant they were not able to tell us their experiences. However, we were able to speak with three people who regularly visited their relative living at the home. They told us that they were involved in the planning and reviews of their relatives care and treatment.

Other evidence
People's needs were assessed and care and treatment was planned and delivered in line with their individual care plan.

We looked at 10 sets of care records for people who use the service and we saw that risk assessments were developed for identified areas of potential risk to people's safety and welfare. These included nutrition, pressure areas and skin integrity, pain, falls, weight, personal hygiene, moving and handling. These are important in making sure that staff delivers care and support safely.

People's individual risk assessment and care plans were reviewed monthly or more frequently as required in response to the changing health care needs of people who use the service. Individual six monthly reviews of peoples care and treatment plans included their relatives and or carers. Care plans described the care for staff to follow to meet peoples safety and welfare needs. Daily records showed that care staff followed these plans.

All of the records we looked at included the details of any contact that people had with

other healthcare professionals. These included for example, visits by GP's, opticians, dietician's, social services and community nursing staff.

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

The provider was meeting this standard.

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
People using the service had complex needs, which meant they were not able to tell us their experiences. However, we were able to speak with three people who regularly visited their relative living at the home. They told us that they felt their relative was safe living at the home. One person did tell us of a slight concern they had with the low numbers of staff on duty during the evenings. However, they also told us that they had raised this with the staff and their concern was being reviewed.

Other evidence
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 abuse from happening.

The registered care provider had policies and procedures for the protection of vulnerable adults. These include guidance for staff on how to recognise the types of abuse and on what action to take in cases of suspected or actual abuse. People's care plans included risk assessments and plans to meet their personal safety needs and at the time of our visit.

During our visit, we spoke with six members of staff and they told us that they had attended safeguarding training. They were aware of the different forms of abuse on how to report alleged or suspected abuse both internally and to external agencies such as, the local authority adult safeguarding services and the Care Quality Commission (CQC). We looked at the combined staffing training matrix and saw that staff were up to

date with their safeguarding training.

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 abuse from happening.

The provider was meeting this standard.

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
People using the service had complex needs, which meant they were not able to tell us their experiences. However, we were able to speak with three people who regularly visited their relative living at the home but their feedback did not relate to this standard.

Other evidence
Staff received appropriate professional development and were able, from time to time, to obtain further relevant qualifications.

Staff said they can access training programmes using a range of methods, such as formal study days, competence based workbooks and e learning. We saw evidence of a range of mandatory and other core subjects including, health and safety, basic and advanced first aid, manual handling, medicines awareness, fire safety , safeguarding adults, food hygiene and dementia awareness. We looked at the central training matrix detailing staff's attendance at training events and saw that all of the staff were up to date with their training in accordance with the corporate training plan.

We also looked at the personal training files for five members of staff and saw that these included a range of training certificates for example, dementia awareness, medicines management, safeguarding adults, basic and advanced first aid. This means that staff had access to ongoing training and development to assist them in their personal development to undertake their roles.

We spoke with seven members of staff who all told us that they attend ongoing training events and further personal development is encouraged. They also told us that they

receive one to one supervisions and annual appraisals. However, the provider may wish to note that when we looked at the five members of staff personal training records. We did see up to date annual appraisals documented in all five records. One to one supervision records for 2012 were not available in four of the records we looked at. We discussed these issues with the two coordinators on duty and one of them confirmed that they had received one to one supervision recently.

All of the staff who we spoke with were positive about the service they provided and told us that they enjoyed working at the home.

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

The provider was meeting this 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 using the service had complex needs, which meant they were not able to tell us their experiences. However, we were able to speak with three people who regularly visited their relative living at the home. They all told us that they were very satisfied with the quality of the services and the care provided to their relatives.

Other evidence
People who use the service, their representatives and staff were asked for their views about their care and treatment and they were acted on.

The coordinators told us that they support the manager in maintaining an open door policy to meet informally with people who use the service, their carers and visitors. The three visitors we spoke with confirmed this. Individual reviews involving people who use the service, their relatives and or carers are held six monthly and records from each review were documented within each persons care records. We looked at six records and saw that the service was achieving positive quality outcomes for people who use the services.

Individual care and treatment plans are audited monthly and medication audits carried out daily. Accidents and incidents were recorded and monitored. We looked at the outcomes from these audits and saw that any shortfalls in the records had been dealt with appropriately. We also looked at a sample of the incident records and saw that these had been dealt with appropriately.

All of the staff we spoke with told us that they attend regular meetings. Minutes from 2012 staff meetings were not included on file. We discussed these issues with the two coordinators on duty. Both confirmed that they had attended staff meetings throughout 2012 and they would take up this issue with the manager when they were next on duty.

Meetings involving people who use the service are held on each of the units. We looked at copies of the 2012 minutes from these meetings held in two of the units and saw a range of topics discussed in relation to shared activities, meals and any concerns about the quality of the care and services provided. All of this information means that people who use the service are encouraged to participate in the development of the services.

Each manager evaluates the quality of services annually against key business objectives. We looked at the 2011- 2012 evaluations and saw that the service was achieving positive quality outcomes in a number of areas. They included core business activities such as staff personal development reviews, staff training, recruitment and involving people in the planning of services. A new sensory garden to enhance the quality of services provided to people living at the home had been developed.

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

The provider was meeting this standard.

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

Document purpose	Review of compliance report
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