

Review of compliance

<p>Grange Cottage Limited Grange Cottage Residential Home</p>	
<p>Region:</p>	<p>London</p>
<p>Location address:</p>	<p>6 Grange Road Sutton Surrey SM2 6RS</p>
<p>Type of service:</p>	<p>Care home service without nursing</p>
<p>Date of Publication:</p>	<p>June 2012</p>
<p>Overview of the service:</p>	<p>Grange Cottage is a residential home registered for nineteen people who do not require nursing care. The majority of people who live in the home are older people with some degree of dementia. There are two people who live at the home who have long-term mental health problems, they have both lived there since the home was previously registered for that client group.</p>

	<p>The home is situated in a residential part of Sutton, within easy reach of the town centre and transport links.</p>
--	------------------------------------------------------------------------------------------------------------------------

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

Our current overall judgement

Grange Cottage Residential Home 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 10 May 2012, observed how people were being cared for, looked at records of people who use services, talked to staff and talked to people who use services.

What people told us

We spoke to 6 people out of the 18 that are currently living at Grange Cottage, one relative and various staff members including the manager and deputy.

People told us 'staff are good' and 'they're very good here and I've been given a lot of help'.

To help us to understand the experiences people have at Grange Cottage, we also used our SOFI (Short Observational Framework for Inspection) tool. The SOFI tool allows us to spend time watching what is going on in a service and helps us to record how people spend their time.

What we found about the standards we reviewed and how well Grange Cottage Residential Home was meeting them

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

The provider was meeting this standard.

This is because people's privacy, dignity and independence were respected.

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

The provider was meeting this standard.

This is because people experience care and support that meets their needs and protects their rights.

Outcome 05: Food and drink should meet people's individual dietary needs

The provider was meeting this standard.

This is because people were supported to be able to eat and drink sufficient amounts to meet their needs.

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

The provider was meeting this essential standard.

This is because people who use the service are protected from the abuse, because the provider has taken reasonable steps to prevent abuse from happening.

Outcome 09: People should be given the medicines they need when they need them, and in a safe way

The provider was meeting this standard.

This is because the provider has arrangements in place to manage medicines making sure that people receive their prescribed medication in a safe way and at times they need them.

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

The provider was meeting this standard.

This is because people are cared for by staff that are generally trained to provide care to an appropriate standard.

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

The provider was meeting this standard.

This is because the provider has an effective system to regularly assess and monitor the quality of service that people receive.

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

We looked at three sets of documents about people who use the service. In the documents we found that there was information from other professionals, assessment of needs and a care plan which was reviewed regularly.

There were also risk assessments which are an attempt to keep people as independent as possible; these documents were reviewed regularly.

The sets of documents also had important information about people's mental capacity and if they were subject to the Court of Protection. There was information about any end of life decisions the person or their representatives had.

Other evidence

We saw that staff were supporting people to be independent and giving them the opportunity to make choices. One member of staff spent a long time talking to someone about their slippers, and if they wanted to wear them or another pair.

An activities co-ordinator comes into the home for six hours per week; we were told that this is sometimes supplemented by a staff who has an interest in doing additional activities whilst they are on shift. There is also an exercise lady that comes into the

home once a month. The deputy manager also takes two people out on a weekly basis.

We noted that on the display board there was an activities timetable, although the coordinator did explain that it was flexible depending on what people said that they wanted to do. There was also a 'week in history newspaper' which was periodically downloaded by staff.

Our judgement

The provider was meeting this standard.

This is because people's privacy, dignity and independence were respected.

Outcome 04: Care and welfare of people who use services

What the outcome says

This is what people who use services should expect.

People who use services:

* Experience effective, safe and appropriate care, treatment and support that meets their needs and protects their rights.

What we found

Our judgement

The provider is compliant with Outcome 04: Care and welfare of people who use services

Our findings

What people who use the service experienced and told us

During our visit, we used our SOFI (Short Observational Framework for Inspection) tool to help us see what people's daily experiences were. The SOFI tool allows us to spend time watching what is going on in a service and helps us to record how people spend their time and whether they have positive experiences. This includes looking at the support that is given to them by the staff.

We spent time observing in the main lounge during the morning of our visit to the service.

We saw that people who use the service were engaged in watching television or observing what was going on around them, a number of people had newspapers or magazines. When people who use the service, did have staff contact it was positive, with staff sitting and chatting in a meaningful way.

Other evidence

We looked at three care plans. All contained a lot of important and relevant information, including what personal care needed to be provided.

Our judgement

The provider was meeting this standard.

This is because people experience care and support that meets their needs and protects their rights.

Outcome 05: 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 05: Meeting nutritional needs

Our findings

What people who use the service experienced and told us

People told us that the food was 'good', with comments such as, 'I like what they give us', and 'its good'. One person did comment that the food 'was alright'.

Other evidence

We had a meal with people who use the service. We observed that staff sat down with people and engaged them in conversations throughout. One member of staff was involved in feeding someone and completed the task whilst maintaining the person's dignity.

We did consider that people who use the service could have had more social interaction and choice throughout the process. We discussed this with the provider, and suggested that salt and pepper and serving bowls are put on the tables so that people can help themselves. In addition, people are given visual choices about the drinks they can have and the puddings that are on offer.

Whilst drinks and snacks were not readily available outside mealtimes, we did observe staff responding to a request for a hot drink.

Our judgement

The provider was meeting this standard.

This is because people were supported to be able to eat and drink sufficient amounts to meet their needs.

Outcome 07: Safeguarding people who use services from abuse

What the outcome says

This is what people who use services should expect.

People who use services:

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

What we found

Our judgement

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

Our findings

What people who use the service experienced and told us

We asked people who use the service if they felt safe at Grange Cottage. One person told us that, 'what I don't like is that (indicating the security pad on the front door)'. No one else at the home was able to comment in a meaningful way.

Other evidence

We looked at three sets of staff files and checked to see if they had current Criminal Records Bureau (CRB) checks. All had enhanced checks which were up to date.

Staff had all completed computer training regarding safeguarding, as well as the London Borough of Sutton's safeguarding training - Level 1. The manager and deputy had completed safeguarding training – Level 3.

Staff were asked questions about safeguarding and they showed that they had a clear understanding and knowledge of what to do if they observed any unsafe or inappropriate practice.

Our judgement

The provider was meeting this essential standard.

This is because people who use the service are protected from the abuse, because the provider has taken reasonable steps to prevent abuse from happening.

Outcome 09: 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 09: Management of medicines

Our findings

What people who use the service experienced and told us

On this occasion we did not speak to people who use the service about his essential standard.

Other evidence

The medication arrangements in relation to obtaining, storing, recording, administrating and disposing of medicines are appropriate.

We saw that all medicines held on behalf of the people who use the service are kept safe and secure in a locked medication cabinet. All of the medication administration sheets we reviewed had been appropriately maintained by staff and we found no recoding errors on any of these documents.

We did note that the external pharmacy audit was last completed in April 2010. We have suggested to the provider that it is completed on a more regular basis.

Our judgement

The provider was meeting this standard.

This is because the provider has arrangements in place to manage medicines making sure that people receive their prescribed medication in a safe way and at times they need them.

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

On this occasion we did not speak to people who use the service about this essential standard.

Other evidence

We saw training records for three members of staff that indicated that they had all received training in most of the core areas of practice that were relevant to their roles. These included health and safety, fire training and safeguarding vulnerable adults. It was also evident from the training files that from time to time staff also attended specialist training qualifications such as understanding dementia and managing challenging behaviour.

However, some training was out of date. We discussed this with the provider, who has agreed to act upon it to make sure that staff receive mandatory training within the specified timeframe. We are concerned that the lack of refresher courses for support staff might be putting people at unnecessary risk of harm.

We found recorded evidence in all three of the staff files that we looked at of supervision every 6 to 8 weeks.

Our judgement

The provider was meeting this standard.

This is because people are cared for by staff that are generally trained to provide care to an appropriate standard.

Outcome 16: Assessing and monitoring the quality of service provision

What the outcome says

This is what people who use services should expect.

People who use services:

* Benefit from safe quality care, treatment and support, due to effective decision making and the management of risks to their health, welfare and safety.

What we found

Our judgement

The provider is compliant with Outcome 16: Assessing and monitoring the quality of service provision

Our findings

What people who use the service experienced and told us

On this occasion we did not speak to people who use the service about this essential standard.

Other evidence

The manager told us that she completes a quality assurance check on a monthly basis and copies of these reports were available for us to look at. These checks include visits that are during unsocial hours.

Grange Cottage completes a questionnaire with relatives and representatives once a year; people who use the service are encouraged to complete questionnaires themselves with help from the activities co-ordinator.

The home does have its own complaints policy. However due to the nature of the staffing, namely that the manager and deputy are husband and wife, and also the owners of the home; We have asked them to consider amending the complaints policy, so that if a complaint is made about either the manager or deputy that it is taken to an independent arbitrator. The provider has agreed to put this in place.

Our judgement

The provider was meeting this standard.

This is because the provider has an effective system to regularly assess and monitor the quality of service that people receive.

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
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