

Review of compliance

Bearwardcote Hall Residential Home Limited
Bearwardcote Hall Residential Home

Region:	East Midlands
Location address:	Bearwardcote Hall Heage Lane, Etwall Derby Derbyshire DE65 6LS
Type of service:	Care home service without nursing
Date of Publication:	October 2012
Overview of the service:	Bearwardcote Hall Residential Home is managed by Bearwardcote Hall Residential Home Limited. The service is in a rural location two miles from Etwall village in Derbyshire. The care home provides personal care and accommodation for 38 older people (male and females).

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

Our current overall judgement

Bearwardcote Hall 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 to check whether Bearwardcote Hall Residential Home had taken action in relation to:

Outcome 07 - Safeguarding people who use services from abuse

Outcome 16 - Assessing and monitoring the quality of service provision

How we carried out this review

We reviewed all the information we hold about this provider and checked the provider's records.

What people told us

This follow up review was to check if the compliance actions made following our previous visit in March 2012 had been addressed.

We did not visit the service for this review. People we spoke with during our visit in March 2012 told us they were happy with the care and service they received.

What we found about the standards we reviewed and how well Bearwardcote Hall Residential Home was meeting them

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

The provider was meeting this standard.

The provider has appropriate procedures in place to protect people against the risk of abuse, and to ensure that staff understand and respond appropriately if abuse is alleged or suspected.

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.

The provider has put effective systems in place to monitor the quality of service that people receive, and to manage risks to the health, safety and welfare of people using the service.

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 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 did not visit the service for this review.

People we spoke with during our visit in March 2012 told us they felt safe and able to report any concerns they may have to staff or the person in charge.

Other evidence

At our last visit in March 2012 we saw that policies and procedures in place to safeguard people's welfare required strengthening, to make sure people are safe if abuse is alleged or suspected.

We have since received updated policies and procedures from the provider, which protect people against the risk of abuse, and ensure that staff understand and respond appropriately if abuse is alleged or suspected.

Our judgement

The provider was meeting this standard.

The provider has appropriate procedures in place to protect people against the risk of abuse, and to ensure that staff understand and respond appropriately if abuse is alleged or suspected.

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

We did not visit the service for this review.

People we spoke with during our visit in March 2012 told us they felt listened to and had a say in how the service was run.

Other evidence

At our last visit in March 2012 a policy was not in place setting out how the quality of the care and service is monitored. We found that the provider mostly monitored the service and risks through informal systems such as observing the care, overseeing accidents and incidents and asking relatives and people if they were happy with the service. Limited systems were in place to reduce risks, to identify areas for improvement and to show that the quality and safety of the service was effectively monitored.

We have since received a clear policy from the provider setting out how the quality of the care and service is monitored. The provider has assured us that formal systems have been put in place to identify areas for improvement, to reduce risks and to show that the quality and safety of the service is effectively monitored. Annual satisfaction questionnaires and regular resident meetings are held to enable people to contribute to the running of the home.

Our judgement

The provider was meeting this standard.

The provider has put effective systems in place to monitor the quality of service that people receive, and to manage risks to the health, safety and welfare of people using the service.

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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