

Review of compliance

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Green Trees Care Home

Region:	London
Location address:	Green Trees Care Home 21 Crescent East Hadley Wood Barnet Hertfordshire EN4 OEY
Type of service:	Care Home Service without Nursing
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Overview of the service:	Green Trees is currently registered to carry out the regulated activity Accommodation for persons who require nursing or personal care. Green Trees is a small family owned residential care home specialising in the care of the frail elderly and those who suffer dementia. The home is a detached Edwardian property located in a residential area of Hadley Wood registered to provide care and support for sixteen older people.

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

What we found overall

We found that Green Trees was meeting all the essential standards of quality and safety we reviewed.

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 to check whether Green Trees had made improvements in relation to:

:

- Respecting and involving people who use services
- Care and welfare of people who use services
- Safeguarding people who use services from abuse
- Cleanliness and infection control
- Management of medicines
- Safety, availability and suitability of equipment
- Requirements relating to workers
- Supporting workers
- Records

How we carried out this review

We reviewed all the information we hold about this provider, carried out a visit on the first of April 2011 to check compliance in respect of a warning notice served and compliance actions made following the planned review on the 11/2/2011.

We observed how people were being cared for, talked with people who use services, talked with staff, checked the provider's records, and looked at records of people who use services.

What people told us

We spoke with people that use the service during our visit to the service.

We observed that the staff were checking on people in their bedrooms on the day of the inspection to ensure that support was provided to them.

People spoken to said they felt "safe and were happy at the home".

We observed the home was clean. We saw staff carrying out cleaning around the home.

A number of people when asked said they were happy with their bedrooms.

A person told us when asked about how staff had treated them "The staff are kind; they do all they can to help".

What we found about the standards we reviewed and how well Green Trees 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 who use the service had their privacy and dignity respected particularly at meal times.

- Overall, we found that Green Trees was meeting this essential standard.

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

People that use the service and those that choose to remain in their bedrooms receive sufficient care and support to ensure their needs are met. The new system of recording information evidences support provided.

- Overall, we found that Green Trees was meeting this essential standard.

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

The registered provider has made suitable arrangements to ensure that people that use the service are safeguarded against the risk of abuse because a new entry system has been purchased that guarantees the prevention of unauthorised entry to the home.

- Overall, we found that Green Trees was meeting this essential standard.

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

We observed the home was clean. We saw staff carrying out cleaning around the home outside of meal times.

- Overall, we found that Green Trees was meeting this essential standard.

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

The audit of medication and inspection of records of receipts, administration and disposal of medication suggested that the home had complied with the warning notice issued on 28 February 2011.

The home now has procedures in place to protect service users against the risks associated with the unsafe management of medication.

- Overall, we found that Green Trees 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 home that meets their needs. The home provides a safe environment for people to live in.

- Overall, we found that Green Trees was meeting this essential standard.

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

The registered provider has ensured that weighing equipment for people that use the service is now available and working effectively. This ensures that people's weight is being monitored and reduces the risk of potential harm.

- Overall, we found that Green Trees was meeting this essential standard.

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

Deprivation of Liberty Training and Mental Capacity Act Training has been provided to assist staff to meet the needs of the people that use the service.

- Overall, we found that Green Trees was meeting this essential standard.

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

Records about people's needs are accurate and up to date. This ensures people receive the care and support they need and are monitored.

- Overall, we found that Green Trees was meeting this essential standard.

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

On this occasion we did not speak to people about this outcome area.

Other evidence

The people seen were well dressed. This promotes their self esteem.

During the previous visit on 11 February 2011 a person was hoovering at lunch time. The management team have reviewed this and hoovering now takes place outside this period. This will ensure that people are not disturbed when eating their meal.

Our judgement

People who use the service had their privacy and dignity respected particularly at meal times.

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
We observed that the staff were checking on people in their bedrooms on the day of the inspection to ensure that support was provided to them.

Other evidence
At the previous visit on the 11th of February 2011 we did not know how people that did not have on call buzzers in their bedrooms call for assistance. We were informed that there is a policy of two hourly checks but no documents were completed to confirm this. People’s needs vary and standard two hourly checks may not ensure sufficient support for people that use the service. The management team have obtained a system that is linked to the new entry system. A code is scanned which is linked to the care plan when people are provided with support in their bedrooms. A report can then be provided which shows the support provided to people that choose to remain in their bedrooms.

Our judgement
People that use the service and those that choose to remain in their bedrooms receive sufficient care and support to ensure their needs are met. The new system

of recording information evidences support provided.

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
People spoken to said they felt "safe and were happy at the home".

Other evidence
We were told at the previous review that the management team have provided relatives with the code to access the home. Access is now gained using a finger print reader which controls the door lock. The current measures in place mean that the safety of the people that use the service is promoted and unauthorised people can no longer gain access.

Our judgement
The registered provider has made suitable arrangements to ensure that people that use the service are safeguarded against the risk of abuse because a new entry system has been purchased that guarantees the prevention of unauthorised entry to the home.

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
We observed the home was clean. We saw staff carrying out cleaning around the home outside of meal times.

Other evidence

The bathrooms and toilets were clean and odour free. There was soap in all of the bathrooms. There were signs in pertinent positions around the home advising people to wash their hands to help prevent infection.

There was an odour that was noticeable in the hallway at the start of the visit which had been discussed with the management at the previous visit. This odour had reduced to some extent. The management team confirmed they had ordered new secure laundry trolleys with hinged lids to keep dirty laundry contained. They have also investigated other types of carpet cleaning equipment. The management team have also confirmed they would be looking at other methods to manage one person's inappropriate toileting habits. The actions carried out by the management team will create a better environment for the people that use the service and their visitors.

The material under the dining room table clothes which was badly stained at the previous visit had been replaced with new table protectors. This means that infection control standards are no longer compromised for people using the service.

The seating in the lounge which had ingrained stains on it had been cleaned. This means that people are not put at unnecessary risk of infection.

Our judgement

The systems in the home have improved and the management team are acting to ensure that the home is odour free and clean. This ensures that people are not at risk of unnecessary infection.

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

What people who use the service experienced and told us

We observed that six people were still asleep when we started this inspection and the care workers checked on them regularly and offered them their medication when they were ready. We saw one lady given a late breakfast followed by her medication. No people were able to self medicate. We saw that several people had difficulties with speech and swallowing and there was evidence of referral to dieticians, speech and language therapists and specialist consultants. Records showed that this was also to ensure that the appropriate form of medication could be administered in an appropriate way.

Other evidence

This inspection was carried out to check compliance with a warning notice issued to the home on the 28th of February 2011 because of a failure to protect service users against the risks associated with the unsafe use and management of medicines.

We saw that all but six people had received all their medication over the last 6 weeks and that the records were signed appropriately. There was just one omission

in records of administration and the counts of tablets suggested that all people were receiving their medicines as prescribed. The GP had reviewed the timing of some night time medications and had written individual letters confirming the changes.

We saw that medication was well organised and stored securely. Medication was supplied in original patient packs and the Mediform Medication Administration Records were handwritten. All records for receipt, administration and disposal were complete. There was one exception with a liquid anticonvulsant where there was a gap in administration. The manager knew about this and the daily care record showed no adverse outcome.

We saw no records of medicines not being given because people were asleep. When we counted tablets all could be reconciled with the records.

We saw evidence of review of medication by the GP and when medicines were discontinued this was recorded in the healthcare section of the care plan. The GP had reviewed the timing of night medications and instructions on the prescriptions correlated with what was being given on the Medication Administration Record. We were told that the pharmacist labels would also correlate when they were printed for the next medication cycle.

The home had updated its medication policy and had included a procedure for referral to the GP if a dose of medicine was refused or missed for more than 2 days.

Our judgement

The audit of medication and inspection of records of receipts, administration and disposal of medication suggested that the home had complied with the warning notice issued on 28 February 2011.

The home now has procedures in place to protect service users against the risks associated with the unsafe management of medication.

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

When walking around the home we saw a number of rooms that were personalised with people’s individual items such as photographs, plants and televisions that reflected people’s preferences. A number of people when asked said they were happy with their bedrooms.

Other evidence

The carpet in the lounge that is badly faded is going to be replaced and a date has been provided with regard to when this will take place. This will promote a homely atmosphere for the people who use the service.

At the previous inspection there were many items stored in the yard. These items were broken and awaiting disposal. They have now been removed. The area at the rear of the coach house has been fenced off. This ensures that people that use the service are not at risk from potential health and safety hazards.

Our judgement

People live in a home that meets their needs. The home provides a safe environment for people to live in.

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

On this occasion we did not speak to people about this outcome area.

Other evidence

The lift was working effectively on the day of the inspection. There is also a stair lift which ensures people's free access around the home if the lift breaks down.

The weighing scales that were broken at the time of our previous visit have been replaced with a new set of weighing scales that had been purchased. This means that any change in people's weight is now being monitored and recorded.

Our judgement

The registered provider has ensured that weighing equipment for people that use the service is now available and working effectively. This ensures that people's weight is being monitored and reduces the risk of potential harm.

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

A person told us when asked about how staff had treated them “The staff are kind; they do all they can to help”.

Other evidence

The management team have said that safeguarding training is being completed in partnership with the local authority. The local authority have also confirmed this arrangement.

The staff have undertaken Deprivation of Liberty Training and Mental Capacity Act Training, in March 2011. This assists staff to support people that use the service and ensure their rights are respected. This ensures their needs are met and safety is promoted.

Our judgement

Deprivation of Liberty Training and Mental Capacity Act Training has been provided to assist staff to meet the needs of the people that use the service.

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

The provider is compliant with outcome 21: Records

Our findings

What people who use the service experienced and told us

On this occasion we did not speak to people about this outcome.

Other evidence

We looked at the records of the food eaten by people that use the service. They were completed and up to date. They indicated the preferences of the people that use the service and contained good information with regard to how food needed to be prepared as well as information in relation to the type of food people did not like or could not eat. This assists to ensure that clear information is recorded to indicate that people’s nutritional needs are met.

We also looked at people’s weight charts and they had been completed. It is now possible to monitor if people’s nutritional needs are sufficiently met.

Our judgement

Records about people’s needs are accurate and up to date. This ensures people receive the care and support they need and are monitored.

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 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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