

Review of compliance

<p>Holly Tree Lodge Holly Tree Lodge</p>	
Region:	East
Location address:	122 Spring Road Kempston Bedford Bedfordshire MK42 8NB
Type of service:	Care home service without nursing
Date of Publication:	April 2012
Overview of the service:	Holly Tree Lodge is registered to provide accommodation for persons who require nursing or personal care, to a maximum of 14 people. Currently no nursing care is provided. At the time of our inspection the home accommodated 10 people.

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

Our current overall judgement

Holly Tree Lodge was not meeting one or more essential standards. Improvements are needed.

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 1 March 2012, observed how people were being cared for, talked to staff and talked to people who use services.

What people told us

During our visit to Holly Tree Lodge on 01 March 2012 we spoke with some of the people living at this home. They told us they liked living here, and that staff treated them with respect.

People told us they were involved in deciding about some of the care and support they needed, and could make choices about how they lived their lives. They said they were given help when they needed it and we saw that staff offered personal care to people in a discreet and sensitive way.

People we spoke with during our visit to this home told us they felt safe here, and that staff treated them well. We observed that staff were kind, caring and attentive and there was good interaction between the staff and the people living at the home.

Our inspection identified that there were a number of issues about the service provided at this home, relating to the environment, people's involvement in making decisions about the care they received, care planning and risk assessments, and quality assurance. These are detailed in the report.

What we found about the standards we reviewed and how well Holly Tree Lodge 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 not compliant with this outcome. Staff showed respect for people, but people's dignity and independence was compromised by the environment. People were not sufficiently involved in making decisions about the care they received, or given adequate choices about how they lived their lives.

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

The provider was not compliant with this outcome. Care plans and risk assessments were not detailed enough and were not kept up to date, so that people's current needs were not clear. This meant that staff did not have clear guidance about how to meet each person's needs consistently, which put people at risk of not being given safe and effective care.

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

The provider was compliant with this outcome. Staff had received training in safeguarding vulnerable adults from abuse, and were clear about their reporting responsibilities.

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

The provider was compliant with this outcome. There were enough staff on duty who had received sufficient training and support to ensure that the people living at Holly Tree Lodge received safe and effective care.

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 not compliant with this outcome. The systems in place were not robust enough to ensure that a quality service was provided to the people living at this home.

Actions we have asked the service to take

We have asked the provider to send us a report within 14 days of them receiving this report, setting out the action they will take to improve. We will check to make sure that the improvements have been made.

Where we have concerns we have a range of enforcement powers we can use to protect the safety and welfare of people who use this service. When we propose to take enforcement action, our decision is open to challenge by a registered person through a variety of internal and external appeal processes. We will publish a further report on any action we have taken.

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.

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 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

There are minor concerns with Outcome 01: Respecting and involving people who use services

Our findings

What people who use the service experienced and told us

During our visit to Holly Tree Lodge on 01 March 2012 we spoke with a couple of the people living at this home. They said they liked living here, and that staff "speak to us nicely, with respect". Three people each had their own bungalow in the grounds of the home, where they could be as independent as they wanted to be. One person told us they liked going to the house and joining in what was going on, but also liked having their own space.

People told us they were involved in deciding about some of the care and support they needed, and could make choices about how they lived their lives. For instance, they could get up and go to bed when they wanted to, and chose where to eat their meals. However, one person said they had not been asked if they wanted to look after their own medicines, which they thought they might have liked to do.

While we were at Holly Tree Lodge we saw that staff treated people with respect and that care was offered discreetly. One of the staff we spoke with said "It's important to respect people".

Other evidence

We looked at care records for two people living at this home. The records were quite

muddled and we found it difficult to find the information we were looking for. We did not see any evidence that people, or their representatives, had been involved in planning their care, or agreeing to the plans.

During our visit to Holly Tree Lodge, we walked round the house. We noted that at least two of the bedrooms had been recently re-decorated, using the person's choice of colour scheme. However, there were a number of maintenance and décor issues which meant that people's dignity and choice were compromised. Issues we found included stained, worn carpeting on the stairs; stained carpeting in one bungalow where there was a strong smell of urine; a smell of damp in a second bungalow; curtains hanging off the rails in a number of rooms; a broken toilet; adjustable chairs requiring repair and very tatty furniture in the lounge. Also, one bedroom door had no fire closer and did not shut properly, and radiator covers meant people were unable to regulate the temperature in their own rooms.

People were given opportunities for community involvement. One person liked to go to the library and another told us they were hoping to go to the circus. One person said that the manager was going to take two of them out the day after our inspection to celebrate the other person's birthday. However, people were not given enough opportunities to develop or maintain independent living skills around the house. People did not routinely assist with household chores such as shopping or cooking, although one person said they helped staff clean their bedroom. One person's freedom of movement independently around the home was hampered by a small ramp between the dining room and the rest of the house. They had been given a smaller wheelchair so that they could get through the doorways, but we saw they were not able to independently manoeuvre this wheelchair up the ramp. They were at risk of tipping out of the wheelchair.

Our judgement

The provider was not compliant with this outcome. Staff showed respect for people, but people's dignity and independence was compromised by the environment. People were not sufficiently involved in making decisions about the care they received, or given adequate choices about how they lived their lives.

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

There are moderate concerns with Outcome 04: Care and welfare of people who use services

Our findings

What people who use the service experienced and told us

People we spoke with said they were given help when they needed it. During our visit on 01 March 2012 we noted that staff offered personal care to people in a discreet and sensitive way.

Other evidence

We looked at the care records for three of the people living at Holly Tree Lodge. Records for one person who had moved into the home quite recently contained a good assessment of the person's needs. Detailed daily care records showed that this person's assessed needs were being met by the staff. However, another set of records was very muddled and it was difficult to find what care the person needed. It became clear that the person's needs had changed considerably in recent weeks, but the care plans, risk assessments and other documents had not been updated. This meant there was no clear guidance for staff on how to care for this person so that their needs were met, and met consistently. This person was no longer able to tell staff what they needed.

The manager told us she was in the process of reviewing and updating all the care records, risk assessments and other related documents. However, we noted that even some of the reviewed documents were not accurate and not up to date. One person had moved into the home fairly recently. The care/support plans on their file were the ones they brought with them from another home. These gave much clearer details about the support the person needed, and were written in a more personalised way.

The manager told us that people's healthcare needs were met. We did not see any evidence of this in the records we looked at. However, the manager explained that each person is seen regularly by other healthcare professionals, who all contact the home when that person's next appointment is due. People's individual records should make this clearer.

Our judgement

The provider was not compliant with this outcome. Care plans and risk assessments were not detailed enough and were not kept up to date, so that people's current needs were not clear. This meant that staff did not have clear guidance about how to meet each person's needs consistently, which put people at risk of not being given safe and effective care.

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 we spoke with during our visit to this home on 01 March 2012 told us they felt safe here, and that staff treated them well. We observed that staff were kind, caring and attentive.

Other evidence

Staff we spoke with during our visit told us they had all received some form of training about safeguarding vulnerable adults. Training records confirmed that staff had done an e-learning programme on safeguarding vulnerable adults from abuse, via the computer. Some staff had also undergone a safeguarding course arranged by the local authority. Staff demonstrated to us that they were confident that they would recognise abuse, and they were clear about their responsibilities to ensure any allegations were reported in accordance with safeguarding protocols.

The provider had recently installed gates across the entrance to the rear garden, to help protect people, particularly those in the bungalows, from the risk of intruders.

Our judgement

The provider was compliant with this outcome. Staff had received training in safeguarding vulnerable adults from abuse, and were clear about their reporting responsibilities.

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

People we spoke with were positive about the staff. Their comments included, "The staff are OK – they help me when I need it". Our observations confirmed that staff carried out their work calmly and efficiently in a caring, friendly way.

Other evidence

On the day we visited Holly Tree Lodge we observed that there were enough staff on duty to meet people's needs. Staff we spoke with confirmed that there were usually enough staff. They said that the manager had increased the staffing levels when new people had been admitted, and would put extra staff on duty at times when it was needed.

Staff we spoke with were very positive about working here. They made comments which included, "It's really good, really really rewarding"; "This is a lovely care home – it's really nice to work here"; and "It's a very nice home, people are well looked after".

Staff told us that they had received all the required training, which was regularly updated. They said the training was either external courses, a trainer coming to the home, or e-learning done via the computer. They also said training was arranged to meet the individual needs of the people living at the home. For example, staff had recently received training in supporting people whose behaviour challenges the service, to meet the needs of one of the people who had recently been admitted. An external speaker had been arranged to talk to the staff about meeting one person's sensory needs, as they had poor sight. However, training records were not sufficiently up to date to confirm exactly what training each staff member had had or would be having.

The manager was aware of this and was in the process of updating the records.

Staff we spoke with told us the manager was very supportive. They said they received supervision and staff meetings were held regularly. They felt they were able to put their views forward and they would be listened to.

Our judgement

The provider was compliant with this outcome. There were enough staff on duty who had received sufficient training and support to ensure that the people living at Holly Tree Lodge received safe and effective care.

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

There are moderate concerns with Outcome 16: Assessing and monitoring the quality of service provision

Our findings

What people who use the service experienced and told us

When we visited Holly Tree Lodge on 01 March 2012 we did not ask people directly whether they had the opportunity to formally comment on the quality of the service provided. However, people we spoke with were content with the service they get. One person said, "I love living here".

Other evidence

The manager told us that there were a number of ways in which they ensured a quality service was being provided. A written survey had been sent to people living at the home and their families in March 2011, and another would be sent out soon. We did not see the results of the survey. The manager said meetings had been arranged for families to attend, but attendance had been poor, so these had been discontinued. However, the manager said that families had told her they were happy to speak to staff if anything was wrong.

The providers visited Holly Tree Lodge every Thursday. They told us they carried out a number of audits and discussed their findings with the manager. However, we did not see any evidence that the providers had identified the issues we found with the inadequate care planning and risk assessment processes. The providers told us they were aware that much of the environment was in a poor state. They said they had concentrated on safety issues, so had installed secure gates and fencing across the front of the property as a priority. They had also bought a large television which people living at the home had asked for. They said that next they would be replacing furniture and flooring. We asked the provider to produce a refurbishment plan, including

timescales, for when the necessary work would be completed.

The fire safety officer had visited the home in January 2012. They had made three recommendations: that there should be more staff trained as fire marshals, that fire doors round the boiler should be improved, and that the fire risk assessment needed more detail. They said they would return within six months to ensure the recommendations had been complied with. The manager said that fire alarm checks, emergency lighting checks and fire drills are carried out at the required intervals.

Our judgement

The provider was not compliant with this outcome. The systems in place were not robust enough to ensure that a quality service was provided to the people living at this home.

Action we have asked the provider to take

Compliance actions

The table below shows the essential standards of quality and safety that **are not being met**. Action must be taken to achieve compliance.

Regulated activity	Regulation	Outcome
Accommodation for persons who require nursing or personal care	Regulation 17 HSCA 2008 (Regulated Activities) Regulations 2010	Outcome 01: Respecting and involving people who use services
	How the regulation is not being met: Staff showed respect for people, but people's dignity and independence was compromised by the environment. People were not sufficiently involved in making decisions about the care they received, or given adequate choices about how they lived their lives.	
Accommodation for persons who require nursing or personal care	Regulation 9 HSCA 2008 (Regulated Activities) Regulations 2010	Outcome 04: Care and welfare of people who use services
	How the regulation is not being met: Care plans and risk assessments were not detailed enough and were not kept up to date, so that people's current needs were not clear. This meant that staff did not have clear guidance about how to meet each person's needs consistently, which put people at risk of not being given safe and effective care.	
Accommodation for persons who require nursing or personal care	Regulation 10 HSCA 2008 (Regulated Activities) Regulations 2010	Outcome 16: Assessing and monitoring the quality of service provision
	How the regulation is not being met: The systems in place were not robust enough	

	to ensure that a quality service was provided to the people living at this home.
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The provider must send CQC a report that says what action they are going to take to achieve compliance with these essential standards.

This report is requested under regulation 10(3) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010.

The provider's report should be sent to us within 14 days of the date that the final review of compliance report is sent to them.

Where a provider has already sent us a report about any of the above compliance actions, they do not need to include them in any new report sent to us after this review of compliance.

CQC should be informed in writing when these compliance actions are complete.

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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