

Review of compliance

The Limes Residential Home The Limes Residential Home	
Region:	East Midlands
Location address:	12 Limes Avenue Mickleover Derby Derbyshire DE3 0DB
Type of service:	Care home service without nursing
Date of Publication:	November 2011
Overview of the service:	The Limes Residential Home is registered to provide accommodation for persons who require nursing or personal care. Located in Mickleover, Derby it is registered for up to 34 people.

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

Our current overall judgement

The Limes Residential Home was meeting all the essential standards of quality and safety.

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 14 October 2011, 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 some people living at The Limes to gather their experiences of the care they were receiving. We were told "I have a few health issues but they look after me though. They will make appointments for me quickly." Another person said "They really look after me, I am happy here."

We checked if people were aware of their care plan and were happy it was accurate. One person told us "The staff have been through it with me. It is accurate."

We spoke to people using the service to gather their opinion on the running of the service. We were told "I take part in the resident's meetings, they do listen to what we say" and "Yes the service seems to be well run." Another person added "We see the manager daily and everything is well looked after. I know where to go if there was ever a problem."

We spoke to some visiting relatives to gather their views on the service. We were told "I received a satisfaction survey recently and filled that in, although I have not heard the results of it." Relatives also confirmed that they were able to attend the resident's meeting should they wish to.

What we found about the standards we reviewed and how well The Limes Residential Home was meeting them

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

People experienced effective, safe and appropriate care that met their needs and protected their rights.

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

People benefitted from safe quality care due to effective decision making and the management of risks to their health, welfare and safety.

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 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

We spoke to some people living at The Limes to gather their experiences of the care they were receiving. We were told "I have a few health issues but they look after me though. They will make appointments for me quickly." Another person said "They really look after me, I am happy here."

We also asked about the food on offer at The Limes and were told "The food is excellent. If I ever don't fancy what's on the menu I can ask for other things." We were also told "The food is lovely, they do offer alternatives but I like everything that's on offer."

When asked if there were enough things to do, people said "I have my own radio and there is music and a television in the lounge. There are things going on, we played bingo this morning." Another person added "There is plenty to do, sometimes local children visit, we have sing-a-longs and there are games we can play. We do go outside when the weather is nice and staff walk with some people to the shops."

We spoke to some visiting relatives who also confirmed they had seen different activities taking place. One visitor thought that the conservatory area was underused; "I think that they could use the conservatory a bit more as it is a nice space." A visitor also told us that they would have liked a private area where they could talk with their relative. This person did acknowledge that this may be difficult within the confines of the building.

We checked if people were aware of their care plan and were happy it was accurate. One person told us "The staff have been through it with me. It is accurate."

We also spoke to some visitors about their experiences and were told "My relative has been here a long time, I am very happy, the staff are caring and treat people as individuals. I have noticed how they have adapted the care over the years as needs have changed." Another visitor told us "I think they are very good, my relative seems happy."

The relatives we spoke to also indicated that they were kept informed of any changes and other important information. One relative added "They make sure I sign the care plan each month to confirm it is accurate. I am happy it is accurate." Another relative told us "The staff keep me informed of everything."

We spoke to a visiting professional who told us "I hold The Limes in high regard, I think it is one of the best homes in the area. They contact me as and when I am required and I have no concerns."

Other evidence

We checked the care plans of four people who were living at The Limes. We were informed that the resident or relatives are able to view these plans at any time. Each file contained details of essential information such as allergies and the resident's next of kin.

Each file contained a detailed initial assessment, this showed that the service had assessed each person's needs upon admission to the home. Each care plan was written taking into account these initial details. The care plans contained risk assessments for each person in such areas as falls, mental health and physical health. Each section also contained basic information directing staff in how to manage each need. We saw that risk assessments were reviewed monthly. The care workers we spoke with indicated they were satisfied with the information available about each resident. Each care worker displayed good awareness of the needs of residents and felt they were able to meet those needs.

Care workers had recorded each person's weight monthly, or more often where it was deemed necessary. Where a person had been assessed as nutritionally at risk, care workers were monitoring their food and fluid intake. The Limes had two separate dining areas, one for more independent people and another for people who required assistance to eat. We saw that there were two care workers in the assisted dining room who were assisting people to eat in a calm and unhurried manner.

The manager told us some people who used the service had bed side rails in place to prevent them falling out of bed. We saw that where these were in place, a risk assessment and record of consent was in the person's care plan.

In each of the care plans we saw there was a completed checklist relating to the Deprivation of Liberty Safeguards (legislation designed to protect people who may lack capacity to make their own decisions). These had been used by the service to check whether they may be depriving a person of their liberty. In each case the service had determined that they were not depriving that person of their liberty. This demonstrated that the service was aware of relevant legislation and had regard to it.

We saw evidence which demonstrated care workers were in contact with local GPs, dentists, district nurses and other professionals.

Each of the care plans we saw had been reviewed on a four weekly basis to check whether it was still applicable to that person. Any changes were noted in the care plan.

We saw the service's "entertainment file" which indicated that there were numerous, varied activities happening in the home. The care workers we spoke with also indicated there were a lot of activities. We were also told "We have time to sit chatting with people, people can go out and about, nothing is too much trouble."

Our judgement

People experienced effective, safe and appropriate care that met their needs and protected their rights.

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 spoke to people using the service to gather their opinion on the running of the service. We were told "I take part in the resident's meetings, they do listen to what we say" and "Yes the service seems to be well run." Another person added "We see the manager daily and everything is well looked after. I know where to go if there was ever a problem."

We spoke to some visiting relatives to gather their views on the service. We were told "I received a satisfaction survey recently and filled that in, although I have not heard the results of it." Relatives also confirmed that they were able to attend the resident's meeting should they wish to.

A relative told us "I feel that I can speak to anyone at any time. They listen to me and the service is run very efficiently."

Other evidence

The service was maintaining two separate files for monitoring people who have falls. One file contained forms completed where care workers had witnessed somebody fall. The other file contained forms completed where care workers had found somebody on the floor and a fall was not witnessed. The manager told us that these forms were analysed in order to detect any patterns. Any actions put in place were also recorded.

The manager displayed a good awareness of incidents that require notification to the Care Quality Commission.

We saw a copy of a recent newsletter (dated July 2011) which was on display in the foyer area. This contained information about recent events in the home. This was printed in large text although there were no pictures which may have benefitted people.

The manager told us that residents have a meeting every three months. Relatives were invited to attend these meetings also. The minutes of the latest meeting were available in the home and were dated 8 August 2011. These indicated that around half of the residents had attended the meeting. The minutes covered areas such as the décor of the home, staffing issues, menus and medication.

We saw evidence of the manager's auditing across several areas. We checked a recent audit of medication administration records and prescriptions. This indicated that the manager was reviewing the suitability of resident's medication on an ongoing basis with their GP. We checked the most recent medication administration record which was fully completed. Audits were also being carried out for visual safety checks, contractor visits/maintenance and housekeeping standards. The maintenance worker at The Limes had carried out their own audit which had identified items that needed fixing or replacing. Care plans were also subject to four weekly audits, as mentioned in Outcome 4.

We also spoke with care workers to gather their views of the running of the service. We were told "We have staff meetings and supervision. There are plenty of opportunities for us to raise things. There is such an open atmosphere that things get dealt with as they happen anyway." Another care worker told us "I feel valued here. The manager will make changes based on our suggestions and the resident's views."

Our judgement

People benefitted from safe quality care due to effective decision making and the management of risks to their health, welfare and safety.

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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