

# Review of compliance

April Cottage Retirement Home  
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<b>Region:</b>	East Midlands
<b>Location address:</b>	54 Belvoir Road Coalville Leicestershire LE67 3PP
<b>Type of service:</b>	Care home service without nursing
<b>Date of Publication:</b>	February 2012
<b>Overview of the service:</b>	April Cottage Care Home cares for twelve older persons in two converted detached properties converted into one building for its present purpose. The home is situated in a residential area, within walking distance of the centre of Coalville. The accommodation is over two floors accessible by use of the vertical lift. There are twelve single bedrooms; some bedrooms have en suite facilities. There are two lounges

	and dining space for residents use. A garden is situated to the rear.
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# Summary of our findings for the essential standards of quality and safety

## Our current overall judgement

**April Cottage Retirement 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 and carried out a visit on 27 January 2012.

### What people told us

"They regularly ask my opinion about the service."

"They involve me in my care, my key worker talks to me about my care and she is very nice."

"I couldn't say anything other than I have been happy here during my stay."

"I feel safe with all the staff."

"It's like a big happy family here."

### What we found about the standards we reviewed and how well April Cottage Retirement 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**

People using the service can expect to receive care that supports their choices and have their privacy and dignity respected.

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

People using the service can expect to receive care that is safe and appropriate to meet their assessed needs.

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

People who use this service are protected from abuse or the risk of abuse by clear policies and procedures as well as knowledgeable management and staff.

**Outcome 12: People should be cared for by staff who are properly qualified and able to do their job**

People using the service are safe and their health and welfare needs are met by staff who are fit and appropriately qualified to do their job.

**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 using the service benefit from a service that is well run by effective management that look to minimise risk to people's health and welfare.

**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

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 spoke with six people using the service. They told us;

"The staff are all so kind they would do anything for you."

"They always make sure they give you a choice in how you spend your day."

"I couldn't have picked a better place."

"The staff ask me questions about how I need help they did this before I came in and always whenever they come to give me help."

"They have residents meetings where we can say what we think about the home and any changes we want to make."

"I can go to bed and get up when I want."

"I feel listened to."

We spoke with 3 relatives who told us they thought the home very good and the staff

excellent at making sure their loved ones got the best possible care.

"They (staff) go the extra mile."

"They always make sure I am kept informed about my relative."

"It's like a big happy family here."

### **Other evidence**

We spoke with the provider, the manager and two staff. All gave clear views on how to ensure people using the service were to be given choice and involved in their care as well as respecting privacy and dignity.

Care plans showed that people using the service and their relatives were involved in both the creation and then the ongoing review of their care. Staff told us "We are key worker for people and we sit with them and go through how they want their care to be given and make sure their plans show this."

"We involve them in choosing their clothes and we try to give one to one personal care as much as possible."

"We support people's privacy and dignity by making sure when we ask them if they need the toilet we ask quietly not talking loudly in the lounge so others hear."

"We try to encourage independence and give choice where we can".

### **Our judgement**

People using the service can expect to receive care that supports their choices and have their privacy and dignity 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

People we spoke with all said that they had been spoken with prior to moving to the home and that staff continued to check that the care they received still met their needs.

"They involve me in my care, my key worker talks to me about my care and she is very nice."

"My key worker talks to me about my care needs, they make sure everything is ok."

"They make sure they always talk to me about my care."

Relatives told us;

" If my relative is unwell they always call the GP, the staff know what they are doing. She recently needed some equipment so they arranged for an occupational therapist to come in and assess her."

"They always keep me informed if she isn't very well, they have nursed her back from serious bad health not once but twice."

##### Other evidence

We looked at care plans and they showed that an initial plan was created prior to a person coming into the home from an assessment, then a more detailed plan was created with the person and their relatives. Each plan was then subject to regular

review. Staff told us that this was done either monthly or as a need changed.

We saw that all areas of a person's life in the home was risk assessed and clear guidance was then provided on how to minimise risk. The manager told us that staff read care plans and staff confirmed that they read care plans and kept them up to date.

We saw information relating to specific needs such as diabetes, this information was detailed and provided information both to staff and relatives about the illness and how it could be managed ensuring the person using the service received the most appropriate care.

**Our judgement**

People using the service can expect to receive care that is safe and appropriate to meet their assessed 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

All six people using the service spoken with told us that they felt safe with the staff and that staff treated them with respect.

"I couldn't say anything other than I have been happy here during my stay."

"I feel safe with all the staff."

"I am happy living here the staff are very kind, always respectful."

"The staff are very thoughtful, I feel safe here."

Relatives told us;

"This home came on recommendation, my mind is at rest I think she is safe here."

"We couldn't have picked a better place."

"The staff are wonderful here."

##### Other evidence

We spoke with staff who told us that they had Mental Capacity Act Training and Deprivation of Liberty training but had not done safeguarding training. However in discussion with staff they had a clear understanding of what abuse was and were very

clear about the standards expected from the provider in that he had a zero tolerance for any type of abuse and they knew he would escort them off the premises if they did anything wrong to the residents. All staff were aware of the whistle blowing policy and their duty of care to people using the service to report anything that may be thought to be abuse. This ensures that people using the service are safe and protected from abuse.

In discussion with the manager she told us all staff had to sign to say they had read the policies and procedures within the service and this included the whistle blowing policy, this ensures that all staff are kept aware of their responsibilities.

We spoke with the provider about safeguarding training and he agreed to arrange this training as soon as possible to ensure he was fully compliant with this outcome. However, as staff were so clear about their responsibilities and understood what abuse was we will not be creating a Compliance Action to meet this outcome.

**Our judgement**

People who use this service are protected from abuse or the risk of abuse by clear policies and procedures as well as knowledgeable management and staff.

## Outcome 12: Requirements relating to 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 staff who are fit, appropriately qualified and are physically and mentally able to do their job.

### What we found

#### Our judgement

The provider is compliant with Outcome 12: Requirements relating to workers

#### Our findings

##### What people who use the service experienced and told us

We did not ask people who use the service about staff recruitment.

##### Other evidence

We looked at two staff files and saw that criminal record bureau checks and two references were taken up prior to a person starting work at the home. This ensures that only staff who are suitable to work with vulnerable people are recruited.

Staff told us that they received regular supervision and appraisals from management, we saw records that confirmed this. The supervision records we looked at showed that staff training was discussed and staff were supported to attend a wide variety of training, including mandatory training such as moving and handling and infection control. Staff told us they had also attended courses on dementia awareness and nutrition and hydration in the elderly. This ensures that staff working in the service have the skills and knowledge to provide the care needed to meet the needs of people using the service.

##### Our judgement

People using the service are safe and their health and welfare needs are met by staff who are fit and appropriately qualified to do their job.

## 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 with six people using the service and three relatives they told us;

"They regularly ask my opinion about the service."

"They regularly ask me if I am happy with the service."

"I had a quality questionnaire recently."

"I have had at least two quality questionnaires whilst my relative has been here."

"We have regular meetings with the manager who checks if we want to change anything."

"I have never needed to complain but I know the provider would deal with it straight away."

##### Other evidence

We spoke with the provider about how he ensured the quality of the service was maintained, he showed us the results of a recent quality survey that looks at different aspects of the care and daily life within the home. He told us this was carried out at regular intervals amongst relatives and people who use the service.

We spoke with the manager who told us that there are weekly senior staff meetings that

look at how the home is doing and if things need changing, they also hold regular team meetings as well as resident meetings. The provider told us about a result of a recent meeting, that more choices were put on at lunch and now they have four choices each lunch time. This was confirmed in discussion with people who use the service.

The manager told us "This is a small home we listen to residents all the time and respond promptly."

The manager also told us "We review Risk assessments monthly and look at falls as needed if someone falls we get the GP in, the provider risk assesses the building to make sure it is safe."

Staff told us that maintenance was carried out promptly and the home was always clean and tidy.

During our walk round the home we noticed that the home was very clean and fresh smelling and clearly well maintained with evidence of ongoing improvements with new bathrooms being put in. Visiting relatives also commented on the cleanliness and good maintenance of the home.

#### **Our judgement**

People using the service benefit from a service that is well run by effective management that look to minimise risk to people's health and welfare.

# 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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