

Review of compliance

Mr & Mrs S Hayat Chandos Lodge Nursing Home	
Region:	South East
Location address:	Blackpond Lane Farnham Common Slough Berkshire SL2 3ED
Type of service:	Care home service with nursing
Date of Publication:	September 2012
Overview of the service:	Chandos Lodge Nursing Home is registered to provide accommodation and care for up to 31 older people with nursing needs. It is registered for the regulated activities accommodation for persons who require nursing or personal care, treatment of disease, disorder or injury and diagnostic and screening procedures.

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

Our current overall judgement

Chandos Lodge Nursing 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 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 17 August 2012, looked at records of people who use services, talked to staff and talked to people who use services.

What people told us

People told us that they and/or their family had been given the opportunity to visit the home before they moved in to ensure it met with their needs and expectations. They said that the staff treated them as individuals and respected their views and choices. They said they were provided with opportunities to take part in activities and were happy with the care and support they received. One person said "they are extremely kind...I think they meet my needs well." Another told us "the staff are very good here, they couldn't be better, very well trained."

What we found about the standards we reviewed and how well Chandos Lodge Nursing 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's privacy, dignity and independence were respected. Their views and experiences were taken into account in the way the service was delivered and provided in relation to their care.

The provider was meeting this standard.

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

People experienced care, treatment and support that met their needs and protected their

rights.

The provider was meeting this standard.

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

People who use the service were protected from the risk of abuse, because the provider had taken reasonable steps to identify the possibility of abuse and prevent abuse from happening.

The provider was meeting this standard.

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

People were cared for by suitably qualified, skilled and experienced staff.

The provider was meeting this standard.

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

People were cared for by staff who were supported to deliver care and treatment safely and to an appropriate standard.

The provider was meeting this standard.

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 had an effective system to regularly assess and monitor the quality of the service that people receive.

The provider was meeting this standard.

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 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

People's privacy, dignity and independence were respected.

People told us that they liked the staff and felt they met their needs well. They said that they were able to choose how they spend their day, including the time they chose to get up and retire to bed. They told us that individual and group activities were provided for them to take part in if they wished.

One person, told us that they were consulted with about their needs. They said they had seen their care plan and signed documentation to agreed to it. Another person told us the staff always respected their privacy, "they always tap on the door before entering."

Other evidence

People expressed their views and were involved in making decisions about their care and treatment.

We were told that people's independence and individuality was promoted within the home. Examples included enabling people to access the local community, enabling them to choose what time they wished to retire to bed and rise in the morning and

choices of meals.

People living there were supported, enabled and encouraged to express their views and make or participate in making decisions relating to their care and treatment. This was done through generally speaking to people on a day to day basis, through their reviews of care and completing surveys.

During our visit people were observed being spoken to and supported in a sensitive, respectful and professional manner.

Our judgement

People's privacy, dignity and independence were respected. Their views and experiences were taken into account in the way the service was delivered and provided in relation to their care.

The provider was meeting this standard.

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 said that staff treated them well and provided them with good care and support. They knew who to speak to if they had any concerns. People told us that they and their representative had discussed their needs with staff and were satisfied with the care and support they received. One person who came to Chandos Lodge Nursing Home straight from hospital told us staff had visited them in hospital to assess and discuss their care needs before they moved in.

People told us they were supported to access health services when required. One person told us staff had been very supportive and accompanied them to a hospital appointment.

Other evidence

People's care and treatment was planned and delivered in a way that ensured people's safety and welfare.

We looked at the care and support that three people received. We found that people's care plans addressed their particular needs, were detailed, reviewed and updated regularly, to meet their current needs.

An assessment of any risks had been recorded with actions documented as to how staff were to manage the risk. Examples included assessing the risk of people who could potentially develop pressure sores and risks associated with poor mobility needs such as falling. Plans were in place to address the moving and handling of people with

the use of equipment such as hoists.

People's care plans contained nutritional screening assessments and documentation within their files showed they were weighed regularly. This was to ensure they received adequate nutrition and maintained a healthy weight.

Daily records were completed for each person which detailed noted any care and support given. Where people were cared for in bed, we saw charts were in place for regular turning. Appropriate pressure relieving mattresses were in place. We saw that people cared for in bed looked comfortable, were repositioned regularly to prevent any discomfort or pressure sores and were provided with one to one activities if they wanted them. One person told us they had chosen not to have individual activities. They said "I am not very sociable, I am happier stretching out in my own room" and staff had respected their wishes.

People told us they had access to a dentist, optician, doctors and a chiropractor, all of who visited the home regularly. A visiting hairdresser and local clergyman also provided services to those who required. One person said the home had respected their wishes and told us "I go to my own local church."

Our judgement

People experienced care, treatment and support that met their needs and protected their rights.

The provider was meeting this standard.

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 told us that they had no concerns but if they did they would tell their relatives, the manager of the home or a member of staff. They said they felt safe and well looked after.

Other evidence

The staff we spoke with understood their duty of care and responsibilities in relation to safeguarding people from harm. Staff were familiar with the whistle blowing policy, and knew they were to report any allegations or incidents of abuse to their line manager. One staff member told us they they were encouraged to use the whistle blowing policy for any poor practices they become aware of. They told us that they had in fact done so and the manager was supportive and dealt with the issue appropriately. The manager confirmed they worked collaboratively with the local authority to safeguard and protect the welfare of people who use the service by reporting any concerns and attending any safeguarding meetings. A copy of the local interagency policies and procedures was in place for staff to refer to.

Staff knowledge and understanding of the safeguarding of vulnerable people was supported through training. The four staff files we looked at showed that they had received training to ensure their knowledge and skills were up to date.

Our judgement

People who use the service were protected from the risk of abuse, because the provider had taken reasonable steps to identify the possibility of abuse and prevent

abuse from happening.

The provider was meeting this standard.

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 spoke to people using the services but their feedback did not relate to this standard.

Other evidence

There was an effective recruitment and selection process in place. Appropriate checks were undertaken before staff started work.

We looked at the recruitment records for three people who had been recently employed.

Records showed that the provider obtained relevant information to protect people in the home from abuse. We saw Criminal Record Bureau (CRB) checks, references, UK entry clearances and a working history had been sought.

Staff members we spoke with confirmed that they had gone through a full recruitment process including an interview and a wait before they obtained their CRB disclosure. Staff also confirmed that they had received training during their induction period which was suitable to their role within the home and covered areas relevant to the needs of people living there. This included safeguarding, manual handling, dementia awareness, safeguarding infection control and health and safety.

Our judgement

People were cared for by suitably qualified, skilled and experienced staff.

The provider was meeting this standard.

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

We spoke to people using the services but their feedback did not relate to this standard.

Other evidence

People were cared for by staff who were supported to deliver care and treatment safely and to an appropriate standard.

Staff told us they were provided with a good level of training to assist them in their roles. They said the manager was very proactive in ensuring their training was up to date. They told us they were able to access training which was relevant to their roles. We looked at four personnel files and saw that relevant training had been provided. Examples included an induction at point of employment, moving and handling, first aid, safeguarding, safe use of medication, food hygiene and pressure ulcer prevention. Further specialised training was provided which included catheterisation, Parkinson disease, tissue viability and venepuncture.

Staff said they felt well supported, were provided with regular supervision and found the manager supportive and approachable. They told us they could approach the manager at any time and she would always accommodate their requests. We were provided with a copy of the staff supervision matrix, which showed that they received supervision every two months. They said they received an annual appraisal where their work was discussed along with any further developmental needs they may require or wish to pursue. Staff told us they were provided with staff meetings where they could bring up any areas of concern if they required. We saw that minutes of these meeting had been documented.

Our judgement

People were cared for by staff who were supported to deliver care and treatment safely and to an appropriate standard.

The provider was meeting this standard.

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

People told us staff often asked them if they were happy with the care and support they received and if they had any complaints.

Other evidence

The provider had systems in place to monitor and regularly assess the quality of service that people received.

People's views were sought both on an informal and formal basis. This was through talking to people and their representatives during their reviews of care, through the use of surveys and six monthly residents'-relatives' meetings. A comments box was also available in the home for people to make any comments and a communications book was in people's rooms for them or their visitors to document any comments about their care and support if they wished.

We saw documentation of monthly visits undertaken by one of the proprietors. The purposes of the visits were to assess the care and services provided and where any improvements could be made. The visits included talking to people using the service, staff members and generally observing the environment for any maintenance issues that needed attending to. We looked at two reports, both of which highlighted areas of improvement. One area was highlighted by people themselves where they said they felt the need for more staff to begin their shift at 7am as this was a busy period. We saw documentation to show that the suggestion had been discussed and resulted in an increase in staff during the mornings. The outcome documented said that the increased

numbers of staff had worked well.

Further systems were in place to monitor and assess the quality of the service. The findings were acted upon and documented appropriately to improve outcomes for people using the service. They included monthly medication audits, spot checks and care plan audits. Findings from the audits were discussed in staff meetings. We saw minutes of a staff meeting held in July which documented that a recent medication audit found that people's medication administration records had not always been signed appropriately. Also a night spot check ascertained that the night staff's work was of a lesser quality than was expected of them. These were discussed with the staff team during the staff meeting and also in supervision sessions to address the issues and improve outcomes for people living in the home.

The provider was pro active in monitoring and assessing the quality of the service provided and acted upon any shortfalls found.

Our judgement

The provider had an effective system to regularly assess and monitor the quality of the service that people receive.

The provider was meeting this standard.

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

Document purpose	Review of compliance report
Author	Care Quality Commission
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