

Review of compliance

Romney Cottage Residential Care Home Romney Cottage Residential Care Home	
Region:	South East
Location address:	Madeira Road Littlestone New Romney Kent TN28 8QX
Type of service:	Care home service without nursing
Date of Publication:	August 2012
Overview of the service:	Romney Cottage is registered to provide care and accommodation for up to 22 people. It is a large detached home, in a quiet residential area of the seaside village of Littlestone, New Romney.

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

Our current overall judgement

Romney Cottage Residential Care 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 to check whether Romney Cottage Residential Care Home had taken action in relation to:

Outcome 05 - Meeting nutritional needs

Outcome 08 - Cleanliness and infection control

Outcome 10 - Safety and suitability of premises

Outcome 13 - Staffing

Outcome 16 - Assessing and monitoring the quality of service provision

How we carried out this review

We reviewed all the information we hold about this provider, carried out a visit on 6 August 2012, talked to staff and talked to people who use services.

What people told us

We spoke with five people who were using the service. Some people living there were not able to talk to us directly about their experiences due to their complex needs, which included dementia, so we used a number of different methods to help us understand their experiences. We spoke with staff, spoke with a relative visiting the home, read records, looked round the home and made observations of the care and support they received.

People we spoke with told us they liked living at Romney Cottage and were involved in making decisions about their care and support. They said they were given choices about their daily routines such as when to get up and go to bed, what to eat and what to do each day.

They said they liked their rooms, a person who shared a bedroom said they were happy with this arrangement and had always shared with the same person. People said staff kept their rooms clean and tidy.

People told us they liked the meals and there was enough variety and choice of food on offer.

What we found about the standards we reviewed and how well Romney Cottage Residential Care Home was meeting them

Outcome 05: Food and drink should meet people's individual dietary needs

People were protected from the risks of inadequate nutrition and dehydration.

The provider was meeting this standard.

Outcome 08: People should be cared for in a clean environment and protected from the risk of infection

People were care for in a clean hygienic environment.

The provider was meeting this standard.

Outcome 10: People should be cared for in safe and accessible surroundings that support their health and welfare

People who use the service, staff and visitors were protected against the risks of unsafe or unsuitable premises.

The provider was meeting this standard.

Outcome 13: There should be enough members of staff to keep people safe and meet their health and welfare needs

There were enough qualified, skilled and experienced staff to meet people's needs.

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 service that people received.

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 05: Meeting nutritional needs

What the outcome says

This is what people who use services should expect.

People who use services:

* Are supported to have adequate nutrition and hydration.

What we found

Our judgement

The provider is compliant with Outcome 05: Meeting nutritional needs

Our findings

What people who use the service experienced and told us

People told us they liked the food at the home and there was always choice of what to eat. If they did not like what was on the menu they could ask for something else.

A relative said they thought that there was more variety of food available than there used to be.

Other evidence

When we last inspected the home in May 2012 we found that whilst people who could be at risk of not eating or drinking had gained weight, the home was not consistently recording their food and fluid intake. This meant that staff could not effectively monitor if people were adequately nourished and hydrated. We also found that the home was mainly providing meals that did not include fresh fruit and vegetables.

The provider wrote to us on 29 May 2012 and told us that the home was providing people with a well balanced diet. Immediate action would be taken to make sure the amount people ate and drank would be properly recorded and more fresh fruit and vegetables would be purchased.

During this inspection we found that the home had improved its systems for recording how much people ate and drank. Staff were recording the meals and drinks that people had each day and the forms used to record food and fluid intake had been combined to make them easier to complete. We looked at some examples of completed forms and saw that they were consistently being filled in in detail. They showed what meals people had eaten each day and the quantity and if they had had a whole cup or glass of liquid,

or a smaller amount.

The manager said that at the time we visited no one was at risk of not eating or drinking enough. One person sometimes preferred not to eat at mealtimes or to have a full meal, so they were provided with meals and snacks of their choice at other times. We saw that this was recorded on their care plan and their food intake was recorded.

The home had increased its use of fresh fruit and vegetables. We saw that the larder was well stocked with both and the menu now included fresh as well as frozen vegetables.

The daily menu was written up on white boards in both of the home's dining rooms. The manager told us they made sure staff kept it up to date and correct as people could become agitated if the food they were given was not what they were expecting from the menu.

Our judgement

People were protected from the risks of inadequate nutrition and dehydration.

The provider was meeting this standard.

Outcome 08: 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 08: Cleanliness and infection control

Our findings

What people who use the service experienced and told us

People told us that their rooms were kept clean and tidy and that staff did their laundry for them regularly.

Other evidence

When we last inspected the home in May 2012 we found that the home's systems for reducing the risk and spread of infection were not always being correctly followed.

The provider wrote to us on 29th May 2012 and told us that they had taken immediate action to make sure that the systems in place to reduce the risk and spread of infection in the home were being effectively followed.

On this inspection we found that there had been improvements in the systems for making sure the home was consistently clean and hygienic. We looked round the home and saw that items such as an unclean mattress and stained shower mats had been replaced, mattress covers had been purchased and old and unsuitable commodes had been disposed of.

The arrangements for people's laundry had been reviewed so that dirty and soiled washing was removed from bedrooms more quickly and placed in special bags for washing. The manager said that the amount of red bags the home ordered had been increased to make sure there were enough for all soiled laundry.

We saw that a new environmental audit being used included checks on cleanliness and hygiene.

Our judgement

People were care for in a clean hygienic environment.

The provider was meeting this standard.

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

People told us they liked their bedrooms and that they thought the home was kept clean. They were pleased with the new carpets.

Other evidence

When we last inspected the home in May 2012 we found that some areas of the home were not being adequately maintained or were not pleasant for people to use.

The provider wrote to us on 29th May 2012 and told us about improvements planned to the home. They gave a timescale of 30th June 2012 for improving the front garden area, 31st August 2012 for replacing lounge carpets and 30th September 2012 for replacing some of the furniture.

On this visit we saw that the carpets in both lounges had been replaced ahead of schedule and there was new flooring in one of the dining areas and on the stairs, landing and entrance area. Other flooring in communal areas was scheduled to be replaced and we saw timescales for this. One person said the new carpet was "A lot better, the colour is nice" and the home looked brighter.

Staff commented that " It's better than before" and "The home looks cleaner".

We saw evidence that some new furniture was on order and the manager said it was planned that the lounges would have new curtains.

The provider should note that there were still two buckets containing a large amount of

soggy cigarette ends by the smoking area outside one of the dining rooms that we were told should have been regularly emptied by staff, this was unsightly and odorous for people using the area.

New plants had been planted into flower beds in the driveway area and the back garden lawn was being regularly mowed. The back garden overall looked tidier and the manager said that more work on it was planned to improve the bare areas.

Our judgement

People who use the service, staff and visitors were protected against the risks of unsafe or unsuitable premises.

The provider was meeting this standard.

Outcome 13: Staffing

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 sufficient numbers of appropriate staff.

What we found

Our judgement

The provider is compliant with Outcome 13: Staffing

Our findings

What people who use the service experienced and told us

People told us they liked the staff who supported them and they thought there were enough staff at the home to make sure they received the support they needed.

Other evidence

When we last inspected the home in May 2012 we found that there were not always enough staff on duty to meet people's needs and there was no up to date analysis of the number of staff needed to meet them.

The provider wrote to us on 29 May 2012 and told us that a written analysis of people's needs would be undertaken by 15th June 2012.

On this visit we found that the manager had completed an analysis of people's needs and the number of staff needed to meet them. The home was not full, at the time of our inspection there were 17 people living there. One person had recently moved on to independent living having been supported by staff and other agencies to be able to move to a more independent lifestyle. The manager said that if the number of people increased or if dependency levels changed the amount of staff needed would be reviewed.

We looked at the staff rota and saw that two careworkers were on duty in the mornings, on weekdays the manager assisted them if necessary. Three careworkers were on duty after lunch. This allowed for meal preparation and activities.

Most people were independent with their personal care others needed some assistance or prompting. Overall we saw that there were enough staff on duty to meet people's needs. Additional staffing hours had been reinstated during the mornings at weekends to assist with domestic tasks and providing activities. These additional hours had previously been in place but had stopped earlier in the year due to lack of staff availability.

Staff said they liked working at the home and that they were able to support people with tasks such as personal care, medicines and meals without feeling rushed or stretched. The provider should note that staff commented that whilst they did provide people with some activities, it was not always possible to offer as many as they would like as there was not always time for this especially in the mornings.

Our judgement

There were enough qualified, skilled and experienced staff to meet people's needs.

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 that they had opportunities to offer their views on the service and that residents meetings were held.

Other evidence

When we last inspected the home in May 2012 we found that the systems in place for assessing and monitoring the service did not always effectively identify where improvements were needed.

The provider wrote to us on 29 May 2012 and told us that there would be more regular environmental auditing of the home and that they would be reviewing the findings of audits. This would be in place by 31 May 2012.

We saw that a new environmental auditing form had been introduced that was completed by the housekeeper and manager. The first full environmental audit had been completed in June 2012 and the manager had informed the provider of the findings. The audit identified where repairs, cleaning or new furnishings were needed. The manager informed the provider of findings and said that the need for some new furnishings was being addressed.

Our judgement

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

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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Care Quality Commission

Website	www.cqc.org.uk
Telephone	03000 616161
Email address	enquiries@cqc.org.uk
Postal address	Care Quality Commission Citygate Gallowgate Newcastle upon Tyne NE1 4PA