

Review of compliance

Dimensions (NSO) Limited
Dimensions - 1 Middlefield Close

Region:	South East
Location address:	1 Middlefield Close Farnham Surrey GU9 8RS
Type of service:	Care home service without nursing
Date of Publication:	September 2011
Overview of the service:	1 Middlefield Close is a registered care home run by Dimensions (NSO) Ltd. It provides accommodation and care for five people with learning and physical disabilities.

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

Our current overall judgement

Dimensions - 1 Middlefield Close 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 to check whether Dimensions - 1 Middlefield Close had made improvements in relation to:

Outcome 01 - Respecting and involving people who use services
Outcome 02 - Consent to care and treatment
Outcome 04 - Care and welfare of people who use services
Outcome 05 - Meeting nutritional needs
Outcome 07 - Safeguarding people who use services from abuse
Outcome 08 - Cleanliness and infection control
Outcome 09 - Management of medicines
Outcome 11 - Safety, availability and suitability of equipment
Outcome 13 - Staffing
Outcome 16 - Assessing and monitoring the quality of service provision
Outcome 17 - Complaints
Outcome 21 - Records
Outcome 24 - Requirements relating to registered managers

How we carried out this review

We reviewed all the information we hold about this provider, carried out a visit on 22 August 2011, talked to staff and talked to people who use services.

What people told us

Due to people's special communication needs it was difficult to ask all of the people directly about their views of Middlefield Close. We spent some time with people and observed how they were and all the people that we saw appeared calm and relaxed. People were enjoying staff company and two people told us that they liked their meal at lunch time.

What we found about the standards we reviewed and how well Dimensions - 1 Middlefield Close 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

There had been significant improvements in the way the service promoted people's choices about their lifestyle preferences and their rights to be supported with dignity and respect was more fully promoted.

Overall we found that 1 Middlefield Close was meeting this essential standard.

Outcome 02: Before people are given any examination, care, treatment or support, they should be asked if they agree to it

Staff had received training regarding understanding of the Mental Capacity Act and the service had the procedures in place to promote people's rights.

Overall we found that 1 Middlefield Close was meeting this essential standard.

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

The management of people's support plans, risk assessments and other specific documentation to promote and monitor their care and welfare were more robustly managed to reflect that people using the service received consistent and effective support to meet their needs.

Overall we found that 1 Middlefield Close was meeting this essential standard.

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

Improvements had been made to make sure that people's meals were served in a manner which takes into account their feelings and experiences regarding their mealtimes.

Overall we found that 1 Middlefield Close was meeting this essential standard.

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

People's rights to be protected from abuse, or the risk of abuse, are upheld as staff had received training and there is a raised awareness at the service of people's rights to safety and protection.

Overall we found that 1 Middlefield Close was meeting this essential standard.

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

Significant improvements had been made as systems had been put in place to make sure that the cleanliness and control of infection in the service was monitored and maintained.

Overall we found that 1 Middlefield Close was meeting this essential standard.

Outcome 09: People should be given the medicines they need when they need them, and in a safe way

Improvements have been made to make sure that the control of people's medicines is well managed and that people are protected against risks associated with their medicines.

Overall we found that 1 Middlefield Close was meeting this essential standard.

Outcome 11: People should be safe from harm from unsafe or unsuitable equipment

Improvements have been made to make sure that records are kept to confirm that regular servicing of equipment and the repairs of furnishings and fittings have been undertaken so that people using the service are protected from harm.

Overall we found that 1 Middlefield Close was meeting this essential standard.

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

Improvements have been made in the management of the service which has supported staff to work in an organised way to offer continuity of care to ensure the health, safety and welfare of people using the service.

Overall we found that 1 Middlefield Close was meeting this essential 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

Improvements have been made to make sure that people's health and welfare is monitored more fully due to the improved management of documentation related to accidents and incidents.

Overall we found that 1 Middlefield Close was meeting this essential standard.

Outcome 17: People should have their complaints listened to and acted on properly

People using the service and their relatives can be confident that their concerns and complaints would be listened to and dealt with promptly at service level.

Overall we found that 1 Middlefield Close was meeting this essential standard.

Outcome 21: People's personal records, including medical records, should be accurate and kept safe and confidential

The management and storage of people's records had significantly improved to demonstrate that people's personal details were being effectively managed.

Overall we found that 1 Middlefield Close was meeting this essential standard.

Outcome 24: Services must be managed by people who are honest, reliable and

trustworthy. They must also have the right skills, experience and qualifications to do the job

An application must be made to the CQC for a person to apply to be registered for the regulated activities of accommodation for persons who require nursing or personal care and treatment of disease, disorder or injury.

Overall, therefore, we found that there are areas of non compliance with this outcome.

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. Any regulatory decision that CQC takes 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

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 did not, on this occasion, speak directly to people so cannot report what the people using the service said.

Other evidence

At the last visit on the 23rd May 2011 we set a Compliance Action as we saw that people's lifestyles, involvement in the service and choices were sometimes compromised and people were not consistently supported in a way that reflected their rights to dignity and respect.

During this visit we saw that there had been a significant improvement in the way people were being supported.

We saw that people were relaxed, happy and involved in activities both in and outside of the service.

Some of the staff we spoke to told us that the service was more organised. We were told that the service has got four staff that can drive the adapted vehicle and this has had a positive impact for people as they can access their community and get out and about more.

During our visit we saw two people going out and one person returning home from a weekend stay with their relatives.

We asked about the one person's wheelchair as during our last visit we were informed that the person's wheelchair was too heavy for some female staff to push which limited the person's activities away from home. The manager confirmed that the person was receiving regular activities, including visiting relatives and that currently an occupational and physiotherapy referral was underway for the person to have a power assisted wheelchair.

The manager told us that she had been addressing some other concerns which included seeking support and advice from the occupational and physiotherapist regarding the use of the wheelchair or other equipment in the toilet to support someone to become more independent. The manager also confirmed that most of the people in the service had been using spoons to eat their meals and staff were now supporting people to use knives and forks if they were able.

During our last visit we saw that one person was distressed and unhappy throughout the day. The staff interaction with the person using the service was in response to the person shouting, being upset or engaging in self harming behaviour. We were told that the person did not like noise and that staff tried to create a quiet atmosphere within the home yet this posed difficulties for them as other people using the service liked to listen to music, talk to each other, have fun and feel relaxed in their home yet compromises were having to be made which had an impact on all of the people using the service.

We were told during this visit that the person's health had greatly improved and that they were more settled as their care and support plans had been reviewed. We saw that the person was supported to have meals separately from other people and staff were working to very clear guidelines and understood the importance of structure and routine for the person. We saw a staff member supporting the person out for a drive and returning home having had a nice time. We were told that arrangements were underway for the person to have their own service where they would have their own staff and be able to have their lifestyle preferences promoted.

We saw that people had choice about what food they wanted to eat and there was an easy read menu comprising of colourful pictures that people could use to tell staff what they would like to eat. We saw two people in the kitchen with staff helping to prepare the midday meal and the interactions between people using the service and staff were relaxed and engaging.

During this visit we observed staff engaging with people using the service in a way that was dignified and respectful.

Our judgement

There had been significant improvements in the way the service promoted people's choices about their lifestyle preferences and their rights to be supported with dignity and respect was more fully promoted.

Overall we found that 1 Middlefield Close was meeting this essential standard.

Outcome 02: Consent to care and treatment

What the outcome says

This is what people who use services should expect.

People who use services:

- * Where they are able, give valid consent to the examination, care, treatment and support they receive.
- * Understand and know how to change any decisions about examination, care, treatment and support that has been previously agreed.
- * Can be confident that their human rights are respected and taken into account.

What we found

Our judgement

The provider is compliant with Outcome 02: Consent to care and treatment

Our findings

What people who use the service experienced and told us

We did not, on this occasion, speak directly to people so cannot report what the people using the service said.

Other evidence

At the last visit on the 23rd May 2011 we set a Compliance Action as we were unable to find evidence to support that the service had procedures to obtain or review consent and act upon any changes identified.

During this visit we looked at the training records and it was confirmed by the qualifications and Training Administrator that staff had undertaken Mental Capacity training.

The manager told us that she was confident in her knowledge of people's rights regarding the Mental Capacity Act and the Deprivation of Liberty Safeguards and what to do if it were proven that someone lacked capacity.

We saw that people were given choices and asked about what they wanted. Some documentation that we saw evidenced that people's decisions and choices were taken into account by staff.

Our judgement

Staff had received training regarding understanding of the Mental Capacity Act and the service had the procedures in place to promote people's rights.

Overall we found that 1 Middlefield Close was meeting this essential 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

Due to people's special communication needs it was difficult to ask all of the people directly about their views of Middlefield Close however we saw that people were relaxed and appeared happy.

Two people's relatives told us that they felt happy about how the service was being run and felt assured that their loved ones needs were being met.

Other evidence

At the last visit on the 23rd May 2011 we set a Compliance Action as people's support plans, risk assessments and other specific documentation to promote and monitor their care and welfare were poorly managed and did not reflect that all people using the service received consistent and effective support to meet their needs.

During discussion with the manager it was clear that they had the competence and experience to work with the people living at Middlefield Close and she confirmed that she continued to act as a mentor for staff to assist their personal development in supporting people using the service.

We looked at one persons care plan and their associated documents. We saw that the documents were filed in order and were more manageable. We saw that the care and support plans had been updated to reflect the current care and support needs of the person.

The records had been signed by the person's identified key worker and saw that staff were supporting the person in keeping with the agreed working guide lines to help the person feel safe and secure in their structured routine.

We saw that records contained positive interactions with the person using the service and additional records also confirmed that the Dimensions (NSO) Ltd Behaviour Analyst Expert had spent time with staff supporting them to have a deeper understanding and awareness of the specific needs and relevant documentation to support the person using the service.

The manager told us that Dimensions (NSO) Ltd were due to release new care plans in the coming months. We were told that staff would receive specific training in person centred care planning and were also booked to receive risk assessment and nutrition training on the 23rd August 2011.

Our judgement

The management of people's support plans, risk assessments and other specific documentation to promote and monitor their care and welfare were more robustly managed to reflect that people using the service received consistent and effective support to meet their needs.

Overall we found that 1 Middlefield Close was meeting this essential standard.

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

During the lunch time people said that they liked their meals.

Other evidence

At the last visit on the 23rd May 2011 we set an Improvement Action as we observed that people's meals were not served in a manner which took into account their feelings and experiences regarding and during their mealtimes.

We observed that some people in the kitchen were assisting staff to make their drinks or meals. We saw that staff spent time with people and made sure that their meals were well presented and confirmed with people that they were enjoying their meal.

There was engagement between staff and people using the service during the mealtime which was observed as a relaxed and pleasant experience for people using the service.

We spoke with a staff member about the routine of one person using the service regarding their meal time arrangements and confirmed that the arrangements were in accordance to their agreed working guidelines.

We saw that food in the fridge had been stored in keeping with health and safety standards and saw that training records confirmed that all staff (except one who's training was booked) had received basic food hygiene training.

It was confirmed that an Environmental health inspection had been recently undertaken

at the service and no recommendations had been made.

Our judgement

Improvements had been made to make sure that people's meals were served in a manner which takes into account their feelings and experiences regarding their mealtimes.

Overall we found that 1 Middlefield Close was meeting this essential 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

We did not, on this occasion, speak to people so cannot report what the people using the service said.

Other evidence

At the last visit on the 23rd May 2011 we set an Improvement Action as people's rights to safety and protection were not consistently promoted.

The manager demonstrated her knowledge of safeguarding procedures during the site visit and we were assured that she was clear about the reporting procedures in order to safeguard people using the service.

We looked at the staff training matrix and saw that there had been improvements as all staff working at Middlefield Close had received safeguarding vulnerable adults training.

Our judgement

People's rights to be protected from abuse, or the risk of abuse, are upheld as staff had received training and there is a raised awareness at the service of people's rights to safety and protection.

Overall we found that 1 Middlefield Close was meeting this essential 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

We did not, on this occasion, speak to people so cannot report what the people using the service said.

Other evidence

At the last visit on the 23rd May 2011 we set a Compliance Action as people were not fully protected against risk of infections as the maintenance of good standards of cleanliness and hygiene in the service were not consistently promoted.

During our visit we saw that the service had made significant improvements in the general standards of hygiene and cleanliness.

We saw that the bathrooms and toilets, people's rooms and the communal areas were all clean and the home smelt fresh and clean.

We saw that the manager had developed cleaning schedules which were well documented by staff and that systems had also been put in place to monitor the control of infection in the home.

We looked at the staff training matrix which confirmed that all staff had received infection control training and a senior member of staff had been appointed as the lead person for the monitoring of infection control in the home.

Our judgement

Significant improvements had been made as systems had been put in place to make sure that the cleanliness and control of infection in the service was monitored and

maintained.

Overall we found that 1 Middlefield Close was meeting this essential standard.

Outcome 09: Management of medicines

What the outcome says

This is what people who use services should expect.

People who use services:

- * Will have their medicines at the times they need them, and in a safe way.
- * Wherever possible will have information about the medicine being prescribed made available to them or others acting on their behalf.

What we found

Our judgement

The provider is compliant with Outcome 09: Management of medicines

Our findings

What people who use the service experienced and told us

We did not, on this occasion, speak to people so cannot report what the people using the service said.

Other evidence

At the last visit on the 23rd May 2011 we set a Compliance Action as the staffing arrangements and control of people's medicines was not well managed and did not fully protect people against risks associated with their medicines.

The manager told us that since our last visit the service had changed the pharmacy supplier of the medicines to the home. This had resulted in medicines being delivered to the service during the week which was more robust regarding the stock taking, storage and the ability of staff to deal with any discrepancies promptly.

We were told by the manager that four named staff had been assessed as competent in receiving and checking new monthly medication supplies received into the service and the number of staff assessed for competency would be further monitored.

Whilst looking at some records we saw that one person using the service had not received their medicines on one occasion. The service had acted promptly in gaining medical advice and the person's care manager had been informed. The manager was however reminded that omissions of medicines should be reported to the CQC under Outcome 20 (5) (b) (iv) and also the local authority safeguarding team.

The training matrix that we saw during our visit confirmed that all staff currently working at the service had received medication training.

Due to the timings of our visit we did not observe people receiving their medicines yet will do so when next visiting the service. The manager confirmed that there was no use of covert medicines in the service and all people using the service were compliant in taking their medicines.

Our judgement

Improvements have been made to make sure that the control of people's medicines is well managed and that people are protected against risks associated with their medicines.

Overall we found that 1 Middlefield Close was meeting this essential standard.

Outcome 11: Safety, availability and suitability of equipment

What the outcome says

This is what people should expect.

People who use services and people who work in or visit the premises:

- * Are not at risk of harm from unsafe or unsuitable equipment (medical and non-medical equipment, furnishings or fittings).
- * Benefit from equipment that is comfortable and meets their needs.

What we found

Our judgement

The provider is compliant with Outcome 11: Safety, availability and suitability of equipment

Our findings

What people who use the service experienced and told us

We did not, on this occasion, speak to people so cannot report what the people using the service said.

Other evidence

At the last visit on the 23rd May 2011 we set a Compliance Action as we saw that one person's room door handle was loose and the screws protruding. We saw that several of the kitchen drawers and cupboards were broken and ill fitting and staff told us that they had been broken for some while.

During this visit we saw that all broken fixtures and fittings had been repaired or renewed.

We saw records to confirm that regular servicing of the equipment in the home, for example wheelchairs and hoists were undertaken to make sure people using the service and staff using equipment were safe.

Our judgement

Improvements have been made to make sure that records are kept to confirm that regular servicing of equipment and the repairs of furnishings and fittings have been undertaken so that people using the service are protected from harm.

Overall we found that 1 Middlefield Close was meeting this essential 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

We did not, on this occasion, speak to people so cannot report what the people using the service said.

Other evidence

At the last visit on the 23rd May 2011 we set a Compliance Action as some staff told us that they felt stressed at times as they felt there were not enough of them to meet the needs of people using the service. We evidenced that there was a lack of organisation, staff skills and experience within the staff team to consistently fully meet the health, safety and welfare of all people using the service.

We spoke with some staff on duty during our visit and they told us that they felt a lot better and were receiving more training and felt valued by the new manager.

We saw that the manager had developed a new shift planner and also a handover book which staff complete. The manager said that she monitors that documents to make sure people using the service are receiving their care and support needs and also to monitor that staff understand what is expected of them and to offer guidance and support if any shortfalls are identified.

We saw that the manager had developed new personal diaries for each of the people using the service and these included a wide range of topics including social, medical and health care appointments. The manager confirmed that the diaries are reviewed regularly to make sure that people are receiving the care and support they require.

The manager confirmed that she had received autism training and would be cascading the training to the staff.

It was confirmed that several new staff have been recruited or are in the throes of being recruited to the service. The vacancies of one night staff and two day staff shifts, we were told, were being filled by Dimensions staff from other services which offered continuity and a decrease in the use of agency staff which benefited the service generally.

The manager confirmed that the majority of staff were able to access the computer files which were held centrally and for those who did not currently have access they were supported by their team members to gain access in order to update people's files.

Our judgement

Improvements have been made in the management of the service which has supported staff to work in an organised way to offer continuity of care to ensure the health, safety and welfare of people using the service.

Overall we found that 1 Middlefield Close was meeting this essential 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

We did not, on this occasion, speak to people so cannot report what the people using the service said.

Other evidence

At the last visit on the 23rd May 2011 we set a Compliance Action as we were not assured by the evidence gathered during the site visit and speaking with people's relatives and staff that the service was being effectively managed due to the lack of decisive action taken to address shortfalls in the service to fully promote the health and welfare of people using the service.

During this visit we spoke with two people's relatives who said they were very happy about how the service was being managed and how things had improved over recent months.

We observed interactions between the manager and people's relative and staff and were assured that the manager took into account opinions and views, concerns and compliments in a professional and decisive manner.

We sampled some accident and incident forms for a specific person using the service and noted that the management of the records had significantly improved and were well documented.

It was confirmed that the service continued to be closely monitored by other

Dimensions manager's in order to monitor the quality and compliance of the service to expected standards and develop solutions to address any shortfalls that were identified.

Our judgement

Improvements have been made to make sure that people's health and welfare is monitored more fully due to the improved management of documentation related to accidents and incidents.

Overall we found that 1 Middlefield Close was meeting this essential standard.

Outcome 17: Complaints

What the outcome says

This is what people should expect.

People who use services or others acting on their behalf:

- * Are sure that their comments and complaints are listened to and acted on effectively.
- * Know that they will not be discriminated against for making a complaint.

What we found

Our judgement

The provider is compliant with Outcome 17: Complaints

Our findings

What people who use the service experienced and told us

We did not, on this occasion, speak to people so cannot report what the people using the service said.

Other evidence

At the last visit on the 23rd May 2011 we set an Improvement Action as we evidenced that improvements needed to be made so that people could raise concerns at the service level which would be dealt with promptly.

We observed the manager engaging with people using the service and their relatives. We observed that she demonstrated openness in dealing with any concerns and was prompt to reassure people using the service and their relatives that matters would be addressed.

We saw that there were complaint procedures in the service some of which were available using words and pictures to support people to raise any comments or concerns they had about the service provided.

Our judgement

People using the service and their relatives can be confident that their concerns and complaints would be listened to and dealt with promptly at service level.

Overall we found that 1 Middlefield Close was meeting this essential standard.

Outcome 21: Records

What the outcome says

This is what people who use services should expect.

People who use services can be confident that:

* Their personal records including medical records are accurate, fit for purpose, held securely and remain confidential.

* Other records required to be kept to protect their safety and well being are maintained and held securely where required.

What we found

Our judgement

The provider is compliant with Outcome 21: Records

Our findings

What people who use the service experienced and told us

We did not, on this occasion, speak to people so cannot report what the people using the service said.

Other evidence

At the last visit on the 23rd May 2011 we set a Compliance Action as people's personal records were not accurate, were poorly managed and not held securely to reflect peoples rights to confidentiality of their information.

During this visit we saw that the management of records had significantly improved. The office was more orderly and the manager and staff were able to locate records promptly when asked.

We saw that ongoing improvements regarding updating peoples records was well planned and people's rights to confidentiality of their information was being promoted.

Our judgement

The management and storage of people's records had significantly improved to demonstrate that peoples personal details were being effectively managed.

Overall we found that 1 Middlefield Close was meeting this essential standard.

Outcome 24: Requirements relating to registered managers

What the outcome says

This is what people who use services should expect.

People who use services:

* Have their needs met because it is managed by an appropriate person.

What we found

Our judgement

There are minor concerns with Outcome 24: Requirements relating to registered managers

Our findings

What people who use the service experienced and told us

We did not, on this occasion, speak to people so cannot report what the people using the service said.

Other evidence

Following the last visit on the 23rd May 2011 we were informed that the registered manager had resigned. We set a Compliance Action that the commission receive an application by a person with the necessary qualifications, experience and skills to manage the service.

The current manager who has been in post two months told us that she is the registered manager for two other Dimensions (NSO) services and would be applying to register with the Commission for the manager post at Middlefield Close.

Our judgement

An application must be made to the CQC for a person to apply to be registered for the regulated activities of accommodation for persons who require nursing or personal care and treatment of disease, disorder or injury.

Overall, therefore, we found that there are areas of non compliance with this outcome.

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 6 HSCA 2008 (Regulated Activities) Regulations 2010	Outcome 24: Requirements relating to registered managers
	<p>How the regulation is not being met: An application must be received by the commission for a person to apply to be registered for the regulated activities of accommodation for persons who require nursing or personal care and treatment of disease, disorder or injury.</p>	

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 this report being received.

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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