

# Review of compliance

## Royal Bay Care Homes Limited Claremont Lodge Care Home

<b>Region:</b>	South East
<b>Location address:</b>	Fontwell Avenue, Fontwell Eastergate Chichester West Sussex PO20 3RY
<b>Type of service:</b>	Care home service with nursing
<b>Date of Publication:</b>	January 2012
<b>Overview of the service:</b>	Claremont Lodge is registered to provide accomodation for people requiring personal or nursing care.  It is a purpose built fully accessible building.

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

## Our current overall judgement

**Claremont Lodge Care Home was meeting all the essential standards of quality and safety.**

The summary below describes why we carried out this review, what we found and any action required.

### Why we carried out this review

We carried out this review as part of our routine schedule of planned reviews.

### How we carried out this review

We reviewed all the information we hold about this provider, carried out a visit on 6 December 2011, observed how people were being cared for, talked to staff, reviewed information from stakeholders and talked to people who use services.

### What people told us

We spoke with people living in the home, with relatives and with West Sussex county council. People told that they are very happy with the care in the home, that the staff are very kind and polite and that they are mostly happy with the food. One person told us "This is a very nice place to live and we do have choice", another told us "Staff come quickly when I ring"

One person told us that menu can be a bit repetitive and another told us that "they do their best but it's not like home cooking"

All expressed satisfaction with the activities and we were told the "activities coordinator is lovely and works hard"

We also spoke with two health professionals who told us that the home was well organised, that they were called in appropriately and that people were very well cared for.

### What we found about the standards we reviewed and how well Claremont Lodge Care 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 were consulted on life in the home and were happy with the service. They told us care was offered as they wish.

On the basis of the evidence provided and the views of people using the service we found Claremont Lodge to be compliant with this outcome.

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

People were consulted on their care needs and care is offered as they wish. Other professionals are consulted as needed.

People were treated with respect and dignity.

On the basis of the evidence provided and the views of people using the service we found Claremont Lodge to be compliant with this outcome.

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

People were protected by the service's policies, procedures and practices in relation to safeguarding adults.

On the basis of the evidence provided and the views of people using the service we found Claremont Lodge to be compliant with this outcome.

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

People were safe and their needs were met by a competent and well trained staff team.

On the basis of the evidence provided and the views of people using the service we found Claremont Lodge to be compliant with this outcome

**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 has ensured that people who use the service were safe. The quality of care provision was monitored and improvements were made when concerns were raised

On the basis of the evidence provided and the views of people using the service we found Claremont Lodge to be compliant with this outcome.

**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 people and they told us that they were treated as individuals and were given information and choices in relation to their care.

People told us changes were made to activities and menus as requested although one person did tell us that a disliked vegetable was still being put on the plate.

We spoke to a visiting chiropodist who said the home was always organised when she visited and that she felt people were very well looked after here. She told us people's privacy was protected and she saw people in their own rooms

##### Other evidence

We were shown examples of person centred support plans, which have been developed for each individual. The plans document their wishes and preferences in relation to how their care is provided and how they like to spend their time.

People's opinions were sought, and they could participate in life in the home as they wished.

Equality and diversity was considered in the service by looking at each individual's

needs and supplying equipment as required. Two track hoists were installed recently to meet assessed need.

There was a variety of drinks available throughout the home and staff were heard offering people a choice.

**Our judgement**

People were consulted on life in the home and were happy with the service. They told us care was offered as they wish.

On the basis of the evidence provided and the views of people using the service we found Claremont Lodge to be compliant with this outcome.

## Outcome 04: Care and welfare of people who use services

### What the outcome says

This is what people who use services should expect.

People who use services:

\* Experience effective, safe and appropriate care, treatment and support that meets their needs and protects their rights.

### What we found

#### Our judgement

The provider is compliant with Outcome 04: Care and welfare of people who use services

#### Our findings

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

We spoke with people and they told us that they were very well looked after, according to their wishes. They told us that when they rang their call bells a staff member comes quickly. They told us that they enjoyed the activities in the home

##### Other evidence

We were shown examples of comprehensive person centred care records. These had been developed for each individual and documented their wishes and preferences in relation to how their care is provided.

We saw that people have had a pre admission assessment prior to moving into the home. Next of kin was recorded.

All needs in relation to personal care, mobility, continence and psychological, communication, nutrition and medication were assessed and recorded. Mental capacity was assessed.

Risk assessments were in place for moving and handling, nutrition, skin integrity and infection prevention.

There were daily records and monthly review. All general practitioner, hospital, optical and chiropody appointments were recorded. People had end of life care recorded and also their funeral wishes.

People's records had an emergency transfer information sheet in place for when they move from the home or are admitted to hospital.

A community nurse spoken with told us that they very rarely see skin tears in this home. We were told the home was very quick to call for advice and always accompany the community to the person requiring treatment and that they recorded instructions.

People's participation in activities was recorded. There were a variety of activities for people to participate in such as chair exercises, musicals, indoor bowling, various board games and painting competition, and shopping. There was a library and mobile shop. The local library regularly changed the books in the home. There was a list of upcoming Christmas activities such as school choir, pantomime, Christmas shopping and a Christmas lunch for people and their relatives.

We observed care being offered to people in a respectful manner. Staff knocked on doors before entering and ensured doors were closed when personal care was being provided

### **Our judgement**

People were consulted on their care needs and care is offered as they wish. Other professionals are consulted as needed.

People were treated with respect and dignity.

On the basis of the evidence provided and the views of people using the service we found Claremont Lodge to be compliant with this outcome.

## 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 spoke with people and they told us that they felt safe in the home and that staff are gentle when they offer care.

##### Other evidence

There were policies and procedures in place for safeguarding adults. There was also a policy on restraint.

Safeguarding training was covered in induction. We saw that there was ongoing training in safeguarding adults which staff confirmed they had attended.

Training records were seen in staff files.

All alerts were reported promptly with the local safeguarding team and were logged in the home.

We spoke with staff and they demonstrated a good understanding of safeguarding vulnerable people from abuse. They were knowledgeable about the procedure for reporting incidents when they suspected abuse had taken place.

##### Our judgement

People were protected by the service's policies, procedures and practices in relation to safeguarding adults.

On the basis of the evidence provided and the views of people using the service we found Claremont Lodge to be compliant with this outcome.

## Outcome 14: Supporting staff

### 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 staff

#### Our findings

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

We spoke with people and they told us the staff were very caring and helpful.

##### Other evidence

We looked at staff records and saw that identity documents, Criminal records Bureau (CRB) and Independent Safeguarding Authority (ISA) clearance and two references were in place.

We spoke with staff and they confirmed induction and ongoing training.

We saw that there was a training programme in place and staff training was up to date. The training programme covered first aid, fire, moving and handling, safeguarding adults, infection control, health and safety, equal opportunities, food hygiene, person centred care, medicines, risk assessment, death and bereavement and medicines. Staff also received training in conditions people in the home might have had such as stroke, diabetes, epilepsy, dementia and aggression awareness.

Staff supervision was in place and staff told us the management was approachable.

##### Our judgement

People were safe and their needs were met by a competent and well trained staff team.

On the basis of the evidence provided and the views of people using the service we found Claremont Lodge to be compliant with this outcome

## 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 people and they confirmed that they did get questionnaires. They told us they are consulted on menus and activities. Most people said they were happy with the meals but one person did say that a disliked vegetable was still being put on the plate. All people said they were happy with the activities.

##### Other evidence

We saw quality and monitoring systems were in place and people and their relatives were consulted on life in the home.

People and their relatives received questionnaires and the results were collated.

Residents meetings were held three times annually and one was planned for this month.

We saw evidence that people were consulted on menus and activities and most requests had been actioned.

Accidents have been logged, collated and analysed.

Staff meetings were held every two to three months and minutes were available.

All accidents and incidents were monitored.

#### Our judgement

The provider has ensured that people who use the service were safe. The quality of care provision was monitored and improvements were made when concerns were raised

On the basis of the evidence provided and the views of people using the service we found Claremont Lodge to be compliant with this outcome.

# 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

<b>Document purpose</b>	Review of compliance report
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