

Review of compliance

Sudera Care Associates Limited
Highbury Residential Care Home

Region:	East Midlands
Location address:	38 Mountsorrel Lane Sileby Loughborough Leicestershire LE12 7NF
Type of service:	Care home services without nursing
Date the review was completed:	June 2011
Overview of the service:	Highbury Residential Care Home provides accommodation and personal care for up to 27 older people who may have additional needs including dementia. The home is situated in the village of Sileby with access to local shops, cafes and other facilities. It can be reached by public & private transport and there is parking in the grounds.

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

What we found overall

We found that Highbury Residential Care Home was not meeting one or more essential standards. Improvements are needed.

The summary below describes why we carried out the 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 23 June 2011, observed how people were being cared for, talked to people who use services, talked to staff, checked the provider's records and looked at records of people who use services.

What people told us

People who use the service told us that they are happy with the care they receive. They stated that they are treated with dignity and respect. People reported that staff members are friendly and helpful. One person stated that 'the staff look after us well'.

People who use the service told us that they like taking part in activities such as dominoes, ball games and puzzles. One person reported that she had enjoyed outings to see films and attend tea dances in the past. She stated that she was looking forward to a boat trip the following week.

People who use the service told us that the food is satisfactory and that a choice is available. They stated that they are happy with the environment in which they live and reported that the home is kept clean and tidy.

People who use the service told us that there are enough staff on duty to meet their needs. One person commented that 'you only have to ask'. People stated that they would speak to senior staff or the manager if they were concerned about anything. They were confident that action would be taken to address any issues they raise.

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

Outcome 4: People should get safe and appropriate care that meets their needs and supports their rights

Overall, people who use the service receive care and support that meets their needs. The care provided to people who are at risk of pressure sores must be reviewed to ensure that they are fully protected.

Overall, we found that improvements are needed for this essential standard.

Outcome 5: Food and drink should meet people's individual dietary needs

People who use the service are supported to have adequate food and drink. The assistance provided to people who are at risk of choking must be reviewed to ensure that they are fully protected.

Overall, we found that improvements are needed for this essential standard.

Outcome 7: People should be protected from abuse and staff should respect their human rights

People who use the service are protected from the risk of abuse.

Overall, we found that Highbury Residential Care Home was meeting this essential standard.

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

People who use the service live in surroundings that promote their wellbeing. A ramp, which has recently been fitted to the rear of the building, does not appear to be fit for purpose. Some areas of the home are in need of redecoration.

Overall, we found that improvements are needed for this essential standard.

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

Whilst staff members have received training and supervision, there are gaps which have the potential to prevent people's needs from being met.

Overall, we found that improvements are needed for 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

Systems for assessing and monitoring the service provided need to be strengthened to ensure that the views of people who use the service, people who act on their behalf and other stakeholders are regularly sought and used to ensure that people receive quality care.

Overall, we found that improvements are needed for this essential standard.

Action we have asked the service to take

We have asked the provider to send us a report within 28 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.

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 4: 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

There are moderate concerns with outcome 4: Care and welfare of people who use services.

Our findings

What people who use the service experienced and told us
People who use the service told us that they are happy with the care they receive. They stated that they are treated with dignity and respect. People reported that staff members are friendly and helpful. One person stated that ‘the staff look after us well’.

People who use the service told us that they like taking part in activities such as dominoes, ball games and puzzles. One person reported that she had enjoyed outings to see films and attend tea dances in the past. She stated that she was looking forward to a boat trip the following week. People took part in a service and played dominoes on the day of our visit.

People who use the service told us that there are enough staff on duty to meet their needs. One person stated that ‘you only have to ask’. People stated that they would speak to senior staff or the manager if they were concerned about anything. They were confident that action would be taken to address any issues they raise.

Staff members attended to people’s needs and treated them with respect. Certificates displayed in the entrance hall indicate that a number of staff are dignity in care champions.

Other evidence

Individual care and support plans have been completed on a range of issues. The plans detail people's needs and set out the care to be provided by staff. Records indicate that the plans have been kept under review. Both of the people whose records were inspected had been assessed as being at high risk of developing pressure sores, although the assessment form for one person set out three different scores making it difficult to work out which was the most recent. Pressure relieving mattresses and cushions have been provided. Care plans stated that each person's position should be changed every two hours. We noted that both people were sat in the same position for at least three hours on the day of our visit. Charts relating to turns carried out by night staff were not available for the previous four days. The manager stated that none of the people who use the service had pressure sores at the time of our visit.

The home has introduced a summary and visit record which is completed by the GP and contains clear information about each person. The acting manager stated that she would amend a care plan on medication to reflect a change made by the GP the previous day. She will also ask district nurses to review risk assessments for the use of bed rails.

Our judgement

Overall, people who use the service receive care and support that meets their needs. The care provided to people who are at risk of pressure sores must be reviewed to ensure that they are fully protected.

Outcome 5: 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

There are moderate concerns with outcome 5: Meeting nutritional needs.

Our findings

What people who use the service experienced and told us
People who use the service told us that the food is satisfactory and that a choice is available. One person reported that she felt people were sat at tables for a long time before meals were served.

Staff members attended to people’s needs and treated them with respect. They sat with people who required assistance with eating and drinking.

Other evidence
One of the people whose records were inspected had been assessed as being at risk of choking. Guidance from the Speech and Language Therapy (SALT) Team indicated that the person should be sat upright when eating or drinking. We noted that staff gave food and drink to the person concerned whilst sat in a reclined position.

Our judgement
People who use the service are supported to have adequate food and drink. The assistance provided to people who are at risk of choking must be reviewed to ensure that they are fully protected.

Outcome 7: 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 7: Safeguarding people who use services from abuse.

Our findings

What people who use the service experienced and told us
People who use the service told us that they are treated with dignity and respect. They reported that they feel safe at the home.

Other evidence
Staff members have received training on safeguarding adults and the Deprivation of Liberty Safeguards (DoLS). Staff were aware of the action they should take if they suspect someone is being abused.

The acting manager stated that none of the people who were using the service at the time of our visit were subject to a DoLS authorisation. She reported that she had discussed potential applications with the DoLS team but that they were not felt to be necessary.

Our judgement
People who use the service are protected from the risk of abuse.

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

There are minor concerns with outcome 10: Safety and suitability of premises.

Our findings

What people who use the service experienced and told us
People who use the service told us that they are happy with the environment in which they live. They reported that the home is kept clean and tidy.

Other evidence
A ramp has been fitted to the rear of the building to enable people to directly access the garden. It appeared to be very steep. The acting manager stated that the builders had been asked to return to see if the gradient could be reduced. There is an alternative route to the garden around the side of the home. We noted that some areas of the home were in need of redecoration.

Our judgement
People who use the service live in surroundings that promote their wellbeing. A ramp, which has recently been fitted to the rear of the building, does not appear to be fit for purpose. Some areas of the home are in need of redecoration.

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

There are moderate concerns with outcome 14: Supporting workers.

Our findings

What people who use the service experienced and told us
We did not discuss this outcome with people who use the service.

Other evidence
Staff members have received training on issues such as dementia, dignity in care, nutrition, safeguarding adults and a range of safe working practices. One of the staff members whose records were inspected had completed moving and handling training in August 2007; the second, in March 2008. The acting manager stated that moving and handling training had been provided to most staff in March 2010. She reported that all staff would update this training in the near future.

One of the staff whose records were inspected had received supervision during October and November 2010 and April 2011; the second, during September 2010 and May 2011. Information submitted as part of this review indicates that the manager is aware of the need to hold more one to one staff supervision sessions and plans to allocate time to ensure that this happens.

Our judgement
Whilst staff members have received training and supervision, there are gaps which have the potential to prevent people’s needs from being met.

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

There are minor concerns 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 discuss this outcome with people who use the service.

Other evidence
The home completed a survey of the views of people who use the service during 2009. The acting manager stated that she intends to distribute a revised questionnaire to people in the near future. She reported that survey forms have been sent to relatives and made available to visitors to the home but very few have been returned. Records indicate that meetings are held with people who use the service and their relatives to discuss issues such as activities and menus. The staff members we spoke to knew how to raise any concerns.

Our judgement
Systems for assessing and monitoring the service provided need to be strengthened to ensure that the views of people who use the service, people who act on their behalf and other stakeholders are regularly sought and used to ensure that people receive quality care.

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	9	4: Care and welfare of people who use services
	How the regulation is not being met: The care provided to people who are at risk of pressure sores must be reviewed to ensure that they are fully protected.	
Accommodation for persons who require nursing or personal care	14	5: Meeting nutritional needs
	How the regulation is not being met: The assistance provided to people who are at risk of choking must be reviewed to ensure that they are fully protected.	
Accommodation for persons who require nursing or personal care	15	10: Safety and suitability of premises
	How the regulation is not being met: A ramp, which has recently been fitted to the rear of the building, does not appear to be fit for purpose. Some areas of the home are in need of redecoration.	
Accommodation for persons who require nursing or personal care	23	14: Supporting staff
	How the regulation is not being met: Whilst staff members have received training and supervision, there are gaps which have the potential to prevent people's needs from being met.	
Accommodation for persons who require nursing or personal care	10	16: Assessing and monitoring the quality of service provision

	<p>How the regulation is not being met: Systems for assessing and monitoring the service provided need to be strengthened to ensure that the views of people who use the service, people who act on their behalf and other stakeholders are regularly sought and used to ensure that people receive quality care.</p>
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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 28 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 Adult 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
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