

Review of compliance

Greenfield Care Homes Greenfield Care Home	
Region:	London
Location address:	385-387 London Road Mitcham Surrey CR4 4BF
Type of service:	Care home service without nursing
Date of Publication:	July 2012
Overview of the service:	Greenfield Care Home provides accommodation and care for up to nine people who have a learning disability. The home is a large detached property situated in a residential area of Mitcham. Bus and tram services are located nearby.

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

Our current overall judgement

Greenfield Care Home was not meeting one or more essential standards. Action is 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 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 21 May 2012, carried out a visit on 31 May 2012, observed how people were being cared for, talked to staff and talked to people who use services.

What people told us

One person who uses the service told us that the service was 'terrific' and said 'I love it here'. They told us that staff were 'wonderful'.

We saw that staff interacted positively with people who use the service and clearly had a good knowledge of individual needs.

A relative of one person told us that they were happy with the service and that they felt the individual was 'well treated'.

A new manager was in post and had commenced work at the home just prior to this unannounced visit.

What we found about the standards we reviewed and how well Greenfield 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

The provider was meeting this standard.

People using the service were being treated with dignity and respect and supported in promoting their independence and community involvement.

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

and supports their rights

The provider was meeting this standard.

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

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

The provider was meeting this standard.

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

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

The provider was meeting this standard.

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

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

The provider was not meeting this standard.

Appropriate arrangements were not fully in place to safely manage medicines.

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

The provider was meeting this standard.

There were effective recruitment and selection processes in place. People were cared for by sufficient numbers of staff who were being supported to deliver care and treatment safely and to an appropriate 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 was meeting this standard.

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

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. We will check to make sure that this action has

been taken.

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. When we propose to take enforcement action, our decision 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.

Where we judge that a provider is non-compliant with a standard, we make a judgement about whether the impact on people who use the service (or others) is minor, moderate or major:

A minor impact means that people who use the service experienced poor care that had an impact on their health, safety or welfare or there was a risk of this happening. The impact was not significant and the matter could be managed or resolved quickly.

A moderate impact means that people who use the service experienced poor care that had a significant effect on their health, safety or welfare or there was a risk of this happening. The matter may need to be resolved quickly.

A major impact means that people who use the service experienced poor care that had a serious current or long term impact on their health, safety and welfare, or there was a risk of this happening. The matter needs to be resolved quickly.

Where we identify compliance, no further action is taken. Where we have concerns, the most appropriate action is taken to ensure that the necessary changes are made.

More information about each of the outcomes can be found in the *Guidance about compliance: Essential standards of quality and safety*

Outcome 01: Respecting and involving people who use services

What the outcome says

This is what people who use services should expect.

People who use services:

- * Understand the care, treatment and support choices available to them.
- * Can express their views, so far as they are able to do so, and are involved in making decisions about their care, treatment and support.
- * Have their privacy, dignity and independence respected.
- * Have their views and experiences taken into account in the way the service is provided and delivered.

What we found

Our judgement

The provider is compliant with Outcome 01: Respecting and involving people who use services

Our findings

What people who use the service experienced and told us

One person who uses the service told us that they liked living at the home and were treated well by staff.

Staff we spoke to clearly knew the people who use the service well and were observed to offer choice to individuals about what they wanted to do, drink or eat. The staff we spoke to gave us examples of how some people communicated daily living choices about things like what they ate and what time they went to bed. The care plans seen for these individuals confirmed this information.

Other evidence

Comments from the staff members we spoke to included 'there is plenty of choice - the menus are flexible, they have something different if they don't fancy the meal' and 'the clients feel that this is their home'.

We looked at the care plans being kept for three people who use the service. Assessments had been completed around the needs of the individual including looking at their health, mobility and daily activities.

Risk assessments were in place and the manager told us that he was planning to

introduce improved documentation that linked to the care plans for each individual.

Our judgement

The provider was meeting this standard.

People using the service were being treated with dignity and respect and supported in promoting their independence and community involvement.

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

The majority of people who use the service were attending their day centre on the first day we visited. Two people were at home with one individual enjoying some one to one time with staff. The other person was escorted to see their doctor by a member of staff during our visit.

We saw staff interacting positively with people who use the service during both of our unannounced visits. Items such as bowls, puzzles and Lego building blocks were in use along with an electronic keyboard.

Daily notes looked at included references to people listening to music, participating in sing-along sessions, playing the keyboard and sitting out in the garden. One person who uses the service told us that they enjoyed going swimming on a regular basis.

A member of staff told us about taking people who use the service away for a holiday to Blackpool within the last year.

Other evidence

We looked at the care plans in place for three people and saw that these addressed individual needs around areas such as health, daily activities, mobility and safety. Annual reviews were taking place involving other professionals and each plan was being evaluated on a quarterly basis by the key worker.

Some good detail about each person's likes and dislikes was recorded along with

information about communication.

Staff members we spoke to felt that the quality of care provided was good with comments including 'they are cared for very well' and 'it's a good service'.

The provider may find it useful to note that the care plans we looked at mainly addressed ongoing needs and did not reflect any shorter term goals for individuals. Care plans could also be written in the first person.

Our judgement

The provider was meeting this standard.

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

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

One person told us that 'the staff cook me nice food'.

Staff members spoken to said that they ask people what they would like for their meals and are able to make changes to the planned menu to accommodate individual preferences.

Other evidence

A weekly planned menu was displayed in the dining area. We saw that information about individual dietary needs was kept in the kitchen area for some people who use the service along with guidance for staff around pureed food.

A care plan seen for one person included records of their food intake.

Our judgement

The provider was meeting this standard.

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

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 to people using the service but their feedback did not relate to this outcome.

Other evidence

We saw Safeguarding procedures were displayed for staff to follow along with information about whistle blowing. The manager had also obtained a copy of the Pan London Safeguarding procedures for reference purposes.

A member of staff spoken was able to tell us the procedure they would follow in the event of them having to make an alert.

We looked at the training records kept for two members of staff and these showed that they had attended training on Safeguarding Adults from Abuse. Induction training is to Skills for Care specification and includes a module around Safeguarding.

Staff files also showed that staff had been receiving regular supervision with their line manager.

Our judgement

The provider was meeting this standard.

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

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 non-compliant with Outcome 09: Management of medicines. We have judged that this has a minor impact on people who use the service.

Our findings

What people who use the service experienced and told us

We spoke to people using the service but their feedback did not relate to this outcome.

Other evidence

We saw that medication was kept securely in a locked trolley and this was stored in a locked area when not in use. The majority of medication items were seen to be supplied in blister form by the pharmacy and quantities were seen to be correct on the day we visited.

Appropriate arrangements were however not fully in place in relation to the administration and recording of medicine supplied to the home in their original containers. Three instances were found where the quantity of medication left in boxes did not correspond with the administration records. We also saw that box opening dates or quantities carried forward had not been recorded consistently.

Our judgement

The provider was not meeting this standard.

Appropriate arrangements were not fully in place to safely manage medicines.

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

One person who uses the service said that the staff were 'wonderful'.

Other evidence

Rotas showed that two members of staff are on duty for each shift and this included waking staff overnight. Staff members spoken to felt that this level was enough to meet people's needs.

We looked at the recruitment records for two members of staff and these included Criminal Records Bureau (CRB) checks, references and identity checks.

The staff we spoke to said that they had received training in areas such as moving and handling, medication, Safeguarding and infection control. Records looked at confirmed that mandatory training was updated as required and additional courses provided for staff around more specialist areas such as diabetes and epilepsy.

Staff files also showed that staff had been receiving regular supervision with their line manager.

Our judgement

The provider was meeting this standard.

There were effective recruitment and selection processes in place. People were cared for by sufficient numbers of staff who were being supported to deliver care and

treatment safely and to an appropriate 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 spoke to people using the service but their feedback did not relate to this outcome.

Other evidence

The provider carries out regular visits to monitor the quality of service and the manager told us that relatives of people who use the service visit individuals regularly which allows for ongoing informal contact.

We saw that care plans are evaluated on a quarterly basis and reviews take place annually. Minutes of one recent review included the views of a relative who reported that they were happy with the service being provided.

The provider may find it useful to note that an observational tool could be used as part of quality assurance processes to look critically at individual levels of engagement and wellbeing. This may help to ensure that all of the people using the service are receiving similar levels of engagement and occupation.

Systems in place for the administration of medication could be audited more regularly to ensure they are suitable

Our judgement

The provider was meeting this standard.

The provider had an effective system to regularly assess and monitor the quality of

service that people receive.

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 13 HSCA 2008 (Regulated Activities) Regulations 2010	Outcome 09: Management of medicines
	How the regulation is not being met: Appropriate arrangements were not fully in place to safely manage medicines.	

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 the date that the final review of compliance report is sent to them.

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.

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
Audience	The general public
Further copies from	03000 616161 / www.cqc.org.uk
Copyright	Copyright © (2010) Care Quality Commission (CQC). This publication may be reproduced in whole or in part, free of charge, in any format or medium provided that it is not used for commercial gain. This consent is subject to the material being reproduced accurately and on proviso that it is not used in a derogatory manner or misleading context. The material should be acknowledged as CQC copyright, with the title and date of publication of the document specified.

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