

Review of compliance

Westward Care Limited Headingley Hall Care Home	
Region:	Yorkshire & Humberside
Location address:	5 Shire Oak Road Headingley Leeds West Yorkshire LS6 2DD
Type of service:	Care home service without nursing
Date of Publication:	November 2012
Overview of the service:	Headingley Hall is one of Westward Care homes for older people. It is located in North Leeds. It is registered to provide care for a maximum of 57 people, including respite care. The home provides easy access to shops and amenities in Headingley and is only a short bus or car journey from Leeds town centre.

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

Our current overall judgement

Headingley Hall Care Home was meeting all the essential standards of quality and safety inspected.

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

Why we carried out this review

We carried out this review 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 14 August 2012, observed how people were being cared for, looked at records of people who use services, talked to staff and talked to people who use services.

What people told us

People told us what it was like to live at the home and described how they were treated by staff and their involvement in making choices about their care. They also told us about the quality and choice of food and drinks available. This was because this inspection was part of a themed inspection programme to assess whether older people living in care homes were treated with dignity and respect and whether their nutritional needs were being met.

The inspection team was led by a Care Quality Commission (CQC) inspector joined by a practising professional and an Expert by Experience, who had personal experience of using or caring for someone who used this type of service.

People were complimentary about the food and said they had more than enough to eat. They were able to make suggestions and request for future meals. If they didn't like what was on the menu they were able to ask for something else to be prepared. People we spoke with confirmed that the meals were warm enough when they were served.

People felt the staff respected their privacy and dignity although one person commented, "Some do some don't respect your dignity but by and large they are very nice." One person said, "Nothing but kindness and respect from the staff" and another person concluded, "Couldn't find anywhere nicer."

We spoke with a relative of someone who used the service. They said, "There seems enough staff about when I visit and they have the skills to look after the people here."

People we spoke with told us they felt safe living at Headingley Hall. They also told us that they had been provided with information on who to contact if they had any concerns or

wanted to make a complaint.

What we found about the standards we reviewed and how well Headingley Hall 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's privacy, dignity and independence was respected. Their views and experiences were taken into account in the way the service was provided and delivered in relation to their care.

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

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

The provider was meeting this standard.

People were protected from the risks of unsafe or inappropriate care and treatment.

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

People we spoke with during our visit told us they were very happy living at Headingley Hall and were extremely pleased with the service they were receiving. People felt the staff respected their privacy and dignity although one person commented, "Some do some don't respect your dignity but by and large they are very nice." One person said, "Nothing but kindness and respect from the staff" and another person concluded, "Couldn't find anywhere nicer." People who used the service also told us, "You can have anything you want here." "Can be private if you want to, can stay in your room." "Could eat between meals, fruit is always around." "Oh yes everyone knocks before coming into the room." This showed that staff are respecting people's privacy and dignity.

Other evidence

Is people's privacy and dignity respected?

Care workers said people were treated with dignity and respect by giving them choices. One care worker gave examples of, allowing people to choose what clothes to wear, what time to go to bed and what meals to have. This was observed by us during the inspection. The deputy manager said staff always knocked on doors before entering. Staff were observed doing this throughout the inspection. The deputy manager also said she had supervised care staff when they were giving personal care to ensure they

treated people with respect and dignity. Four staff spoken with said they had received training on dignity and respect in 2012.

One care worker said she always encouraged people to be independent by allowing people to feed themselves even if they needed time to do this. She described one person who only used one hand to eat so they cut up food for her and allowed her to take as long as she liked over eating her food. She also said they encouraged people to be independent by letting people do things for themselves.

All of the bedrooms in the home were single and en-suite. There were separate dining rooms which allowed those people that required more help with eating and drinking to be able to do so with dignity.

Are people involved in making decisions about their care?

Care workers spoken with said all information about people's views were in their care plans.

Seven care plans were inspected and all had information about the person's likes and dislikes about their food, about what they preferred in relation to personal care, whether they liked to lie in bed in a morning or liked to rise early. It also identified whether someone wanted a male or female carer worker to help with their personal care and also how they like to be addressed.

We observed that people were spending their time in different parts of the home. One person told us there was no routine which people were expected to follow. She said they got up and went to bed when they chose to. Some people had their morning newspapers delivered.

Each person had a weekly social diary with information on various activities during the week. There was a wide range of activities going on as well as opportunities for people to go out. Two staff had been employed to support people with activities. If people preferred to stay in their rooms and not engage in activities these two staff would spend time talking with people on a one to one basis. There was also a forum meeting where people could raise any issues with members of staff and managers.

Our judgement

The provider was meeting this standard.

People's privacy, dignity and independence was respected. Their views and experiences were taken into account in the way the service was provided and delivered in relation to their care.

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

We observed the lunch time period at the home to assess people's experiences of a meal time. People were given a choice of where to have their meals; some people chose to have their meals in their rooms. They chose their meals from the menu in the morning.

People we spoke with told us they liked the meals at Headingley Hall. Two people felt there was too much food and asked for less which had been accommodated. One person said, "At morning break there are always hot drinks and a tray of cakes and biscuits." Another person said, "I pressed my call bell late at night and the staff made me a cup of tea."

People said sometimes family came and eat with them and you could have something special on your birthday.

Other evidence

Are people given a choice of suitable food and drink to meet nutritional needs?
All of the care plans which were inspected had a nutritional risk assessment, people's liquid in take and also up to date information on people's weight. One care worker said that if someone was underweight or had lost weight they would put them on a food and fluid chart to monitor their intake and if it continued would refer to the GP or dietician.

The chef said they provided extra snacks such as malt loaf and milk shakes if someone needed to increase their calorie intake. There was a full and varied menu for people and it was identified in two of the care plans that they were gaining excess weight.

These people had been put on a healthy eating plan which had a reduction in puddings and high calorie foods. This was done with the person's and relative's consent.

The menu looked at was varied and there was various snacks that people could have throughout the day.

There was a 'lite bite at night' menu available from 9pm to 6am. This included a range of snacks and drinks.

Are people's religious or cultural background respected?

We spoke with the manager about how they ensured people's cultural and religious needs were met. They said they would recognise this through assessment and ensure each person's needs were met through individual care planning. They would also liaise with social workers and families to identify the needs required.

Although there was no one in the home that required particular food and drink to meet their cultural needs the chef gave examples of when people had required a diet to meet their religious needs and told us that they had provided them with this.

Are people supported to eat and drink sufficient amount to meet their needs?

All of the care plans inspected had information on whether someone required help with eating and drinking.

Nutritional risk assessments were in place and all food, fluid charts and weight charts were up to date.

We spent sometime observing how lunch was provided in the dining room. We observed the interaction between staff and people in the home. Staff handling food wore gloves and bread was handled with tongs. All bedrooms looked in had jugs of water with glasses.

We saw people engaging in conversation with one another during the lunch time meal. People were supported to be able to eat and drink sufficient amounts to meet their needs. Staff ensured people were given as much time as necessary to eat and drink and were respectful of people's dignity during this time.

People who required help were assisted with their meals on a one to one basis with the care staff sitting with the person at the table. We heard staff telling people what their meal was, this was done in an unhurried manner with staff paying attention to the person. Two people had their soup from beakers. This meant they were able to support themselves without staff having to assist them. We heard staff asking people if they would like some assistance. One lady who wasn't eating her food was asked if she would like something else and a care worker sat with her and encouraged her to eat a little.

The tables were nicely set with tablecloths, condiments, vases of flowers and napkins. The atmosphere was calm, pleasant, unhurried and the food was nicely presented.

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

People we spoke with told us they felt safe living at Headingley Hall. They also told us that they had been provided with information on who to contact if they had any concerns or wanted to make a complaint.

Other evidence

Are steps taken to prevent abuse?

The home had a policy in place for safeguarding people from abuse. This policy provided guidance for staff on how to detect different types of abuse and how to report abuse. There was also a whistle blowing policy in place for staff to report matters of concern.

The provider carried out checks on all staff to ensure that they were suitable to work with any vulnerable adults. The manager told us all staff working in the home had a Criminal Records Bureau check.

The six staff we spoke with told us they understand the importance of the safeguarding process through the safeguarding training they received.

Do people know how to raise concerns?

All six staff spoken with told us they would report any safeguarding concerns to the manager. They also told us they were aware of the homes policies and how to contact external agencies who could assist if they felt that management were not taking their concerns seriously.

Are Deprivation of Liberty Safeguards used appropriately?

In discussions with the manager we asked how they made sure where people were not deprived of their liberty, this was done appropriately. The manager told us that staff had attended Mental Capacity Act (MCA) and deprivation of liberty safeguard (DoLS) training. They were confident staff would recognise when people had limited capacity and when they needed to discuss decisions about the action to take in the best interests of people.

Staff understood their obligations with respect to people's rights and choices when they appeared to lack the capacity to make informed and appropriate decisions.

Our judgement

The provider was meeting this standard.

People who used 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 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 said she pressed her buzzer at night and it was answered promptly and staff made her a cup of tea. Another person thought staff were, "Pretty prompt" and didn't feel there was a lack of staff and, "They do a good job."

However one person spoken with felt that there wasn't always sufficient staff, she said, "Sometimes they are rushed but the main ones go the extra mile."

One person said, "Sometimes staff come into your room for a chat and at times ask if you want some water." Another person spoken with felt the staff understood their needs.

We spoke with a relative of someone who used the service. They said, "There seems enough staff about when I visit and they have the skills to look after the people here."

Other evidence

Are there sufficient number of staff?

We observed that that staff were meeting people's needs. We saw staff giving assistance that was appropriate to people's needs. We saw one person mobilising using a zimmer frame when walking to the dining room at lunch time. Staff gently supported them and reassured them.

The manager explained that through feedback from staff and identifying people's needs, staffing levels were adjusted accordingly.

One care worker said that they had problems with staffing and that this had been reported back to the managers. They had subsequently increased the staff and it was now fine. The deputy manager also said that they had an internal bank system as well as agency staff and that she was allowed to get more staff if there was an issue, such as people going off sick.

Do staff have the appropriate skills and knowledge and experience?

We spoke with two care workers about their understanding of meeting people's nutritional needs and how they identify which people are at greater risk of harm. Both said they had training on nutrition and hydration. They provided detailed and comprehensive answers around appropriate nutritional care and support. The care workers said they knew the people who used the service very well and know how to care for them. Both knew everyone's names and about their care needs.

The nutritional assessments which were inspected had been done correctly and had information in on how to address any issues raised.

Our judgement

The provider was meeting this standard.

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

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 spoke with five people who told us they have seen their care plans and considered them to be kept up to date.

Other evidence

Are accurate records of appropriate information kept?

We looked at seven care files. People's personal records including medical records were accurate and up to date. All nutritional screening was up to date. All care plans identified any risks relating to nutrition and hydration. All of those at risk had their food and fluid and weight monitored regularly. Care plans had information on people's needs and their choices and preferences. The care files showed initial assessment and regular reviews of people's health and wellbeing.

Documentation clearly showed the involvement of social workers, medical staff and other health professionals. All relevant telephone numbers of health professionals were clearly stated in the notes, together with any interaction and advice given. Care plans showed personal care, people's history, care assessments, regular reviews, risk assessment and records of incident/accidents.

Are records storage securely?

Care plans and daily records were stored in an office, which was lockable to make sure they were secure and therefore kept confidential.

Our judgement

The provider was meeting this standard.

People were protected from the risks of unsafe or inappropriate care and treatment.

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

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