

Review of compliance

Princess Lodge Limited Princess Lodge Limited	
Region:	West Midlands
Location address:	11 High Street Princes End Tipton West Midlands DY4 9HU
Type of service:	Care home service with nursing
Date of Publication:	August 2012
Overview of the service:	Princess Lodge is registered to provide accommodation and nursing care to a maximum of 32 people. People living there have a range of conditions related to old age which may include dementia.

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

Our current overall judgement

Princess Lodge Limited 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 23 July 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.

We were supported on this review by an expert-by-experience who has personal experience of using or caring for someone who uses this type of care service.

What people told us

There were 27 people living at the home on the day of our inspection visit. No one knew we would be visiting. We spoke with seven people who lived there, four relatives, two visitors and five members of staff.

Due to their health conditions or complex needs not all people were able to verbally share with us their views about the care they received. We were able to look at other areas for evidence to support their experience which included observation and sampling care records. Observation and engagement with people by our expert by experience gave us an insight of what people who lived there experienced in their daily lives. Some evidence this person gathered during our inspection was included within our report.

The seven people we spoke with told us positive things about the home. One person told us "I am very happy here. I have lived here for two years now and nothing is too much trouble for the staff, they are so kind." Another person who was living at the home for a short time told us that they "Wished they lived there" they said "The staff are really nice and very kind".

Relatives made compliments about the home and the care provided. One relative approached us as they really wanted to make their views known they said "I want you to know how wonderful the staff are here. They have been so supportive to both me and my relative. I could not thank them enough; the girls are all so kind." Another relative told us "I can not speak highly enough of this home, it is really very good".

We saw staff spending time with people and giving them individual attention. We saw that there were positive relationships between staff and people living at the home. When staff approached people, people responded by smiling indicating that they were comfortable in staffs presence.

We saw that staff treated people with respect and dignity. People told us and we saw that choices were offered and that people's views were sought and taken into consideration.

We found that people's needs had been assessed by a wide range of health professionals including speech and language therapists, physiotherapists, specialist doctors and the optician. This meant that people's health care needs were being monitored and met.

Staff received a range of training which included caring for people with dementia and abuse awareness training, so that they had up to date knowledge and skills in order to support the people who lived at the home and keep them safe. Staff we spoke with knew about people's needs and personal wishes. This meant that care could be provided in the way that people wanted it to be.

We saw that some community based and in-house activities were offered to suit people's individual needs and choices. People told us that they enjoyed these.

We saw that attention was paid to the risks associated with weight loss and malnutrition. People were provided with a varied range of food and drink. People told us that they liked the food.

We sampled personal records for three members of staff. We found that recruitment checking processes were robust and thorough which meant that unsuitable staff were less likely to be appointed so people were at less risk of harm.

There were systems in place to monitor how the home was run, to ensure people received a quality service.

What we found about the standards we reviewed and how well Princess Lodge Limited 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 choices were respected.

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.

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 living at the home 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 12: People should be cared for by staff who are properly qualified and able to do their job

The provider was meeting this standard. There were effective recruitment and selection processes in place.

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 was implementing methods and systems to assess and monitor the quality of service that people receive.

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's privacy, dignity and independence were respected. People expressed their views and were involved in making decisions about their daily routines. Throughout our inspection we heard staff talking to people and asking them what they wanted to do and where they wanted to go.

People told us that they were treated with dignity and respect. One person said "They do ask me how I want to be looked after. The staff are very nice they are caring and polite". A relative said "The staff do ask us questions to find out their care needs. The staff are friendly and make us feel welcome".

Records we saw confirmed that people's preferred form of address had been identified. Throughout the day we heard staff using these preferred names, people responded by looking at staff and smiling. This showed that staff take into account people's wishes and were respectful to people.

All bedrooms are single rooms so that people have a private space where they receive their personal care and can spend time alone if they want to. We looked at three bedrooms. We saw that the rooms were personalised to reflect the taste and interest of the person. One person said "I love my room".

During our inspection a person asked a staff member for something. The staff member asked the person if it was alright for them to fetch the thing they wanted from their room and offered the person to go with them. This shows that staff respect people's private space and do not enter unless they ask first.

We saw that people who lived at the home were dressed in clothing that was appropriate for their age, gender and the weather. One person wore a necklace, bracelet and had their nails painted. They showed us these and nodded and smiled when we asked if they liked wearing them. Their visitor said "Everyday staff make sure that they look nice and that their clothes are coloured coordinated I know this is very important to my relative".

The home has a hair salon and nail manicure bar. People use these facilities supported by staff often and a hairdresser provides a service once a week. A person living at the home said "The girls take care of us and help us to look nice. The hairdresser does a good job but the girls help us to do our hair and make up and even paint our nails".

We found people were able to practice their religious beliefs by attending church services or having visits from religious figures of their faith. Care records also indicated if people had a religion and how significant it was to them. This meant that people were given the opportunity to express their faith according to their personal level of belief.

At the time of our inspection it was Ramadan. We discussed this with the manager who was aware that people may choose to fast during Raman from dawn until sunset. The manager was aware of the ways they could support people during this time such as providing meals at different times.

Other evidence

We had no other evidence.

Our judgement

The provider was meeting this standard. People's privacy, dignity and choices were respected.

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

People's care and support was delivered in line with their individual care plan. We looked at three care plans which told staff how to support people to meet their needs. One person's care plan detailed how their skin care needs were to be met. We spoke with this person whilst they were in the lounge and saw that they were sitting on a special cushion to prevent further skin damage. Their relative said "They have that cushion to prevent them getting sore".

Another person was at risk of choking because of poor swallowing. Their care plan highlighted this risk and gave instructions for staff to follow. Staff we spoke with gave us a good account of what they did to prevent the person choking.

People's care and support was planned and delivered in a way that ensured their safety and welfare. In the records we looked at we saw that staff had identified and assessed risks to people's safety and what should be done to reduce these. These included risks relating to behaviours and falls. The assessments included information about what staff should do to prevent injury to the person.

Records sampled showed that when needed, referrals had been made to appropriate health professionals. We saw that staff had followed their advice to ensure the person's health and well being. Records showed that staff supported people to attend health appointments where needed and informed relatives about pending appointments so that they could take the person to these if they wanted to.

A registered nurse was on duty at all times to meet people's nursing needs. Staff told us and records confirmed that they had received training in a range of areas such as moving and handling and dementia awareness which helped them to look after people.

People were supported in promoting their independence and community involvement. People were encouraged to take part in a variety of hobbies and interests. People told us that they went out for walks with staff and to a local shop and cafe' and how much they had enjoyed these outings. A person attended the home once a fortnight and provided sessions one person said "Yes I like that".

We observed that there were not any clocks or notice boards to enhance orientation. We discussed this with the manager who told us that these were not available at present due to the completing of decoration and refurbishment. The manager showed us where these items would be displayed in the near future.

Other evidence

We did not have any other evidence.

Our judgement

The provider was meeting this standard. People experienced care, treatment and support that met their needs.

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

People were supported to be able to eat and drink sufficient amounts to meet their needs. When we arrived some people were eating their breakfast. We saw staff giving people assistance and encouragement to eat. We saw that people were offered choices and were asked if they wanted anything else when they finished their breakfast. One person asked for a yoghurt and this was provided. One person we spoke with said "They are always trying to get us to eat".

We saw that catering staff were available seven days a week. We saw that a range of food and drink was offered and that people's personal food and drink preferences were identified and taken into consideration.

People's care and support was planned and delivered to identify any risk of malnutrition. In the records we looked at we saw that staff had identified and assessed the risks to people regarding their weight and nutritional needs and what should be done to reduce these. Staff we spoke with knew who needed help and encouragement to eat and drink. Staff we spoke with told us how they add calories to food by adding extra butter or cream to prevent weight loss. They also told us how they cater for special diets such as diabetic diets.

We spoke with four people living at the home about food they all made positive comments. One person said "The food is nice". We asked one person about their meal they responded by smiling and gave the 'thumbs up' as they were not able to verbally articulate an answer.

We spoke with two relatives who confirmed what they had seen of the food it was of a good standard. One said "A couple of days a week I come and spend lunch time with my relative. Because they lost weight before they came here they needed a lot of encouragement to eat. They have a puree diet. I could not believe how well this is presented although pureed each food type is separate on the plate so it looks nice".

Other evidence

Our observations found that some extra attention to detail may enhance the meal times for people. Menu boards would remind people what meals are available each day and cloths on tables could make the tables more attractive. We discussed these issues with the manager who told us that they were in hand.

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 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.

Our observations showed that people were at ease with staff. We saw them smiling and that they were relaxed in the presence of staff. People and relatives we spoke with told us that people living there were well looked after and were safe. We spoke with two people who used words such as 'nice' and 'kind' to describe the staff.

One person told us "I feel safe and looked after". A relative said "I have not seen anything concerning during my visits".

We spoke with two staff about safeguarding and abuse. Both staff told us that they had received training in adult safeguarding. Both staff gave us a good account of what they would do if they felt that abuse was occurring. Both staff told us that they would have no hesitation in reporting bad practice or abuse and that they had confidence that their concerns would always be listened to by the manager and provider.

We looked at training records which confirmed that all staff had received a range of training to help them understand behaviour that is difficult to manage and the needs of the people in their care. This included training in the following subjects; abuse awareness, Mental Capacity Act and moving and handling.

Other evidence

Following our inspection we spoke with external health care professionals and social services about a complex issue that had arisen. The local social services department have since told us that they looked into this matter and had not found any concern.

Our judgement

The provider was meeting this standard. People living at the home 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 12: Requirements relating to 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 staff who are fit, appropriately qualified and are physically and mentally able to do their job.

What we found

Our judgement

The provider is compliant with Outcome 12: Requirements relating to workers

Our findings

What people who use the service experienced and told us

During our observations we saw that staff had a good rapport with people. We saw that people were happy and comfortable during their engagements with staff. One person told us "The staff are very nice". A relative said "The staff are nice and friendly".

There were effective recruitment and selection processes in place. Appropriate checks were undertaken before staff began work. We looked at the files for three staff who worked at the home and saw that robust checks had been undertaken. These checks would help to keep people safe and prevent them from harm as they prevent unsuitable people working at the home.

The manager told us about induction procedures that new staff have to go through. Staff we spoke with confirmed that they had received induction training. These induction processes would give people living there assurance that new staff had knowledge of the home's policies and procedures and what is expected of them to make sure that they were cared for and were safe.

Other evidence

We had no other evidence.

Our judgement

The provider was meeting this standard. There were effective recruitment and selection processes in place.

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

The people living there, their representatives and staff were asked for their views about the care and they were acted on. People told us that they were asked about the care and support that they received. They told us that staff asked their views.

The registered provider has a active role in the running of the home and is on site most days. A relative told us "The owner asked me my views about the care and the home and encouraged me to raise any issues with the staff. I do not have any issues I think it is a very good home and my relative is happy, but it was nice that they asked".

Over the past year the owner had undertaken extensive refurbishment of the home. An extension has been built and existing rooms were extended to allow good sized en-suite rooms for everyone. The home had a number of different lounges and dining areas so that people can choose where they spend their time. Courtyard and garden space had been developed to provide attractive outside space for people to enjoy. People living at the home and their relatives all commented about the home's premises. One person said "My room, the garden, and lounges are all really lovely". One relative said "Well, I can not say enough about the place, it is beautiful".

We saw that falls monitoring is in place. Earlier in the year one person was having a number of falls. The manager requested input from the falls team and the number of falls had decreased. We saw that audits concerning a number of areas including medication and infection control were undertaken regularly. These actions meant that staff monitored processes and systems to make sure people were safe and well cared

for.

We saw that systems were in place for people to make complaints. People we spoke with and their relatives confirmed that they were aware of complaints processes. One person said "I would speak to the nurse if that did not work I would speak with my son". They also said "I have no worries". A relative told us "If I had a complaint I would see the manager. I would feel comfortable to do this. I do not have any complaints though".

Other evidence

We had no other evidence

Our judgement

The provider was meeting this standard. The provider was implementing methods and systems to assess and monitor the quality of service that people receive.

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
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