Review of compliance

Mary Feilding Guild Mary Feilding Guild	
Region:	London
Location address:	North Hill Highgate London N6 4DP
Type of service:	Care home service without nursing
Date of Publication:	June 2012
Overview of the service:	The Mary Feilding Guild is a 43 bedded residential home in Highgate, London. The service is for older people. On admission residents are expected to be largely self-caring, mobile, and not suffering from dementia. However, residents whose care needs develop, continue to live at the home. When we visited all of the permanent residents were female.

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

Our current overall judgement

Mary Feilding Guild 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 8 May 2012, looked at records of people who use services, talked to staff and talked to people who use services.

What people told us

We spoke to 11 people living at the Mary Feilding Guild. All of them were positive about living at the home and said that they liked it. Comments included the following: "It is an excellent place. If you're going to be in a community place, it is ideal"; "What it offers is extremely good"; and "I'm sure you'll find this is what all care homes should be like."

People said that they liked the freedom that they had in the home. For example one person said, "It is wonderfully relaxed and open. There are no visiting rules. I'm very, very lucky to be here." However, people felt that if they needed help that they would get it, "It is very free, but if you need any help they are there."

People liked the food that they had and thought that they had a good selection of options. All of the people that we spoke to said that they liked the food.

People said that they felt they were respected in the home. Many said that the members of staff were polite and will always knock before coming into their rooms.

Most people that we spoke to were highly complimentary about the staff at the home. They felt that they worked hard, delivered good care and were nice people. Comments included the following: "The staff are very respectful and patient. They genuinely like us and put up with us with a good heart"; "The staff are very, very nice"; and "They are very caring". We also saw a range of thank you cards and compliments for the home. One said that "your care staff are quite superb".

Those that needed care felt that it was good. One person commented "They meet needs and most are very helpful. When you ring the bell, they come quickly".

People told us that there were lots of activities available if they wanted to do them. We were told that - amongst other things - there was a poetry club, a reading club, an exercise class, and films. People felt that the home was good at providing activities. One person said that "they always try to do different things", another said that "they will try and do things for you". People were also keen to say that they valued their independence and liked their own time to do their own things.

What we found about the standards we reviewed and how well Mary Feilding Guild was meeting them

Outcome 01: People should be treated with respect, involved in discussions about their care and treatment and able to influence how the service is run

People understood the care choices available to them. They were able to contribute their views and their privacy and dignity was respected. The provider was meeting this outcome.

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

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

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

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. The provider was meeting this outcome.

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

The provider had an effective system to ensure that people receive their medications safely and at the time they need them. The provider was meeting this outcome.

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

The provider had sufficient numbers of appropriate staff to ensure that the health and welfare needs of people were being met. The provider was meeting this outcome.

Outcome 16: The service should have quality checking systems to manage risks and assure the health, welfare and safety of people who receive care

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

Other information

Please see previous reports for more information about previous reviews.

What we found for each essential standard of quality and safety we reviewed

The following pages detail our findings and our regulatory judgement for each essential standard and outcome that we reviewed, linked to specific regulated activities where appropriate.

We will have reached one of the following judgements for each essential standard.

Compliant means that people who use services are experiencing the outcomes relating to the essential standard.

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 told us that they were treated with respect by staff and that they had their privacy and independence respected: "People always knock before coming in"; "They give you independence. It feels like home"; "The staff are always respectful." People told us that they were independent, but if they needed help that they could get it.

People told us that they were asked their views. We were told that "there are endless questionnaires". We also told that people were able to contribute to the agenda of residents' meetings.

Other evidence
We looked at a number of care plans for people at Mary Feilding Guild. There was evidence that people were involved in deciding what care and support they wanted to receive.

A quality of life questionnaire had been conducted regularly, allowing residents to offer their opinions on the home. We were told that there was also a residents' forum once a quarter. A suggestions box was available for residents and management told us that they operate an open door policy for residents.

The manager informed us that residents' meeting were held regularly. We looked at the minutes of the two most recent meetings. These showed that there was a large attendance and that a variety of topics were covered.

Staff told us that they will always try and maintain the independence of residents. Residents also told us that they felt that they were respected by staff. The recent quality of life questionnaire had asked, "Do you feel that members of staff respect your dignity at all time?" 22 people (90%) had replied 'yes'; one person had replied 'no'.

There was evidence that people's views were being sought when changes were made at the home. For example, when the catering contract had changed two groups of residents were consulted for their opinions.

A survey on activities had recently been conducted. Individual residents had been asked what they wanted to do. This had then been analysed and was being used to develop the activities programme.

Our judgement
People understood the care choices available to them. They were able to contribute their views and their privacy and dignity was respected. The provider was meeting this outcome.

Outcome 04:
Care and welfare of people who use services

What the outcome says

This is what people who use services should expect.

People who use services:
* Experience effective, safe and appropriate care, treatment and support that meets their needs and protects their rights.

What we found

Our judgement

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

Our findings

What people who use the service experienced and told us
People told us that they felt that they received good care. For example, one person told us that "the staff here are absolutely marvellous. Nothing is too much trouble. You can ring the bell at any time." Another person explained, "I had a fall. They came immediately. There is always someone on call."

People felt that they were offered a food choice of food and that there was a good variety: "Food is good. They will do specials for people"; "Yes, I get food. There is a large basket of fruit. We can help ourselves to it."

People using services told us that there were lots of activities for people to do, but that people liked their own time, "More and more they have arranged things lately. Someone has been appointed to co-ordinate activities. It is very nice, but you must not be expected to go. I love my free time to do my own things."

Other evidence
We looked at care plans for a number of residents. In all of them there was evidence that, where appropriate, monitoring was taking place and being recorded. There was evidence that risks had been identified and strategies put in place to manage these.

People told us that they felt they were receiving good care. In the recent quality of life questionnaire 68% of people had answered 'good' to the question "How would you describe the way staff support or assist you with your personal care needs". No one had answered 'poor'. 90% of people had answered 'good' to the question "Are you

happy with the care provided by care staff". No one had answered 'poor'.

We were told by the manager that a majority of residents remained very independent. For example, many residents visit the doctor unaccompanied. However, we were also told that the doctor visited the home routinely on a fortnightly basis.

We were told by the manager that with individuals that have specialist diets, they have worked with the people to pick appropriate food items that they liked and were appropriate for them.

There were a wide range of activities available for people. For example, on the day of our visit an exercise class and a poetry writing group took place. We looked at the activities log; activities included scrabble and an art class. We were also told that computing skills were being taught to the residents that wanted to learn and that many residents liked to help with the gardening. The home has an active group of volunteers who will regularly visit residents.

Our judgement
People experienced care, treatment and support that met their needs and protected their rights. The provider was meeting this outcome.

Outcome 07:
Safeguarding people who use services from abuse

What the outcome says

This is what people who use services should expect.

People who use services:
* Are protected from abuse, or the risk of abuse, and their human rights are respected and upheld.

What we found

Our judgement

The provider is compliant with Outcome 07: Safeguarding people who use services from abuse

Our findings

What people who use the service experienced and told us
People told us that they felt safe at the Mary Feilding Guild.

One person also commented, in relation to the staff, that they had "never heard anyone raise a voice".

Other evidence
The Mary Feilding Guild had a safeguarding policy in place. When we visited this was being rewritten to make it easier for people to understand.

Staff at the Guild have received safeguarding training annually. We saw evidence that this had been delivered most recently in April 2012. When we spoke to staff they told us that they had had safeguarding training and that they knew what to do if they had any concerns that people using services were being abused, or were at risk of being abused.

The provider may find it useful to note that the contact details for the local safeguarding authority were not easily available for all staff at the home.

The home keeps small amounts of cash for the residents. We checked the file for two residents. All receipts were numbered correctly and the figures matched the amount of money in the bags.

Our judgement

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. The provider was meeting this outcome.

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 compliant with Outcome 09: Management of medicines

Our findings

What people who use the service experienced and told us
People told us that they were happy with how their medications were being managed. We were told that there had been some errors in the past, but these had been rectified.

Other evidence
When we visited we checked the medication administration record (MAR) sheets for a number of residents. These were all filled in correctly, detailing appropriately when medications had been refused. We also checked medication boxes. All of these contained the correct number of tablets.

We checked the storage of medications. Where appropriate they were being stored in the fridge or in double-locked cupboards.

The home had a system in place for the return of controlled drugs. When we checked there was evidence that controlled drugs were being appropriately returned to the pharmacist.

Previously the manager had been responsible for the distribution of all medications. The home had recently introduced a system whereby senior care staff were now also responsible. Staff members had had medications training in preparation for this.

Our judgement
The provider had an effective system to ensure that people receive their medications

safely and at the time they need them. The provider was meeting this outcome.

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
All of the people we spoke to told us that they felt the staff were good and that they would come and help you if you needed help: "The staff are absolutely tip-top"; "The staff do come and help. They are awfully patient"; "You will get what you ask for, if they can do it, they do it. Staff are very good. No exception. They are all good."

However, people also told us that they felt there could be more staff. For example one person said, "I did expect more help, but they are chronically short given the size of the home."

Other evidence
On the day that we visited the home there were four members of care staff working. There were also six members of domestic staff. We were told that this is the normal day-time staffing level.

We looked at recent staff rotas. These showed that the identified staffing levels were being met on all shifts. There had recently been a period where the home had been required to cover a large number of shifts. This had been achieved through the usage of agency staff and the manager covering shifts. All of the shifts had been covered.

Members of staff we spoke with told us that they felt supported by management and that they had had lots of training. They also said that they felt that they were meeting the needs of the residents. However, they also felt that there was a lot of pressure on their time.

We were told by the manager that if extra staff members were required to meet the needs of specific residents that these were made available. We were told that there was a separate budget available to fund this.

We asked to see the minutes of recent staff meetings, but these were not available. The provider may find it useful to note that no formal staff meetings had taken place recently.

Our judgement
The provider had sufficient numbers of appropriate staff to ensure that the health and welfare needs of people were being met. The provider was meeting this outcome.

Outcome 16:
Assessing and monitoring the quality of service provision

What the outcome says

This is what people who use services should expect.

People who use services:
* Benefit from safe quality care, treatment and support, due to effective decision making and the management of risks to their health, welfare and safety.

What we found

Our judgement

The provider is compliant with Outcome 16: Assessing and monitoring the quality of service provision

Our findings

What people who use the service experienced and told us
People told us that they had opportunities to provide their opinions on various aspects of the service, by taking part in regular questionnaire surveys. They also told us that they knew how to make a complaint and that, if they did so they felt, their concerns would be taken seriously.

Other evidence
We looked at the list of planned audits at the home. There was a clear plan in place mapped against the Care Quality Commission essential standards.

We were told by the manager that they were in the process of redesigning the care plans to make them more outcomes focussed and ensure a full audit trail. The success of this was being monitored through a monthly care plan audit.

We looked at the record of complaints at the home. There was evidence that when concerns were raised any potential improvements were identified and that these were then implemented.

We were shown the analysis of the quality of life questionnaires at the home. There was evidence that themes were being identified and plans developed to implement any improvements.

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

service that people receive. The provider was meeting this outcome.

What is a review of compliance?

By law, providers of certain adult social care and health care services have a legal responsibility to make sure they are meeting essential standards of quality and safety. These are the standards everyone should be able to expect when they receive care.

The Care Quality Commission (CQC) has written guidance about what people who use services should experience when providers are meeting essential standards, called *Guidance about compliance: Essential standards of quality and safety*.

CQC licenses services if they meet essential standards and will constantly monitor whether they continue to do so. We formally review services when we receive information that is of concern and as a result decide we need to check whether a service is still meeting one or more of the essential standards. We also formally review them at least every two years to check whether a service is meeting all of the essential standards in each of their locations. Our reviews include checking all available information and intelligence we hold about a provider. We may seek further information by contacting people who use services, public representative groups and organisations such as other regulators. We may also ask for further information from the provider and carry out a visit with direct observations of care.

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
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