

Review of compliance

Elder (UK) Limited
Edensor Nursing and Residential Home

| | |
|---------------------------------|---|
| Region: | East |
| Location address: | 3-9 Orwell Road Clacton-on-sea Essex CO15 1PR |
| Type of service: | Care home service with nursing |
| Date of Publication: | May 2012 |
| Overview of the service: | Edensor is a care home with nursing that provides care and support to up to sixty five people who may or may not have nursing care needs. |

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

Our current overall judgement

Edensor Nursing and Residential 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 to check whether Edensor Nursing and Residential Home had taken action in relation to:

- Outcome 04 - Care and welfare of people who use services
- Outcome 07 - Safeguarding people who use services from abuse
- Outcome 10 - Safety and suitability of premises
- Outcome 14 - Supporting staff

How we carried out this review

We reviewed all the information we hold about this provider, carried out a visit on 10 February 2012 and talked to staff.

What people told us

We did not receive any comments from people using the service in respect of the outcomes reviewed.

What we found about the standards we reviewed and how well Edensor Nursing and Residential Home was meeting them

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

The provider is compliant with this outcome. People's care and welfare needs are clearly identified within their plans of care.

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

The provider is compliant with this outcome. People are supported by a team of staff who have all received training about safeguarding people.

Outcome 10: People should be cared for in safe and accessible surroundings that

support their health and welfare

The provider is compliant with this outcome. People live in a home that is well maintained and that is currently subject to a comprehensive programme of refurbishment.

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

The provider is compliant with this outcome. People are supported by a staff team who are competent and well trained.

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 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

We did not receive any comments from people using the service in respect of this outcome.

Other evidence

At our previous visit to the service in October 2011 we found when reviewing four care plans of people using the service that one person did not have a plan of care in place despite having been a resident in the home for a considerable period of time. During our follow up visit we once again reviewed the care planning documents for the same person and found that there was now a care plan in place which clearly identified the person's care needs and the interventions required by staff to enable the person's identified needs to be met.

Our judgement

The provider is compliant with this outcome. People's care and welfare needs are clearly identified within their plans of care.

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 did not receive any comments from people using the service in respect of this outcome.

Other evidence

At our last visit to the service in October 2011 the records that we examined indicated that few staff had received training about safeguarding.

At our recent visit to the service we were told that all staff had now received training on this subject. This was confirmed when a copy of the services staff training matrix was sent to us shortly after our visit. From discussion with staff at the time of our visit it was evident that staff with whom we spoke had a good understanding of their responsibilities around keeping people safe.

At the time of our visit two safeguarding incidents had been under investigation by the appropriate agencies, both of which we were informed by the manager had been concluded and closed.

Our judgement

The provider is compliant with this outcome. People are supported by a team of staff who have all received training about safeguarding people.

Outcome 10: Safety and suitability of premises

What the outcome says

This is what people should expect.

People who use services and people who work in or visit the premises:

* Are in safe, accessible surroundings that promote their wellbeing.

What we found

Our judgement

The provider is compliant with Outcome 10: Safety and suitability of premises

Our findings

What people who use the service experienced and told us

We did not receive any comments from people using the service in respect of this outcome.

Other evidence

At the time of our visit to the service in October 2011 there were a number of areas of the home that were looking very tired and worn and in need of refurbishment. We were told at that time by the person in charge that there was a comprehensive programme of refurbishment planned, although there was no such programme plan available for us to view as the provider who had the plan was out of the country on leave. However following our visit the programme of refurbishment was sent onto us.

The programme showed that there was a three phase programme of refurbishment planned which included all areas of the home. Refurbishment in phase one included rooms, lounges, corridors, and dining rooms being redecorated. Phase two of the programme included further redecoration, adding three additional en-suites, laying new flooring and installing additional safety and security measures. Phase three of the programme included further redecoration to the main building and the first floor as well as restructuring of the office space. Apart from the above work scheduled to be carried out further plans are being developed which will incorporate the kitchen and laundry area. All of the proposed work is scheduled for completion by the end of 2012.

Our judgement

The provider is compliant with this outcome. People live in a home that is well maintained and that is currently subject to a comprehensive programme of

refurbishment.

Outcome 14: Supporting staff

What the outcome says

This is what people who use services should expect.

People who use services:

* Are safe and their health and welfare needs are met by competent staff.

What we found

Our judgement

The provider is compliant with Outcome 14: Supporting staff

Our findings

What people who use the service experienced and told us

We did not receive any comments from people using the service in respect of this outcome.

Other evidence

The services staff training matrix showed that staff were being provided with a good range of training which included: safeguarding, manual handling both theory and practical, food hygiene, infection control and deprivation of liberties and mental capacity act training. Staff with whom we spoke told us that access to staff training was good.

Records provided to us showed that the service had a schedule of training for the period April 2012 to November 2012. This training included; moving and handling, dementia awareness, safeguarding, health and safety, non violent crisis intervention, mental capacity act and deprivation of liberties training, food hygiene and infection control .

Records provided to us showed that all new staff employed in the home received an induction appropriate to their role. All induction packs have been reviewed in the last six months by the service's training manager. Newly appointed staff were allocated a "buddy" who supported them through their induction period.

The induction was based on the Skills for Care Common Induction Standards with additions related specifically to the company and the home. The expectation was that all new staff completed this workbook within their 12 week induction period. Alongside the induction book, there were training courses which covered all of the

services mandatory training requirements.

Additional training was identified dependant on the needs of the people using the service and each employee's personal needs. This could range from literacy and numeracy, personal interest, job specific courses like activities or specialised courses like nutrition or crisis intervention.

Elderhomes had its own training manager who was able to tailor course content to any specific home, addressing issues which may require some additional attention.

The home was part of the local training consortium.

Professional nurse registration was checked on employment and thereafter on renewal of PIN numbers (nurse registration) and yearly by the senior management team. Nurses professional development was checked as part of the supervision process.

Elderhomes had a policy and procedure in place for supervisions and this had been implemented in the home.

Supervision comprised formal, work or group supervision. Supervisions took place every eight weeks with the line manager or home manager.

Specific work related supervisions were done on a regular basis for example drug administration, hand washing. Appraisals were done yearly by the manager. We were informed that staff supervisions were audited quarterly by both the manager and the provider's human resources department.

Our judgement

The provider is compliant with this outcome. People are supported by a staff team who are competent and well trained.

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 |