

Review of compliance

<p>Marcus Care Homes Limited Enstone House</p>	
<p>Region:</p>	<p>South East</p>
<p>Location address:</p>	<p>Cox Lane Chipping Norton Oxfordshire OX7 4LF</p>
<p>Type of service:</p>	<p>Care home service without nursing</p>
<p>Date of Publication:</p>	<p>August 2011</p>
<p>Overview of the service:</p>	<p>Enstone House is a residential care home with nursing registered for 33 older people.</p>

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

Our current overall judgement

Enstone House was meeting all the essential standards of quality and safety.

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, checked the provider's records, observed how people were being cared for, looked at records of people who use services, talked to staff, reviewed information from stakeholders and talked to people who use services.

What people told us

People we spoke to told us that they were happy with the home. They had lots of visitors and they went out a lot. They told us that care staff were kind and looked after them well. Some people told us that they had been involved in choosing the home whilst others said their relatives had come to look round first. People told us that they liked the food and that they had a choice in when and where they ate. People told us that they were asked if the care they were getting was given in a way which respected their dignity and privacy. People told us that if they had any problems with the home they could talk to the manager, who they felt would be able to find a mutually agreeable solution.

What we found about the standards we reviewed and how well Enstone House was meeting them

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

People living in the home were involved in the assessment and planning of their care needs. Their care needs were reviewed on a regular basis. The home offered a range of activities for people, which they could participate in if they wanted to. Staff were seen as kind and approachable by people living in the home.

- Overall we found that Enstone House was meeting this essential standard.

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

The home had systems in place to monitor people's food and fluid intake. Staff accessed specialised dietary advice if necessary. People living in the home were very positive about the quality and choice of food available.

- Overall we found that Enstone House was meeting this essential standard.

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

Staff in the home had received training and information on safeguarding vulnerable adults. They were aware of how to respond and what to do if there were concerns about a person's safety.

People living in the home felt safe and well cared for

- Overall we found that Enstone House was meeting this essential standard.

Outcome 08: People should be cared for in a clean environment and protected from the risk of infection

Staff in the home had had training in the prevention and management of infection control. The home was clean and hygienic and practices were based on the Department of Health code of practice for the management and prevention of infection.

- Overall we found that Enstone House was meeting this essential standard.

Outcome 10: People should be cared for in safe and accessible surroundings that support their health and welfare

The home provided an appropriate environment for the people who lived there. It was well maintained, and the design and layout allowed people to move easily around the home.

- Overall we found that Enstone House was meeting this essential standard.

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

Staff were recruited, trained, managed and supported to provide care in a professional manner taking into account the individuals need for privacy, respect and dignity.

- Overall we found that Enstone House was meeting this essential 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 home had a number of systems in place to monitor the quality of care provided. These included risk assessments, surveys of people who lived in the home, quality monitoring visits by the proprietor, the complaints system and through residents meetings. The outcomes from these systems were used to improve or develop the service provided.

- Overall we found that Enstone House was meeting this essential standard.

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.

A **minor concern** means that people who use services are safe but are not always experiencing the outcomes relating to this essential standard.

A **moderate concern** means that people who use services are safe but are not always experiencing the outcomes relating to this essential standard and there is an impact on their health and wellbeing because of this.

A **major concern** means that people who use services are not experiencing the outcomes relating to this essential standard and are not protected from unsafe or inappropriate care, treatment and support.

Where we identify compliance, no further action is taken. Where we have concerns, the most appropriate action is taken to ensure that the necessary improvements are made. Where there are a number of concerns, we may look at them together to decide the level of action to take.

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

The people we spoke to told us that they were well looked after and that there was plenty to do if they wanted to. People told us that the staff were kind and provided care when they needed it. People we spoke to were happy to be left to do what they wanted and not join in. They told us that the manager had often called in on them to ask how they were and if they had any problems.

Other evidence

The service undertook a full assessment of people's care and emotional needs prior to them coming to the home. The assessment took into account how the person wanted their care to be given. People were encouraged to be fully involved in the assessment. Where this was not possible, relatives or those nominated to act on the persons behalf were involved. People were encouraged to be as independent as possible and contact with friends, family and the local community was encouraged.

Care staff were seen to provide care in a private and dignified manner. People signed to say that they agreed with the assessment and care to be given. Care plans were reviewed every four weeks. Where a person lacked the capacity to make an informed decision about their care, an independent assessment was carried out. The manager and senior staff had been trained in the procedures for assessing consent.

The home had an activities coordinator who provided a wide range of activities, both for individuals and groups. Future planned activities included a river boat trip, a visit to a safari park and a B.B.Q where relatives and friends were also invited. People had

asked for a garden they could help maintain and plant. This had proved a popular activity for many residents. Plant beds were at heights which were easily accessible for people in wheelchairs. This also meant that for more able people, they did not have to bend down or kneel. The garden was starting to produce its own grown vegetables.

People living in the home had risk assessments for any activity or process which had the potential for harm. People were involved in assessing the level of risk and where appropriate they signed to say that they agreed with the assessment.

Our judgement

People living in the home were involved in the assessment and planning of their care needs. Their care needs were reviewed on a regular basis. The home offered a range of activities for people, which they could participate in if they wanted to. Staff were seen as kind and approachable by people living in the home.

- Overall we found that Enstone House was meeting this essential standard.

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 we spoke to told us that staff made sure they ate and drank regularly. People liked the food and told us there was always plenty to eat and drink. Fresh fruit was available when people wanted it. People we spoke to following their lunchtime meal said that they always enjoyed the food and that there was always plenty to eat. People told us they could have an alternative choice if they wished.

Other evidence

The home kept a record of people's weight, fluid intake and meals eaten to ensure that people remained healthy. These records were checked and found to be up to date. Where people were identified as having health problems due to poor diet, the home consulted with the dietician from the Horton Hospital. No one in the home at the time of the visit was identified as being at risk.

The home was able to meet a diverse range of dietary needs if required. People living in the home at the time of the visit did not require specific diets to meet cultural or ethnic needs. We observed people having a lunchtime meal. The dining area was light and airy. Staff were on hand to provide assistance to those who required it. The kitchen was well equipped and clean. Food was stored in line with food hygiene guidelines. The kitchen staff had all had food hygiene training. The chef spoke to people individually at regular intervals to check that the food served was what they wanted. Regular changes were made to the menu to coincide with seasonal vegetables. Fresh meat and fruit were provided where possible.

Our judgement

The home had systems in place to monitor people's food and fluid intake. Staff accessed specialised dietary advice if necessary. People living in the home were very positive about the quality and choice of food available.

- Overall we found that Enstone House was meeting this essential standard.

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 to told us that they felt safe and well cared for and that care staff were kind and caring.

Other evidence

The home had policies and procedures informing staff what to do if concerns were raised about people's safety. All staff had been trained in dealing with safeguarding issues during their induction and as part of ongoing training. Information about protecting vulnerable adults was given to staff in the staff handbook. The home also followed the Oxfordshire policy and procedure for safeguarding vulnerable adults. The home had not had any person who was assessed as needing to be restrained in the last six months. Where potential risk had been identified a risk assessment aimed at minimising this risk was put in place.

The home had not made any safeguarding referrals to social services in the last two years. Staff we spoke to were aware of potential abusive situations and what action to take to ensure people were safe, if necessary. Staff in the home told us that they followed the Oxfordshire local authority guidance on safeguarding vulnerable adults.

Staff told us that visitors to the home were usually expected or had been invited. Staff told us that visitors to the home had to sign in and state who they had come to see. Staff told us that people visiting the home for the first time were asked to wait while the care staff checked with the person they had come to visit.

Our judgement

Staff in the home had received training and information on safeguarding vulnerable adults. They were aware of how to respond and what to do if there were concerns about a person's safety.

People living in the home felt safe and well cared for

- Overall we found that Enstone House was meeting this essential standard.

Outcome 08: Cleanliness and infection control

What the outcome says

Providers of services comply with the requirements of regulation 12, with regard to the Code of Practice for health and adult social care on the prevention and control of infections and related guidance.

What we found

Our judgement

The provider is compliant with Outcome 08: Cleanliness and infection control

Our findings

What people who use the service experienced and told us

People told us that the home was cleaned regularly and that their rooms were cleaned when they wanted them to be cleaned.

Other evidence

Staff in the home told us that they followed the Department of Health's code of practice for health and adult social care on the prevention and control of infections and related guidance. Copies of the document were available in the office. The staff handbook contained detailed information on the code of practice. All staff had been trained in practices for stopping the spread of infection. The manager undertook a monthly audit to identify any potential areas of risk. As a result of the recent audit, and in consultation with cleaning staff and relatives, the home had made some changes. Including deep cleaning being moved from weekly to monthly, the supplier of cleaning products had been changed in order to reduce the number of different products used and the home no longer used bars of soap, all soap was now in liquid form.

The cleaning team had weekly and monthly work sheets which included scheduled deep cleaning and steam cleaning routines. Staff had protective clothing when they were cleaning. Staff wore aprons and gloves when providing personal care. Hand wash gel was provided at various points throughout the home. All sinks had good practice hand-wash information on a visual poster.

The home operated a system where all laundry and clinical waste was separated and bagged for disposal. Where a person had been identified as at risk of having or spreading infection, advice was taken from the district nurse or general practitioner.

Our judgement

Staff in the home had had training in the prevention and management of infection control. The home was clean and hygienic and practices were based on the Department of Health code of practice for the management and prevention of infection.

- Overall we found that Enstone House was meeting this essential standard.

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

People told us that they liked the improvements that had been made to the home. People told us that they liked their room and that they had their own things around them.

Other evidence

The home had undergone a major extension and refurbishment programme. The home provided 26 single rooms, 14 of these had en suite facilities. The home had four double rooms and one of these had en suite facilities. The double rooms were used for single occupancy, for couples or for those wishing to share.

All equipment used in the home had current safety certificates in place. The home had sufficient toilets and bathrooms to meet the needs of people living there. The home was fully accessible to those with limited mobility.

The building furnishings and fabrics appeared to be finished to a high standard.

The building and grounds were well maintained. The home had a full time handy person to do minor maintenance. All other major work was undertaken by relevant professionals. The home had emergency procedures in place in the event of a major emergency, such as the long term failure of gas, electricity and water. The home in partnership with the fire brigade had an evacuation plan in place for all parts of the building. The plans included what to do and who to contact should fire break out. The home sent us a copy for our files.

Our judgement

The home provided an appropriate environment for the people who lived there. It was well maintained, and the design and layout allowed people to move easily around the home.

- Overall we found that Enstone House was meeting this essential standard.

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

People told us that staff were available to provide care to them and that they did not have to wait long for assistance and help. Staff were said to be cheerful and very helpful.

Other evidence

The home had a recruitment process that ensured that only those eligible and capable to work in the home were employed. The home advertised all vacancies, and prospective applicants completed an application form. References were taken up including the last employer. When people had been given a job offer they undertook an in house induction programme. This programme included information about how they were expected to conduct themselves. New staff were supervised by a more experienced member of staff until they were assessed as capable to work on their own.

On the day of the visit there was a manager, one senior, four carers, a chef and a cleaner. People worked in 12 hour shifts by agreement. We spoke to three members of staff who told us that they enjoyed working in the home. Two had previous care experience and one had no previous experience. All three staff members said they had an induction programme, which they felt equipped them to do their job. Staff said they felt supported by the senior staff. Staff we spoke to told us that they attended a range of training. Staff were given the opportunity to go on to do the National Vocational Qualification in care. This is an external nationally recognised qualification in care. Staff told us that that they felt that the home offered a high standard of care and that they would recommend it to family and friends. They told us that they could go to senior staff

for help or advice. A senior member of staff was available throughout the day and night. The home had a staff bank system for covering staff absence and rarely used agency staff. The bank staff comprised staff that were available to work in a flexible way or for permanent staff who worked overtime.

Our judgement

Staff were recruited, trained, managed and supported to provide care in a professional manner taking into account the individuals need for privacy, respect and dignity.

- Overall we found that Enstone House was meeting this essential 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

People told us they were often asked to comment on the quality of the care. They told us that they had not had the need to complain. They did however; know how to complain and who to complain to.

Other evidence

The homes manager talked to people who used the service on a regular basis. Comments both positive and negative were taken on board. Where negative comments had been made, steps were taken to address these issues. Questionnaires were sent out once a year. The last one was sent out in July 2010 and one was due to go out in July 2011. The results of the last survey gave an overall rating of excellent for satisfaction with the home. Senior managers made regular unannounced visits in order to check a range of things within the home. This always included areas such as risk relating to peoples health, welfare and talking to people who used the service.

The last senior manager's visit identified that the home needed to improve the way it recorded people's wishes in the event of end of life care. Also where the person's preference was not to be resuscitated this was clearly documented and authenticated and held on file.

Staff were informed that the continence nurse would be coming in to assess all people new to the home and also to review others. Checks were also made for staff training and supervision. Senior managers observed care being given. Staff were praised for giving care in a respectful and dignified way.

The home identified and monitored any areas of risk to people working or living in the home. Where risk was identified, an assessment and plan to manage the risk was put in place. The home took advice from external professionals for any areas they were unsure about. For example we were given a copy of the homes evacuation plan which they had drawn up with the fire brigade.

The home held residents meetings which were well attended. They were held every three or four months and usually incorporated a social event. The last one held in April 2011 highlighted the need for a change in menu, the purchase of a greenhouse, the communal garden project and agreed an itinerary of outings for the year.

The home had a complaints procedure which was explained in the information pack given to people new to the service. The complaints policy was also prominently displayed on the notice board in the hall.

Staff were also asked to make comments both positive and negative in supervision sessions or they could choose to do it anonymously. The home had not had any complaints in the last six months

Our judgement

The home had a number of systems in place to monitor the quality of care provided. These included risk assessments, surveys of people who lived in the home, quality monitoring visits by the proprietor, the complaints system and through residents meetings. The outcomes from these systems were used to improve or develop the service provided.

- Overall we found that Enstone House was meeting this essential standard.

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.

When making our judgements about whether services are meeting essential standards, we decide whether we need to take further regulatory action. This might include discussions with the provider about how they could improve. We only use this approach where issues can be resolved quickly, easily and where there is no immediate risk of serious harm to people.

Where we have concerns that providers are not meeting essential standards, or where we judge that they are not going to keep meeting them, we may also set improvement actions or compliance actions, or take enforcement action:

Improvement actions: These are actions a provider should take so that they **maintain** continuous compliance with essential standards. Where a provider is complying with essential standards, but we are concerned that they will not be able to maintain this, we ask them to send us a report describing the improvements they will make to enable them to do so.

Compliance actions: These are actions a provider must take so that they **achieve** compliance with the essential standards. Where a provider is not meeting the essential standards but people are not at immediate risk of serious harm, 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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