

Review of compliance

Swanton Care and Community Ltd
Eden View

Region:	Eastern
Location address:	Eden View High Street Bottisham Cambridgeshire CB25 9BB
Type of service:	Care Home with Nursing (CHN)
Date the review was completed:	11/01/2011
Overview of the service:	<p>Eden View provides care for people who have acquired a brain injury or a neurological condition requiring a period of rehabilitation.</p> <p>Eden view is registered to provide care for up to ten people.</p> <p>The manager is not registered and we have imposed a compliance condition for the manager to be registered by 31 March 2011.</p>

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

What we found overall

We found that Eden View was not meeting one or more essential standards. Improvements are needed.

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

Why we carried out this review

We carried out this review because concerns were identified in relation to:

- Management of medicines
- Supporting workers
- Assessing and monitoring the quality of service provision

How we carried out this review

We reviewed all the information we hold about this provider, surveyed people who use services, carried out a visit on 31 December 2010, observed how people were being cared for, talked with people who use services, talked to staff and checked the provider's records.

What people told us

Some people were unable to communicate verbally and we needed staff to help us understand. One person indicated they were happy in the home, another that there were things to do. One person who was able to communicate verbally told us "The staff are very friendly, I love it here. Staff are very kind and I feel safe" One person told us that they do some medical procedures for themselves but other medication is administered by staff. The person was very happy with this arrangement.

What we found about the standards we reviewed and how well Eden View was meeting them

Outcome 9: People should be given the medicines they need when they need them, and in a safe way

There are clear procedures in place for the recording of when medicines are given to a person. However the system used to reflect non completion of medication administration records (MAR) charts was not in line with the Health and Social Care Act 2008 Regulation 13 or the NMC Code of Conduct. It is important that records are completed correctly to ensure the health and wellbeing of people who use the service.

- Overall, we found that improvements are needed for this essential standard.

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

Staff felt well supported and are receiving the training they need to enable them to provide a high level of care to people living in the home.

- Overall, we found that Eden View 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

People living in the home are supported to make decisions about their care and treatment, which includes them providing training to staff about their needs.

- Overall, we found that Eden View was meeting this essential standard.

Action we have asked the service to take

We have asked the provider to send us a report within 7 days of them receiving this report, setting out the action they will take to improve. We will check to make sure that the improvements have been made.

Other information

There are no outstanding improvement, compliance or enforcement actions in relation to this provider from any 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 9: Management of medicines

What the outcome says

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

There are minor concerns with outcome 9: Management of medicines

Our findings

What people who use the service experienced and told us

We spoke to one person during our visit on 31 December 2010 who said that staff administer medication but there are some areas he/she is able to complete for his/her self. This person said they had assisted staff with training in one area of his/her medical care to ensure the correct and most comfortable method was used.

Other evidence

Qualified nurses administer all medication. One nurse told us that they had received all the necessary training and understood the process for recording the administration of medication and the use of medication administration records. Staff described the method used in the home for dealing with blank spaces on the medication administration records. This was not in line with the regulations under the Health and Social Care Act or the NMC Code of Conduct for nursing staff. We spoke to the manager, who confirmed that what we had been told was a correct description of practice in the home. Action was taken immediately by the manager to use a different method of recording the omissions. Her manager said this would be reported to the provider.

We also talked to the manager about the administration and recording of prescribed creams and lotions. We were told that an improved and more detailed recording system would be introduced immediately.

Our judgement

There are clear procedures in place for the recording of when medicines are given to a person. However the system used to reflect non completion of the records was not in line with the Health and Social Care Act Regulation 13 or the NMC Code of Conduct. It is important that records are completed correctly to help ensure the health and wellbeing of people who use the service.

This means the location is not compliant with this outcome.

A compliance action will be placed.

Outcome 14: Supporting workers

What the outcome says

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 workers

Our findings

What people who use the service experienced and told us

People we spoke with said "Staff are very kind. I feel safe" and "They listen to me". One person told us that they had been involved with providing training around a specific area of their care and this had worked well for the person and the staff involved.

Other evidence

During our visit on 31 December 2010, we observed staff when they were assisting people. We saw that staff were competent and caring.

We spoke to care staff on duty who said that they felt supported to do their jobs through a good induction and training programme as well as by the manager and her manager. We spoke to the nurse on duty who also said that training was available to her and that the manager was very supportive.

Care staff said they could speak to the manager whenever they wanted. They were aware that if they had any concerns they could, alternatively, speak to a more senior manager or other nursing staff in the home.

The manager said that she had not started a rolling programme of supervision but did see all staff on duty every day. She said that most people who worked night duty also did some days and therefore she saw them on those day shifts.

We discussed, with the manager, an accident that had occurred with a carer and

how they had been supported through that.

Our judgement

Staff feel well supported and are receiving the training they need to enable them to provide the care and treatment people living in the home need.

This means the location is judged to be compliant with 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
Some of the people we spoke with during our visit on 31 December 2010 said "I love it here" and " There is nothing to complain about". Where people were unable to tell us their views verbally, for example as a result of limited communication or poor cognitive ability, we observed the care provided for them. We saw that staff always told them what was happening and asked their opinion. Care staff told us that they can interpret body language and that they also ask relatives about any specific 'codes' the person uses to communicate.

Other evidence
The manager said that, because the home is so small, she speaks each day with every person living there. She explained that she does not have formal meetings since she sees everyone every day and can deal with any issues immediately. This means there is no formal method being used to demonstrate how feedback is used to develop or improve the service.

Our judgement
People living in the home are supported to make decisions about their care and

treatment, which includes them providing training to staff in relation to specific medical needs. There should be a formal system and method to assess and monitor the quality of service provision.

An improvement action will be made.

The location is judged to be compliant with this outcome..

Action

we have asked the provider to take

Improvement actions

The table below shows where improvements should be made so that the service provider **maintains** compliance with the essential standards of quality and safety.

Regulated activity	Regulation	Outcome
Accommodation for persons who require personal or nursing care	10 Assessing and monitoring the quality of the service provision	16 Assessing and monitoring the quality of the service provision
Treatment of disease, disorder and injury Diagnostic and screening procedures	Why we have concerns: People living in the home are supported to make decisions about their care and treatment, which includes them providing training to staff in relation to specific medical needs. There must be a formal system and method to assess and monitor the quality of service provision.	

Compliance actions

The table below shows the essential standards of quality and safety that **are not being met**. Action must be taken to achieve compliance.

Regulated activity	Regulation	Outcome
Accommodation for persons who require personal or nursing care	13 Management of medicines	9 Management of medicines
Treatment of disease, disorder and injury Diagnostic and screening procedures	How the regulation is not being met: There are clear procedures in place for the recording of when medicines are given to a person; however, the system used to reflect non completion of medication administration records was not in line with	

	the Health and Social Care Act 2008 Regulation 13 or the NMC Code of Conduct. It is important that records are completed correctly to help ensure the health and wellbeing of people who use the service.
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The provider must send CQC a report that says what action they are going to take to achieve compliance with these essential standards.

This report is requested under regulation 10(3) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010.

The provider's report should be sent to us within 7 days of this report being received.

Where a provider has already sent us a report about any of the above compliance actions, they do not need to include them in any new report sent to us after this review of compliance.

CQC should be informed in writing when these compliance actions are complete.

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 Adult 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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