

Review of compliance

Sisters of Nazareth Nazareth House	
Region:	North West
Location address:	Scholes Lane Prestwich Manchester M25 0NU
Type of service:	Care home service with nursing
Date the review was completed:	11/05/2011
Overview of the service:	<p>Nazareth House is a purpose built home that is attached to the convent of the Sisters of Nazareth. It is situated in its own large beautiful gardens, quite secluded but within easy reach of public transport and the motorway network. There is plenty of car parking and the home is only a short distance from Prestwich Village.</p> <p>The home is registered to care for up to 60 people who require nursing or residential care. People of all religious faiths are welcomed.</p>

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

What we found overall

We found that Nazareth House was meeting all the essential standards of quality and safety we reviewed.

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 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 11 May 2011, observed how people were being cared for, talked to people who use services, talked to staff, checked the provider's records, and looked at records of people who use services.

What people told us

The people that we spoke to about the care and services at Nazareth House were complimentary about the staff and the care being provided. They told us they felt safe and that the staff were very thoughtful, kind and respectful.

Residents also told us that they drew great comfort from the fact that there was a chapel attached to the home and that they could visit the chapel and attend services as often as they wanted to.

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

Outcome 1: People should be treated with respect, involved in discussions about their care and treatment and able to influence how the service is run

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

The residents are treated with respect and are given lots of support and opportunities to make sure that their social and religious needs are met.

Outcome 2: Before people are given any examination, care, treatment or support, they should be asked if they agree to it

- Overall, we found that Nazareth House was meeting this essential standard. Procedures are in place to ensure that consent to care and treatment is sought from the residents or from the people acting on their behalf.

Outcome 4: People should get safe and appropriate care that meets their needs and supports their rights

- Overall, we found that Nazareth House was meeting this essential standard. Care plans and care practices ensure that the residents' needs are met in a very safe, caring and dignified way.

Outcome 5: Food and drink should meet people's individual dietary needs

- Overall, we found that Nazareth House was meeting this essential standard. People receive adequate food and drink. This ensures that their nutritional needs are being met.

Outcome 6: People should get safe and coordinated care when they move between different services

- Overall, we found that Nazareth House was meeting this essential standard. The residents have access to other health and social care services and systems are in place to make sure that information is passed on when their care is transferred to another service.

Outcome 7: People should be protected from abuse and staff should respect their human rights

- Overall, we found that Nazareth House was meeting this essential standard. Arrangements are in place to help safeguard people from abuse.

Outcome 8: People should be cared for in a clean environment and protected from the risk of infection

- Overall, we found that Nazareth House was meeting this essential standard. People live in a clean environment and systems are in place to prevent, detect and control the spread of infection.

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

- Overall, we found that Nazareth House was meeting this essential standard. The management of medicines is safe, ensuring that the residents receive their medicines as prescribed.

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

- Overall, we found that Nazareth House was meeting this essential standard. People live and work in safe, accessible surroundings.

Outcome 11: People should be safe from harm from unsafe or unsuitable equipment

- Overall, we found that Nazareth House was meeting this essential standard. Equipment, aids and adaptations are available to meet the needs of the residents.

Outcome 12: People should be cared for by staff who are properly qualified and able to do their job

- Overall, we found that Nazareth House was meeting this essential standard. The residents are cared for by staff that are safely recruited, suitably qualified and have the competencies to be able to care for people properly and safely.

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

- Overall, we found that Nazareth House was meeting this essential standard. Sufficient staff with the right qualifications, experience and skills are available to meet the needs of the residents.

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

- Overall, we found that Nazareth House was meeting this essential standard. Systems are in place to ensure that staff are properly trained, supported and supervised.

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

- Overall, we found that Nazareth House was meeting this essential standard. Systems are in place for gathering and acting upon information about the quality and safety of the service provided.

Outcome 17: People should have their complaints listened to and acted on properly

- Overall, we found that Nazareth House was meeting this essential standard. The complaints procedure is readily available and people are confident that their concerns will be listened to and acted upon.

Outcome 21: People's personal records, including medical records, should be accurate and kept safe and confidential

- Overall, we found that Nazareth House was meeting this essential standard. Accurate personalised care records are kept securely.

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 1: 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 1: Respecting and involving people who use services.

Our findings

What people who use the service experienced and told us

During the visit we spoke to two residents and a relative. Both of the residents that we spoke to understood about their care and treatment. They told us that they had been involved in the planning of their care.

Both residents told us that they drew great comfort from the fact that they could visit the chapel and attend services as often as they wanted to.

Other evidence

Whilst visiting one of the units we watched how staff offered assistance to the residents and how they interacted with them. Staff spoke to the residents in a quiet and respectful way. The atmosphere was very relaxed.

We looked at two care records to see if the residents, or relatives acting on their behalf, had been involved in decisions relating to their care and treatment. The records showed that the resident or family were involved.

An activities organiser is employed at the home to make sure that, as far as possible, people throughout the home have their social care needs met. A list of the social activities that are available is displayed on the notice board near to the

reception area and the large function lounge.

The home has a small 'tuck shop' that is organised and staffed by some of the residents. This helps the residents keep their independence, as they can shop for toiletries, drinks, greeting cards, sweets and chocolates.

Great emphasis is placed on ensuring that the religious and cultural needs of the residents are met. The home has a chapel attached to the main building and church services are held at least daily. Residents, relatives and people from the outside community are welcomed into the chapel.

The provider told us that brochures on religious traditions are available for the staff. This serves as a reference so that they are able to meet the different religious and cultural needs that some of the residents may have.

Our judgement

The residents are treated with respect and are given lots of support and opportunities to make sure that their social and religious needs are met.

Outcome 2: Consent to care and treatment

What the outcome says

This is what people who use services should expect.

People who use services:

- Where they are able, give valid consent to the examination, care, treatment and support they receive.
- Understand and know how to change any decisions about examination, care, treatment and support that has been previously agreed.
- Can be confident that their human rights are respected and taken into account.

What we found

Our judgement

The provider is compliant with outcome 2: Consent to care and treatment

Our findings

What people who use the service experienced and told us
The residents that we spoke to told us that they had been involved in the planning of their care and therefore they felt that they had consented to their care and treatment.

Other evidence
As part of this compliance review we requested that the provider send us information about how they ensure that people who use the service, or those acting on their behalf, are involved in making important decisions about their care, treatment and support. We were told that the care plans are discussed with the residents and their families where possible. We saw evidence of this in the care plans that we looked at.

One of the residents told us that they understood why they had been moved from a residential area of the home to one of the nursing units. The resident told us that staff had explained that, because of a change in their medical condition and treatment, the move was necessary to ensure that their needs could be safely met by the qualified nurses who were on duty 24 hours a day.

We were shown the document that is in use to ensure that staff understand what 'consent to care and treatment' means. It is a very detailed document that explains

clearly what consent is, who can give consent, and the legal issues surrounding a person's lack of capacity to give consent.

We also saw the training plan that showed Mental Capacity Act 2005 training is being delivered to the staff. In brief, this Act requires that a decision to act on someone's behalf should only be taken where the person lacks capacity and where such actions are in that person's best interest.

Our judgement

Procedures are in place to ensure that consent to care and treatment is sought from the residents or from the people acting on their behalf.

Outcome 4: 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 4: Care and welfare of people who use services.

Our findings

What people who use the service experienced and told us
The residents that we spoke to were very complimentary about the care they received. Some of the comments were:
“I am well looked after”. “I feel very safe here”. “They know what is wrong and how to look after me”.

Other evidence
As part of this compliance review we requested that the provider send us information about how the service was ensuring that people were receiving safe care and treatment that meets their needs and protects their rights.
The provider informed us that people were assessed before they were admitted to Nazareth House to ensure that their individual needs could be met. We looked at two of the assessments. They were detailed and gave a clear indication of what the residents could do for themselves and what they needed help and support with.
Once the assessment has been done and the person is admitted to the home, a care plan is put into place. A care plan details the individual care and support needs that a person may have and shows how those needs are to be met by the staff.
A computerised system is in place for the care plans. The care plans that we looked at contained a lot of information to show how the residents were to be cared for. The Manager told us that it was their intention to further improve the care plans by adding a lot more information about the residents’ daily routines.
The care plans that we looked at had recently been reviewed. A review is when a

care plan is checked regularly by the staff so that any change in a person's condition can be identified and action taken if necessary.

The care records also detailed if the person was at risk of harm from any hazard in the environment, equipment, or from any clinical condition. These are documented as risk assessments.

The risk assessments that we looked at provided detailed information to help ensure the safety of the resident.

We visited four residents in their bedrooms to see if they were being cared for properly. They all looked clean, comfortable and well cared for. Specialist equipment was in place, such as pressure relieving mattresses and cushions.

As part of this compliance review we requested that the provider send us information about how the service was caring for people who were very ill and at the end of their life.

The provider told us that the staff have a good relationship with the Palliative Care Nurse Specialist. We saw evidence of this in one of the care records that we looked at.

Our judgement

Care plans and care practices ensure that the residents' needs are met in a very safe, caring and dignified way.

Outcome 5: 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 5: Meeting nutritional needs.

Our findings

What people who use the service experienced and told us
The residents told us that the food was “good”. A resident did say that, at times however, there seems to be a lot of “soft food”.

Other evidence
We went into the dining room on one of the nursing units to look at what was being served for lunch.
The meals were being served from a heated trolley and there was a choice of main meal and dessert. The meals were nicely presented and the portions looked ample. Hot and cold drinks were being served.
Staff told us that food is always available out of hours so that any resident wanting a snack can have one. Staff also told us that nobody was receiving a special diet at that time, but special diets were provided when needed.

Whilst we were on the unit we saw that a dietician was visiting to check on the progress of a resident who was being fed artificially by means of a tube inserted into their stomach. The dietician was making sure that the resident was continuing to get the correct amount of nutritional feed and fluids for their needs.
The care records that we looked at showed that the residents are risk assessed to see if they need support with their food and fluid intake. The care records also showed that residents are weighed regularly and action is taken, such as referral to a dietician or GP, when weight loss is identified.

Our judgement
The residents receive adequate food and drink. This ensures that their nutritional needs are being met.



Outcome 6: Cooperating with other providers

What the outcome says

This is what people who use services should expect.

People who use services:

- Receive safe and coordinated care, treatment and support where more than one provider is involved, or they are moved between services.

What we found

Our judgement

The provider is compliant with outcome 6: Cooperating with other providers.

Our findings

What people who use the service experienced and told us
A resident told us about a recent hospital appointment that they had been to and how staff made sure the appointments were not missed.

Other evidence
The provider sent us information telling us how they worked in cooperation with other professionals to ensure that people living at Nazareth House receive appropriate care and support.
The care records that we looked at showed when there had been contact with other health care professionals.
We asked the Manager to tell us how, in the event of a resident being transferred to hospital or to another care service, information about the resident is passed on. We were told that a copy of the residents' care records is printed off the computer and sent with the resident. The care records include their personal details, their medical condition, the present reason for admission or transfer and a list of their medication.

Our judgement
The residents have access to other health and social care services and systems are in place to make sure that information is passed on when their care is transferred to another service.

Outcome 7: 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 7: Safeguarding people who use services from abuse.

Our findings

What people who use the service experienced and told us
Other evidence
The Manager told us that staff receive regular training in the safeguarding of vulnerable adults. A look at the staff training files confirmed that training in safeguarding has been undertaken.
We were told by the Manager that documents to guide staff about the safeguarding procedures to follow are in place on the each of the units.
We asked four care staff to confirm if they had received training in the safeguarding of vulnerable people and asked them to tell us what they would do if they suspected abuse had occurred.
They told us that they had received training. What we were told also confirmed that they have a good understanding of what action they would need to take in the event of abuse being suspected or actually happening.
No safeguarding alerts have been made to us about this service in the last 12 months.
Our judgement
Arrangements are in place to help safeguard people from abuse.

Outcome 8: 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 8: Cleanliness and infection control.

Our findings

What people who use the service experienced and told us
Other evidence
We did not go into every area of the home but the corridors, toilets, bedrooms, lounges and dining rooms that we looked at were clean and there were no unpleasant smells.
We saw that staff were wearing protective clothing of disposable aprons and gloves and that hand washing facilities are in place in bedrooms, bathrooms and toilets. This helps prevent the spread of infection.
We looked at the staff training files and saw that staff have received training in infection control.
The Manager showed us the Department of Health's publication document on the prevention and control of infections that the staff at the home refer to for guidance.
We were told that one of the senior nurses has the overall responsibility for ensuring that staff follow the correct infection control procedures.
Our judgement
People live in a clean environment and systems are in place to prevent, detect and control the spread of infection.

Outcome 9: 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 9: Management of medicines.

Our findings

What people who use the service experienced and told us
Other evidence
We looked at how the medicines were being handled on one of the units. A safe system is in place.
The medicine room is kept locked and the medication keys are held securely. Medicines, including controlled drugs are securely stored.
The medication administration records are filled in accurately and the systems for ordering and returning medicines are safe.
The training records we looked at showed that staff who handle medicines receive regular medication management training.
The staff told us that, at present, none of the residents on the unit are looking after their own medicines.
Our judgement
The management of medicines is safe, ensuring that the residents receive their medicines as prescribed.

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
Other evidence
Every resident has their own single bedroom, the majority having their own en-suite shower and toilet.
The toilets, en-suite showers and bathrooms throughout the home have aids and adaptations to assist people with disabilities.
To make sure that people remain as safe as possible, people have to use the intercom at the main entrance to gain entry to the home. During the day a receptionist is on duty and in the late evening and during the night a CCTV monitor, placed on one of the units, allows staff to see who is at the door.
As part of this compliance review we requested that the provider send us information to demonstrate that people who use the service are kept safe.
We were told by the Manager that any accidents and incidents that happen are looked at straight away. They are discussed with senior managers within the organisation to ensure that the action taken to prevent any reoccurrence is sufficient and appropriate.
We looked at the staff training files and saw that staff have received training in health and safety.
We also looked at the maintenance record books. They showed that the equipment and services within the home are serviced on a regular basis. This helps ensure the safety and well being of everybody within the home.

Our judgement

People live and work in safe, accessible surroundings.

Outcome 11: Safety, availability and suitability of equipment

What the outcome says

This is what people should expect.

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

- Are not at risk of harm from unsafe or unsuitable equipment (medical and non-medical equipment, furnishings or fittings).
- Benefit from equipment that is comfortable and meets their needs.

What we found

Our judgement

The provider is compliant with outcome 11: Safety, availability and suitability of equipment.

Our findings

What people who use the service experienced and told us
Other evidence
Most of the residents being cared for on one of the units have very intensive nursing needs. Whilst walking around the unit we saw that there was lots of specialised equipment in place to meet the residents' needs. We saw that hoists were being used to move the residents safely.
Residents who were at risk of developing pressure sores were being cared for on a special type of bed that helps staff position people more easily. Pressure relieving mattresses and cushions were also on their beds or chairs.
Bathrooms, en-suite showers and toilets have aids and adaptations to assist in safe moving.
We looked at a staff training plan that showed us staff have received training in moving and handling. This ensures the safety of everybody involved.
Our judgement
Equipment, aids and adaptations are available to meet the needs of the residents.

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
Other evidence
During this visit we did not look at the paperwork that showed how management recruit their staff. Previous inspection visits have shown that management recruit their staff properly and safely.
We did, however, ask the Manager to tell us how they make sure that they employ people who are fit to do the job. The Manager told us that they have a very safe staff recruitment procedure in place. They make sure that they take up references and send for a criminal records check (CRB) on all the staff. This helps to protect residents from being cared for by unsuitable people.
Care staff confirmed to us that they were recruited safely.
During the visit, we spent time talking to some of the care staff who confirmed that they have regular training sessions so that they can do their jobs safely.
We were shown the detailed training programme that is in place for all the staff employed at Nazareth House.
Our judgement
The residents are cared for by staff that are safely recruited, suitably qualified and have the competencies to be able to care for people properly and safely.

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
The people that we spoke to were complimentary about the staff. Some of the comments they made about the staff were:
“The staff are very thoughtful, kind and respectful”. “Staff are fantastic”.

Other evidence
We were told by the care staff that there were 20 residents on the unit and that 18 of the 20 needed 24 hour nursing care. The unit is staffed by qualified nurses who are supported by suitably trained care staff.
The Manager and some of the care staff told us that the residents had a lot of nursing needs and were highly dependent. Some care staff told us they felt that, at times, the staffing levels were not high enough to meet the needs of the residents. We discussed this with the Manager who told us that she has undertaken an assessment of the residents’ needs and feels that the staffing levels are adequate. The Manager told us that she visits each unit in the home daily, to talk with the staff and ensure that the residents are being well cared for.
During our visit we saw that the residents were not being kept waiting for assistance, call bells were being answered promptly, and the medicines were given out on time.

Our judgement
Sufficient staff with the right qualifications, experience and skills are available to meet the needs of the residents.

Outcome 14: Supporting 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 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
Other evidence
The Manager told us that all staff receive induction training when they first start their job. The care staff that we spoke to confirmed that they had received an Induction Workbook when they first started their job.
The Manager showed us the Induction Workbook. It contains lots of information to help staff understand what is expected of them and gives them basic information to ensure that residents and staff are kept as safe as possible.
The Manager told us that she regularly observes and monitors staff practice when they are delivering care. This is to ensure that the residents are being cared for safely and properly.
We were told that staff have regular supervision meetings so that they can discuss their progress, as well as being able to discuss their learning and development needs.
We were shown a list of some of the documents that are in place to help protect the safety and well being of the staff. These include a policy on whistle-blowing which allows staff to raise concerns in confidence. There is also a policy on bullying and harassment.
Our judgement
Systems are in place to ensure that staff are properly trained, supported and supervised.

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
Other evidence
As part of this compliance review we requested that the provider send us information about how they review and monitor the quality of the service that the residents receive.
The provider told us that there are a number of systems in place for gathering and recording accurate information about the quality of the services provided.
We were told that regular checks are undertaken on all parts of Nazareth House to ensure that it is kept safe. In addition, checks are undertaken on records, for example, care and medication records, personnel files, accident/incident reports and complaints.
We were told that residents meetings are held regularly to enable them to express their views on the service they receive and to make suggestions for improvements.
We were also told that surveys are sent out every year to residents and their relatives. This is to ask for their opinions on the care and services provided.
Our judgement
Systems are in place for gathering and acting upon information about the quality and safety of the service provided.

Outcome 17: Complaints

What the outcome says

This is what people should expect.

People who use services or others acting on their behalf:

- Are sure that their comments and complaints are listened to and acted on effectively.
- Know that they will not be discriminated against for making a complaint.

What we found

Our judgement

The provider is compliant with outcome 17: Complaints. .

Our findings

What people who use the service experienced and told us
The residents that we spoke to told us that if they had to make a complaint, they would know who to speak to.
One resident told us: "I have no doubt that it would be sorted".

Other evidence
We saw the complaints procedure displayed throughout the home. It outlines clearly the procedure to follow. The complaints procedure is also included in the Statement of Purpose document that is displayed in every resident's bedroom.
No complaints have been made to us about this service in the last 12 months.

Our judgement
The complaints procedure is readily available and people are confident that their concerns will be listened to and acted upon.

Outcome 21: Records

What the outcome says

This is what people who use services should expect.

People who use services can be confident that:

- Their personal records including medical records are accurate, fit for purpose, held securely and remain confidential.
- Other records required to be kept to protect their safety and well being are maintained and held securely where required.

What we found

Our judgement

The provider is compliant with outcome 21: Records.

Our findings

What people who use the service experienced and told us
Other evidence
Individual records are kept in respect of each resident. The records about care, treatment and support are regularly updated and any change in a person's condition is recorded.
The care records are stored on a computer system. The system is password protected and each staff member has their own password. This restricted access helps to ensure that confidentiality of records is maintained. Any paper copies of the care records are stored securely in a locked room.
Our judgement
Accurate personalised care records are kept securely.

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

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