

Review of compliance

A Charles Thomas (Care) Limited Beachcomber Care Home (Nursing)

Region:	North East
Location address:	12 North Road Seaham Co Durham SR7 7AA
Type of service:	Care home service with nursing
Date of Publication:	June 2012
Overview of the service:	Beachcomber Care Home can accommodate a maximum number of 52 people with nursing or residential needs. The home is registered for the regulated activities: accommodation for persons who need personal or nursing care; treatment of disease, disorder or injury; and diagnostics and screening. The home is situated on the seafront in the town of Seaham. It is operated by A Charles Thomas (Care) Ltd.

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

Our current overall judgement

Beachcomber Care Home (Nursing) was not meeting one or more essential standards. Improvements are needed.

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, talked to staff and talked to people who use services.

What people told us

During the inspection we spoke with four people who used the service and one relative. People who used the service expressed satisfaction with the care and service that they received. Comments made by people who used the service included:

"They are very good. Staff are around to answer my buzzer. They have been very, very good."

"I get up on a morning about 7:30 which is when I want to get up."

"They look after me well here."

"Staff are helpful and always available. They took me to the shower room but I prefer a bath so they took me to the bathroom. I don't go to the residents meetings but tell the residents representative if I want to raise anything at the meeting."

We spoke to two relatives during the inspection and one relative told us, "I've come to visit my sister for the first time today and everything seems to be fine. They seem to be caring for her well, and they've kept me up to date with everything." Another relative told us, "We can visit anytime. Staff keep us informed about Mams care."

What we found about the standards we reviewed and how well Beachcomber Care Home (Nursing) was meeting them

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

The provider was meeting this standard.

People's privacy and independence were respected. People's views and experiences were taken into account in the way the service was provided and delivered in relation to their care.

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

The provider was meeting this standard.

People experienced care, treatment and support that met their needs and protected their rights

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

The provider was meeting this standard.

People who used the service were protected from the risk of abuse, because the provider had taken reasonable steps to identify the possibility of abuse and prevent abuse from happening.

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

The provider was not meeting this standard.

We judged this had a moderate impact on people using the service and action was needed for this essential standard.

We found that there were insufficient arrangements in place to ensure that staff were appropriately trained 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

The provider was meeting this standard.

We found effective systems were in place to monitor the quality of service provision so that people who use services benefit from safe quality care.

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

The provider was not meeting this standard. We judged that this had a minor impact on people using the service and action was needed for this essential standard.

People were not protected from the risks of unsafe or inappropriate care and treatment.

We found people's personal care records were not always accurate and fit for purpose

Actions we have asked the service to take

We have asked the provider to send us a report within 14 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.

Where we have concerns we have a range of enforcement powers we can use to protect the safety and welfare of people who use this service. When we propose to take enforcement action, our decision is open to challenge by a registered person through a variety of internal and external appeal processes. We will publish a further report on any action we have taken.

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 01: Respecting and involving people who use services

What the outcome says

This is what people who use services should expect.

People who use services:

- * Understand the care, treatment and support choices available to them.
- * Can express their views, so far as they are able to do so, and are involved in making decisions about their care, treatment and support.
- * Have their privacy, dignity and independence respected.
- * Have their views and experiences taken into account in the way the service is provided and delivered.

What we found

Our judgement

The provider is compliant with Outcome 01: Respecting and involving people who use services

Our findings

What people who use the service experienced and told us

People who used the service expressed satisfaction with the care and service they received and told us staff respected their choices. Comments made by people who used the service included:

"I get up on a morning about 7:30 which is when I want to get up."

"They took me to the shower room but I prefer a bath so they took me to the bathroom. I don't go to the residents meetings but tell the residents' representative if I want to raise anything at the meeting."

"I press my buzzer and tell them when I want my lunch, they could be sitting on their break but they still come."

"The staff are always polite to us."

"The staff are very good. They have been very, very good."

Other evidence

We spoke with people who used the service who told us they were able to make

choices and were involved in decisions about their care and how the home was run. There was a "Ladies and Gents" club held each week where people could give their feedback on the home to the activities coordinator. There was also a monthly residents meeting which the acting manager also attended. The people we spoke with knew about the residents meetings and told us that even if they couldn't attend they could feedback any issues through the resident representative.

People told us they had input into the activities which had been planned. For example an arts and crafts group had started after residents said they'd like to take part in one. People who used the service had been surveyed to find out their opinion on how the home was run and we saw a tasting session had been held to decide which sausages they would use for breakfast.

We saw that the majority of doors to people's rooms were open through the day and people who used the service told us they didn't mind. When we listened to staff interactions we heard staff giving people the choice of having their door left open or closed and in three of four care files we looked at we saw people had been asked if they wanted a key to their room. This meant people could maintain some independence.

During the inspection we saw charts, with people's personal details on them, had been left in bathrooms around the home. We also saw, in one of the toilets a large amount of continence pads and a list of people's names and the continence pad they used. Displaying this information in this way did not promote the dignity of people who used the service. We spoke to the acting manager who removed the list in the toilet and told us they would remove the charts in the bathroom.

We observed that people had personalised their rooms with pictures and furniture. Some people had small fridges and kettles in their rooms so were able to keep a small selection of snacks. This meant people could maintain their independence and choice about when they had a drink or snack.

Our judgement

The provider was meeting this standard.

People's privacy and independence were respected. People's views and experiences were taken into account in the way the service was provided and delivered in relation to their care.

Outcome 04: Care and welfare of people who use services

What the outcome says

This is what people who use services should expect.

People who use services:

* Experience effective, safe and appropriate care, treatment and support that meets their needs and protects their rights.

What we found

Our judgement

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

Our findings

What people who use the service experienced and told us

People who used the service expressed satisfaction with the care and service that they received. Comments made by people who used the service included:

"They look after me well here."

"If I had to go anywhere I would have chosen here, nothing is a trouble for them."

"I just love the home, I love every day, we have a good laugh"

One of the relatives we spoke with told us "They seem to be caring for her well."

Other evidence

During our visit we looked at the care records of five people who used the service. Care records were person centred and had information about the person's life and what was important to them. Care records had been signed by people who used the service or by their relatives. This showed that people had been included in, and agreed to, their plans of care.

Assessments had been carried out which highlighted people's care needs. Following assessment, care plans had been developed which detailed how to meet people's care and treatment needs. We saw care plans were very specific and included people's preferences. During our observations we saw that care plans were followed. For example we saw one care plan for food and nutrition which detailed what the person

liked to eat. We spent time with this person over lunchtime and saw that food had been prepared to meet that person's preferences.

We observed the home over lunchtime and saw that people had a pleasant dining experience. Staff supported people to eat in a respectful way, and engaged with people as they supported them. For example we saw staff describing to someone who was partially sighted what they would be eating.

An activities coordinator worked 9:30am to 4.00pm Monday to Friday. We saw from the activities plan that there were lots of activities for people to get involved with. We observed a quiz taking place which people seemed to be enjoying.

Our judgement

The provider was meeting this standard.

People experienced care, treatment and support that met their needs and protected their rights

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 spoke to people who used the service but their feedback did not relate to this standard.

Other evidence

We saw a document pinned to the main notice board in the communal corridor that explained what abuse was and what to do if someone suspected that someone was at risk of abuse. This document also had the telephone number of the local authority in it that staff could call if they had concerns about safeguarding. The acting manager told us the home was working with the local authority to provide additional guidance for staff and each staff member was working through the County Durham Local Authority safeguarding adults workbook. We saw evidence of completed workbooks in the staff files we looked at.

We spoke to four members of staff who confirmed they had received safeguarding training. They were able to describe the appropriate action to be taken if abuse was suspected and would know what to do if they saw or heard anyone living at the home being abused.

Our judgement

The provider was meeting this standard.

People who used the service were protected from the risk of abuse, because the provider had taken reasonable steps to identify the possibility of abuse and prevent

abuse from happening.

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

There are moderate concerns with Outcome 14: Supporting staff

Our findings

What people who use the service experienced and told us

We spoke to people who used the service but their feedback did not relate to this standard.

Other evidence

During our visit we spoke to staff and looked at five staff files. The files we looked at did not demonstrate that all staff training was up to date. There were a number of gaps particularly around fire training, moving and Handling, safeguarding adults, food hygiene and health and safety. For example 9 staff were out of date for fire training and 11 for moving and handling.

The training matrix we looked at did not clearly identify what training had taken place or what needed to be done. We discussed this with the acting manager who was fairly new in post and she acknowledged that the system needed to be improved.

Staff told us that supervision happened regularly, however we did not see evidence of this documented in staff records in the way the acting manager described it was done. We did not see evidence of appraisals being completed for staff and we discussed this with the acting manager who told us they were going to be done over the next few months. Following the inspection we saw evidence that appraisals had been completed for staff.

Our judgement

The provider was not meeting this standard.

We judged this had a moderate impact on people using the service and action was needed for this essential standard.

We found that there were insufficient arrangements in place to ensure that staff were appropriately trained 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

We spoke to people who used the service but their feedback did not relate to this standard.

Other evidence

We found effective systems were in place to monitor the quality of service provision so that people who use services benefit from safe quality care.

On the inspection visit we found a range of audits had been undertaken including a monthly quality assurance walk round. We saw audits carried out included infection control, waste management, environment, medication and hand hygiene and residents' surveys had been done. The provider may wish to note that a number of the audits had not been done since November 2011.

People we spoke to said that complaints get addressed straight away. We observed that complaints were logged and there was evidence that they had been dealt with. However it was not clear what action had been taken in response to some of the complaints. We discussed this with the acting manager who told us they would make sure actions taken would be recorded for all complaints.

Our judgement

The provider was meeting this standard.

We found effective systems were in place to monitor the quality of service provision so

that people who use services benefit from safe quality care.

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

There are minor concerns with Outcome 21: Records

Our findings

What people who use the service experienced and told us

We spoke to people who used the service but their feedback did not relate to this standard.

Other evidence

During our visit we looked at the care records of five people who used the service. We saw that care plans had been reviewed monthly, or when people's needs had changed. However we saw that care plans had not always been updated to reflect plans of care when people's needs had changed. For example we saw from evaluations of a nutrition care plan, that one person had recently lost weight, and a decision had been made to increase the frequency that this person was weighed, from monthly to weekly. We saw from weight charts that this person had been weighed weekly, however their nutrition care plan had not been updated to reflect this change, and still stated that they needed to be weighed monthly. This meant this person was at risk of receiving inappropriate care as their care plan was inaccurate.

We saw from two people's daily notes that they sometimes displayed challenging behaviour. We saw there was no care plan relating to their behaviour needs. This meant that their care records did not describe to staff how to support people when they displayed challenging behaviours or detail any known situations or triggers which may cause the person to become aggravated.

Another person's record had a care plan to manage the risk that they may try to leave the building however the plan did not detail specifically what staff should do to manage this situation. This meant that the person was at risk of receiving inconsistent care.

We found people's personal care records were not always accurate and fit for purpose.

Our judgement

The provider was not meeting this standard. We judged that this had a minor impact on people using the service and action was needed for this essential standard.

People were not protected from the risks of unsafe or inappropriate care and treatment. We found people's personal care records were not always accurate and fit for purpose

Action we have asked the provider to take

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 nursing or personal care	Regulation 23 HSCA 2008 (Regulated Activities) Regulations 2010	Outcome 14: Supporting staff
	How the regulation is not being met: We found that all staff had not received annual appraisals. Some shortfalls in training were identified and there was insufficient evidence that supervision was taking place.	
Diagnostic and screening procedures	Regulation 23 HSCA 2008 (Regulated Activities) Regulations 2010	Outcome 14: Supporting staff
	How the regulation is not being met: We found that all staff had not received annual appraisals. Some shortfalls in training were identified and there was insufficient evidence that supervision was taking place.	
Treatment of disease, disorder or injury	Regulation 23 HSCA 2008 (Regulated Activities) Regulations 2010	Outcome 14: Supporting staff
	How the regulation is not being met: We found that all staff had not received annual appraisals. Some shortfalls in training were identified and there was insufficient evidence that supervision was taking place.	
Accommodation for persons who require nursing or personal care	Regulation 20	Outcome 21: Records

	HSCA 2008 (Regulated Activities) Regulations 2010	
	How the regulation is not being met: We found people's personal care records were not always accurate and fit for purpose	
Diagnostic and screening procedures	Regulation 20 HSCA 2008 (Regulated Activities) Regulations 2010	Outcome 21: Records
	How the regulation is not being met: We found people's personal care records were not always accurate and fit for purpose	
Treatment of disease, disorder or injury	Regulation 20 HSCA 2008 (Regulated Activities) Regulations 2010	Outcome 21: Records
	How the regulation is not being met: We found people's personal care records were not always accurate and fit for purpose	

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 14 days of the date that the final review of compliance report is sent to them.

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 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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