

Review of compliance

Quality Care UK Limited Lavender House	
Region:	Yorkshire & Humberside
Location address:	69 Welton Road Brough Hull East Riding of Yorkshire HU15 1NU
Type of service:	Care home service without nursing
Date of Publication:	April 2012
Overview of the service:	Lavender House in the centre of Brough, provides accommodation for up to 32 older people, some of whom may have a memory impairment. Most bedrooms are single en-suite. There are two lounges, one with dining space. There are four bathrooms. A passenger lift gives access to the upper floor and some rooms are up a couple more stairs. The front of the house has

	<p>gardens and car parking. An extension is being built to add another 22 bedrooms and facilities.</p>
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Summary of our findings for the essential standards of quality and safety

Our current overall judgement

Lavender House was meeting all the essential standards of quality and safety but, to maintain this, we have suggested that some improvements are made.

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

Why we carried out this review

We carried out this review to check whether Lavender House had made improvements in relation to:

Outcome 02 - Consent to care and treatment
Outcome 04 - Care and welfare of people who use services
Outcome 10 - Safety and suitability of premises
Outcome 11 - Safety, availability and suitability of equipment
Outcome 12 - Requirements relating to workers
Outcome 14 - Supporting staff
Outcome 21 - Records

How we carried out this review

We reviewed all the information we hold about this provider, carried out a visit on 12 March 2012, looked at records of people who use services, talked to staff and talked to people who use services.

What people told us

We asked people if they made their own choices about daily living and they told us they did whenever possible. One person told us they needed assistance to get up in the morning and that staff had not been to help them early enough that day.

We did not discuss any of the outcomes directly with people, but we passed the time of day with them as we looked round the home. They were generally cheerful.

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

Outcome 02: Before people are given any examination, care, treatment or support, they should be asked if they agree to it

People experienced opportunities to give valid consent to the care, treatment and support

they received. People were confident that their human rights had been respected and taken into account.

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

People experienced effective, safe and appropriate care, treatment and support that met their needs and protected their rights. Not all documents were kept up to date or showed that peoples' overall demeanour and life activities were clearly recorded.

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

People had experienced safe, accessible and suitable surroundings that promoted their well-being. The upgrading of the old house had not been carried out as the provider was waiting until the extension was completed.

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

People were protected from and were not at risk of harm from unsafe or unsuitable equipment. Oxygen signage had been put up in the places where oxygen was in use, but further signage was needed on the doors to warn people on entry.

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

People had been safe and their health and welfare needs had been met by staff that had been security checked for their posts.

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

People were safe and their health and welfare needs were met by competent staff.

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

We were confident that personal records including medical records had been accurately maintained in most cases, had been fit for purpose and had been held securely and remained confidential.

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 02: 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 02: Consent to care and treatment

Our findings

What people who use the service experienced and told us

We did not speak with people directly about this outcome, but as we looked round the home we did ask people if they made their own choices on a daily basis. They told us they usually got up in the morning and went to bed when they liked. We generally passed the time of day with them and they seemed to be settled and satisfied.

Other evidence

We carried out this inspection visit to check on the improvements the home had made since our last inspection in December 2011.

We spoke with the manager and we looked at some case file documents.

The manager told us she had tried to obtain signed consent to care plans since the last inspection. We saw that some new documents in case files had been signed and dated by the person they referred to. Improvements had been made.

We looked at the policies and procedures file and we saw there was no written policy on 'consent' available for staff. A policy on 'consent' would assist staff to ensure they always sought peoples' permission to be given the care and support they required.

Our judgement

People experienced opportunities to give valid consent to the care, treatment and support they received. People were confident that their human rights had been respected and taken into account.

Outcome 04: Care and welfare of people who use services

What the outcome says

This is what people who use services should expect.

People who use services:

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

What we found

Our judgement

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

Our findings

What people who use the service experienced and told us

We spoke with people as we looked round the home and one person still in their room told us the staff had not been to assist them to get up. It was mid morning. The manager was told about this.

The person said they had been given breakfast, but was unable to get up without assistance and they wanted to be assisted quite quickly.

Other evidence

We spoke with the manager and we looked at case files. We also observed interactions between the staff and people in the home.

When we looked round the home we saw that one person was requiring assistance to get up and out of bed and the manager activated their call bell for staff to attend to them. We noticed it took the staff five minutes to answer the call bell.

We saw staff helping people to the dining table, assisting them to the bathroom, and we saw the senior care worker giving out medication. Staff were using lifting equipment where needed and they were calm and focused.

We looked at case files and the care plans and saw that documents contained the information required to enable staff to meet people's care needs.

One care plan had not had the key worker notes updated for several months. Another

had one of the documents half completed and we understood the gaps to mean these areas were not applicable. Care plan diary notes were very brief and only seemed to record basic statements such as 'all cares had been given', or 'no problems, had a settled night'. Diary notes did not really tell us what people had done each day, how they had appeared or behaved, whether they had seen relatives, been out or just watched television all day.

Documents were not all properly completed and did not indicate where sections were 'not applicable'. Care plans were not audited regularly.

Our judgement

People experienced effective, safe and appropriate care, treatment and support that met their needs and protected their rights. Not all documents were kept up to date or showed that peoples' overall demeanour and life activities were clearly recorded.

Outcome 10: Safety and suitability of premises

What the outcome says

This is what people should expect.

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

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

What we found

Our judgement

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

Our findings

What people who use the service experienced and told us

We did not speak with people directly about this outcome.

Other evidence

We spoke with the manager and looked at the areas of the home we had asked to be attended to at the last inspection.

We saw that the carpet in one bedroom that needed replacing had been removed and a new one was being fitted on the day of our visit. Other carpets in corridors on the upper floor had not been replaced yet as the provider was waiting until the extension was completed.

Redecoration and replacement of toilet floors was also on hold until the extension was completed.

The upper floor bathroom had been cleared of the stored items and there were no door wedges in fire doors.

The completion of the extension would provide more lounge and dining space to enable all people in the home to sit at a dining table for their meals if they so wished.

We gave the provider approval to wait until the extension was completed before fitting new carpets, replacing toilet floors and redecorating in the old house. The provider was asked to send us a revised improvement plan with new timescales and showing when they expected to have completed the outstanding environmental work in the old house.

Our judgement

People had experienced safe, accessible and suitable surroundings that promoted their well-being. The upgrading of the old house had not been carried out as the provider was waiting until the extension was completed.

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

We did not speak with people directly about this outcome.

Other evidence

We spoke with the manager and we looked round the home.

One person required oxygen for their health needs and at the last inspection there had been no signs to warn people about oxygen being stored in the small lounge or the person's bedroom.

Signage had been requested. These were in place in the lounge and bedroom on today's visit, but we saw no evidence that warning signs had been placed on the doors as well so that people entering the rooms were warned about the presence of oxygen.

Our judgement

People were protected from and were not at risk of harm from unsafe or unsuitable equipment. Oxygen signage had been put up in the places where oxygen was in use, but further signage was needed on the doors to warn people on entry.

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

We did not speak with people directly about this outcome.

Other evidence

We spoke with the manager and looked at several staff recruitment files to check for Criminal Records Bureau (CRB) checks and start of employment dates.

The manager told us there had been two new staff since the last inspection and we saw that they had CRB checks dated February 2012.

We looked at other staff files randomly and saw that CRBs were in place dated 2006, 2010 and 2011. The manager was to contact the CRB to ask about their policy or recommendations for renewing CRB checks. We also saw that each staff members' start date had been written on the outside of their file.

The manager told us she would soon be recruiting more staff to work in the home once the extension had been completed.

Our judgement

People had been safe and their health and welfare needs had been met by staff that had been security checked for their posts.

Outcome 14: Supporting staff

What the outcome says

This is what people who use services should expect.

People who use services:

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

What we found

Our judgement

The provider is compliant with Outcome 14: Supporting staff

Our findings

What people who use the service experienced and told us

We did not speak with people directly about this outcome.

Other evidence

We spoke with the manager and we looked at staff training records.

We were told that since the last inspection the manager had completed the manager's safeguarding adult's awareness course and the safeguarding 'train the trainer's' course in February 2012.

We were also told that ten staff had completed the safeguarding adult's awareness course in February 2012. We saw some of the certificates to evidence this.

Our judgement

People were safe and their health and welfare needs were met by competent staff.

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

We did not speak with people directly about this outcome.

Other evidence

We spoke with the manager and we looked at some of the records held in the home.

We saw that documents had been completed in most cases and that improvements had been made.

We saw that one set of key worker notes had not been updated recently and that one person's care plan did not state 'not applicable' in the sections that did not apply to them.

Our judgement

We were confident that personal records including medical records had been accurately maintained in most cases, had been fit for purpose and had been held securely and remained confidential.

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 nursing or personal care	Regulation 9 HSCA 2008 (Regulated Activities) Regulations 2010	Outcome 04: Care and welfare of people who use services
	Why we have concerns: People experienced effective, safe and appropriate care, treatment and support that met their needs and protected their rights. Not all documents were kept up to date or showed that peoples' overall demeanour and life activities were clearly recorded.	
Accommodation for persons who require nursing or personal care	Regulation 15 HSCA 2008 (Regulated Activities) Regulations 2010	Outcome 10: Safety and suitability of premises
	Why we have concerns: People had experienced safe, accessible and suitable surroundings that promoted their well-being. The upgrading of the old house had not been carried out as the provider was waiting until the extension was completed.	

The provider must send CQC a report about how they are going to maintain 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.

CQC should be informed in writing when these improvement 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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