

# Review of compliance

Springfield Court Limited Springfield Court Nursing Home	
<b>Region:</b>	North West
<b>Location address:</b>	Springfield Court Nursing Home Springfield Road, Aughton Ormskirk Lancashire L39 6ST
<b>Type of service:</b>	Care home service with nursing
<b>Date of Publication:</b>	April 2012
<b>Overview of the service:</b>	Springfield Court is located in the picturesque village of Aughton, Ormskirk. Accommodation is provided on one level for up to 56 older people requiring help with personal and nursing care needs. Single occupancy and shared rooms are available with ensuite facilities. Lounges and dining areas are available, including a conservatory and theatre. A variety of amenities are close

	by,including pubs, restaurants, shops, post office and churches. There is a car park to the front of the premises.
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# Summary of our findings for the essential standards of quality and safety

## Our current overall judgement

**Springfield Court Nursing Home 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 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 12 March 2012, checked the provider's records, observed how people were being cared for, looked at records of people who use services, talked to staff, reviewed information from stakeholders and talked to people who use services.

### What people told us

People using the service told us they were very happy living at Springfield Court. They said their needs were being fully met and they were treated with respect at all times.

Comments from residents included:

"I am so lucky to be here. Everything about this place is wonderful. The staff are all gems, the food is magnificent, the home is warm and comfortable. It is like a palace you know and there is always something going on."

"They (the staff) are very kind and caring. Nothing at all is too much trouble."

"This is the best place I would think. It is the nearest to home."

### What we found about the standards we reviewed and how well Springfield Court Nursing Home 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**

We found Springfield Court to be compliant with outcome 1. Respecting and involving people who use services. However, to maintain this we have suggested some improvements are made.

People living at the home were able to be involved in decisions about the care and support they received, with their privacy, dignity and independence being continuously promoted. However, plans of care could have reflected people's choices and preferences better. Protection for clothing during meal times could have been less obtrusive in order to further promote dignity.

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

We found Springfield Court to be compliant with outcome 1.  
Care and welfare of people who use services.

The care and support provided was, in general, person centred and staff had a good understanding of individual residents and the care they needed.

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

We found Springfield Court to be compliant with outcome 5.  
Meeting nutritional needs. However, to maintain this we have suggested some improvements are made.

People living at the home were very complimentary about the food served and in general had their nutritional needs met. However, it is suggested people are routinely offered a choice of menu. An audit of the dining experience should be conducted by the manager, to closely look at areas accessible to wheelchair users, the level of assistance provided for people and to ensure preferences are taken in to consideration and recorded within plans of care.

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

We found Springfield Court to be compliant with outcome 7.  
Safeguarding people who use services from abuse.

The home had robust procedures in place which helped to ensure people were protected from abusive situations.

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

We found Springfield Court to be compliant with outcome 14.  
Supporting staff. However to maintain this we have suggested some improvements are made.

The needs of people living at the home were met by a competent and well trained staff team. However, the processes of induction, staff training, supervision and appraisals should be formalised, by introducing a clear recording system for easy auditing purposes.

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

We found Springfield Court to be compliant with outcome 16.  
Assessing and monitoring the quality of service provision.

People living at Springfield Court benefited from a well managed home and there were systems in place to monitor the quality of service provided.

### **Actions we have asked the service to take**

We have asked the provider to send us a report within 28 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

We chatted with a good number of residents during our visit to this location. Those living at the home were very complimentary about the staff team, telling us they felt confident in their care workers and they were supported in the way they wanted to be.

People told us their privacy and dignity was always respected and they were able to make decisions about what they wanted to do. One person living at the home said, "The staff will always respect what I want" and another commented, "It is superb living here. No-one ever makes you do anything you don't want. I usually go down to the theatre and join in, but today I just felt like sitting quietly and doing my crosswords. No-one questioned me."

##### Other evidence

People moving into the home were provided with all relevant information about the facilities and services available to them. This enabled them to choose a variety of options and highlighted the flexibility of the daily routines whilst living at Springfield Court.

The policies and procedures of the home outlined the need for respecting people's privacy, dignity, rights and independence, including being able to open their own mail

and access advocacy services. Care records supported this information and we observed staff treating people with respect whilst going about their daily duties.

Staff were able to discuss the needs of those living at the home well and they were confident in promoting individual choices and wishes. The plans of care were, in general, person centred, highlighting the importance of privacy and dignity, particularly during the provision of intimate personal care and treatment.

It was clear relatives felt very welcome to the home and were familiar with the staff team and the registered manager. We were given good examples of residents being provided with the opportunity to make a variety of choices.

However, plans of care could have been more specific. For example, one extract was, 'likes to get up early. Likes breakfast early.' People's individual choices could have also been more detailed, such as, preferred times of going to bed and getting up, bathing routines and dietary preferences. One person living at the home said, "They (the staff) always explain things to us and always ask us how we like things to be done."

We were told staff had received training in relation to the Mental Capacity Act and Deprivation Of Liberty Safeguards, which reinforced the need to ensure people's best interests were being met. Three of the four care records seen contained detailed mental capacity assessments, which had been agreed by the individual's next of kin. However, the assessment for one person admitted early in the year had not been completed.

We sat in the dining room for some time, whilst lunch was being served and noted blue plastic aprons were being used for the majority of people in order to protect their clothing from food spillages. We considered this type of protection to be a little undignified and suggested a more discreet garment be used.

### **Our judgement**

We found Springfield Court to be compliant with outcome 1. Respecting and involving people who use services. However, to maintain this we have suggested some improvements are made.

People living at the home were able to be involved in decisions about the care and support they received, with their privacy, dignity and independence being continuously promoted. However, plans of care could have reflected people's choices and preferences better. Protection for clothing during meal times could have been less obtrusive in order to further promote dignity.

## 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 noted people living at Springfield Court looked clean, tidy and well cared for, showing they were being supported to maintain good standards of personal hygiene and appearance.

Comments from residents included:

"I have no worries. I am well looked after and I know there is always someone around if I need any help."

"The manager is very helpful. If I had any concerns I would discuss them with her and I know she would sort things out for me."

"The two chefs are very good. They are really great guys."

##### Other evidence

The needs of people wishing to move into the home had been carefully assessed before a decision was made to arrange a placement. This ensured the staff team were able to provide care and support needed by each individual. Information had also been gathered from other professionals involved with the care of people living at Springfield Court, so a clear picture of assessed needs was developed.

One relative told us, "I visited many nursing homes before I made a final decision to bring mum here. This place impressed me the minute I walked through the door. Not

only the environment, but the attitude of staff and management is good. They are all very professional and yet friendly and mum was able to choose which room she wanted."

Following admission to the home care plans had been drawn up based on the needs identified at the pre-admission assessment, which included risk assessments in areas such as pressure care, falling, moving and handling and nutrition. Staff spoken with had a good understanding of what people needed.

We looked at the care records of four people living at the home and found them, in general, to be person centred and well written documents, providing staff with clear guidance about the health, personal and social care needs of each individual.

The plans of care were detailed and had been reviewed every month, or more frequently if needed with the involvement of the individual concerned or their relative. Any changes in circumstances had been clearly recorded. It was quite evident the home sought advice from a wide range of external professionals, so that people's health care needs were being fully met.

It was pleasing to see the home had contingency plans in place, should an emergency situation arise.

Those living at the home appeared comfortable to engage with staff members and we received positive feedback from those we spoke with, who told us their needs were being met and staff were kind, caring and considerate.

Good social histories had been recorded within the care files seen, which included people's hobbies and interests, such as gardening and baking. Records showed people were encouraged and supported to maintain their interests whilst living at the home. Two activity co-coordinators were employed, who were responsible for planning and implementing a variety of leisure activities both inside and outside Springfield Court.

A beautiful, well planned theatre had been erected, where a wide range of entertainment was provided, including visits from well known personalities, such as, Ken Dodd, Jimmy Cricket and The Bachelors. At the time of our visit a good number of residents were enjoying a sing a long in the theatre with a keyboard musician.

### **Our judgement**

We found Springfield Court to be compliant with outcome 1.  
Care and welfare of people who use services.

The care and support provided was, in general, person centred and staff had a good understanding of individual residents and the care they needed.

## Outcome 05: Meeting nutritional needs

### What the outcome says

This is what people who use services should expect.

People who use services:

\* Are supported to have adequate nutrition and hydration.

### What we found

#### Our judgement

The provider is compliant with Outcome 05: Meeting nutritional needs

#### Our findings

##### What people who use the service experienced and told us

During the course of our visit we spent some time in the dining room whilst lunch was being served.

The dining room was pleasantly decorated with good quality furnishings making the dining experience pleasurable. Age appropriate background music added favourably to the overall ambiance of the environment.

All those we spoke with told us they were very satisfied with the quality of food provided.

Comments from those living at the home, when asked about the meals served included:

"The food is always really delicious."

"The chefs are excellent. The food is always cooked well and I like everything."

"We cannot complain about the standard of meals. They are always excellent."

A relative told us, "I visit very regularly and the meals are consistently of a very high standard. Mum is quite fussy with food preferences, but she gets what she wants here. If mum wants a slice of toast at 5am, the staff will go and get her one without question" and another commented, "I have my lunch here every day with my husband, which is nice."

**Other evidence**

As part of the admission process the home had conducted nutritional assessments to identify if people were at risk of becoming malnourished. Where there was an element of risk the home had implemented measures to closely monitor the resident's weight and well being, including seeking advice from other external professionals, such as the dietitian and speech and language therapist.

We examined one person's care records who was at high risk of malnutrition. The plan of care was well written in relation to their nutritional status, so staff were familiar about how to meet this individual's dietary requirements and how to closely monitor their well being. However, we noted another resident's care records showed a weight loss since admission to the home, without intervention being recorded. We discussed this with the manager, who felt staff were using the new weighing scales incorrectly. It is suggested staff be given training in using this equipment accurately, to avoid recording errors.

Meals were nicely presented and independence was encouraged as far as possible. However, we did observe one person having some difficulty eating his main course and eventually gave up. When asked by a staff member if he had eaten enough, he replied he had and the plate of food was removed. This individual did however eat a good portion of dessert. We discussed this with the manager, who told us any concerns in relation to inadequate dietary intake would be reported to the person in charge, so it could be closely monitored.

Those we saw eating at dining tables were served the same main course, following which they were asked if they wanted rice pudding without an alternative being offered. One person said she didn't like rice pudding, so was offered an alternative. People told us they were not generally offered a choice of menu, but if they didn't like what was offered, then they could have something else.

We noted the majority of people sitting at dining tables were in wheelchairs. We discussed this with the manager at the time of our visit. We understand some people, because of medical conditions would be unable to support themselves in a dining chair. However, it is suggested people are given the option, if it would not be detrimental to their health and safety and their choice should be recorded within the plans of care.

During lunch time we observed one resident repeatedly asking to be taken to the toilet, without assistance arriving for some time. When two staff members attended to her needs, they had great difficulty in manoeuvring her wheelchair from and to where she was sitting, without disturbing another resident who was dining at the same table. It is suggested the manager assesses areas of the dining room, which have suitable access for wheelchair users.

The recent Environmental Health Officer's inspection report showed a rating of 5 stars, which was commendable. We sampled the food served and found it to be cooked well and tasty.

**Our judgement**

We found Springfield Court to be compliant with outcome 5.

Meeting nutritional needs. However, to maintain this we have suggested some improvements are made.

People living at the home were very complimentary about the food served and in general had their nutritional needs met. However, it is suggested people are routinely offered a choice of menu. An audit of the dining experience should be conducted by the manager, to closely look at areas accessible to wheelchair users, the level of assistance provided for people and to ensure preferences are taken in to consideration and recorded within plans of care.

## 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 did not receive any specific comments from people living at the home about this outcome area. However, those we spoke with told us staff treated them with respect and they felt safe and protected whilst living at Springfield Court.

One relative said, "Mum is definitely safe living here. I can trust the staff whole heartedly to make sure she is kept safe."

##### Other evidence

A range of policies and procedures addressed the importance of whistle blowing, staff codes of conduct and the rights of people living at the home. Clear information was also readily available for staff outlining necessary measures to safeguard people living at Springfield Court.

Staff members spoken with confirmed they had received training in safeguarding vulnerable adults. This information was supported by records seen, which also showed training was provided in relation to the Mental Capacity Act and Deprivation of Liberty Safeguards.

The manager of the home and her staff were confident about the correct procedure to follow, should there be any allegations of actual or suspected abuse raised within the home.

#### Our judgement

We found Springfield Court to be compliant with outcome 7.  
Safeguarding people who use services from abuse.

The home had robust procedures in place which helped to ensure people were protected from abusive situations.

## 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

People we spoke with who lived at Springfield Court were very complimentary about the staff team and the management of the home, telling us staff were competent and did their jobs well.

One resident told us, "The Staff here do a great job. I have no complaints" and a relative commented, "One thing I will say about the staff here is that they are never idle. They are always doing something for someone or sitting chatting to people."

##### Other evidence

We observed staff going about their duties in a cheerful and pleasant manner throughout the day and those living at the home appeared comfortable in the presence of their carers.

The Company's training policy showed us that all staff should receive an induction and job specific training.

The Policy also indicated staff would have formal supervision every 3 months and an appraisal every 6 months, but this had not been carried out or recorded for a few years. However, it was clear the nurses, senior care staff and the registered manager were supportive to less experienced staff and always available for advice.

Certificates on staff files showed a range of training was provided, including regular updates, such as, load management, fire safety, food hygiene, continence promotion and palliative care. The registered manager told us she kept track of who needed what

and when from the training certificates, but this information was not saved in a matrix. This would be useful to determine at a glance training completed or needed and for easier auditing purposes.

When staff first started working at the home they underwent an induction programme of shadow shifts. However, there was no evidence of a completed list of any mandatory training. Staff attended handovers at the beginning and end of each shift to be made fully aware of any changes in people's needs, to ensure they supported individuals correctly.

The Registered Manager told us she is to commence more training sessions using DVD's. Almost 50% of care staff had achieved a National Vocation Qualification (NVQ) with a further 10% working towards this award. 33% of the staff team were qualified nurses.

Staff we spoke with told us they enjoyed their work at Springfield Court and felt well supported by senior staff, the registered manager and the owners of the home.

### **Our judgement**

We found Springfield Court to be compliant with outcome 14.

Supporting staff. However to maintain this we have suggested some improvements are made.

The needs of people living at the home were met by a competent and well trained staff team. However, the processes of induction, staff training, supervision and appraisals should be formalised, by introducing a clear recording system for easy auditing purposes.

## 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 did not receive any specific comments from people living at the home about this outcome area. However, people we spoke with were very complimentary about the service provided and felt the home was being well managed.

##### Other evidence

Everyone we spoke with had nothing but praise for the owners, manager and staff team. We were told the providers were on site most days and were very much 'hands on'. Therefore close monitoring of the service was evident. We were also told by people living at the home the provider knew them all and addressed each one of them by name, which was observed during our visit to this location.

People living at the home and their relatives had been involved in regular meetings and were very aware of the management structure of the home and everyone spoke very highly of the manager of Springfield Court. It was evident she was committed to her position and had strong leadership skills to manage the home well. One person living at the home said, "The manager is fantastic.", another commented, "The staff are wonderful" and a third stated, "The night staff are brilliant."

A wide range of systems were in place, so the quality of service provided could be closely monitored and any shortfalls identified and addressed as soon as possible.

A contingency plan was in place, so staff knew what to do should any significant incident occur, which may have affected the health and safety of those living at the

home.

A variety of people had completed questionnaires expressing their views about how they felt the home was performing, so any issues highlighted could be investigated and promptly addressed.

A wide range of very detailed audits and risk assessments had been regularly conducted, showing systems had been put in place in order to reduce the possibility of injury to people living at the home. The fire safety risk assessment was supported by an emergency action plan, which was considered to be good practice.

The home had been accredited by an external assessor, showing Springfield Court was periodically audited by an outside professional body, to ensure good standards were consistently maintained within the home.

A wide range of recently reviewed policies and procedures were in place at the home, which provided staff with clear guidance about correct practices and current legislation. These included, health and safety, infection control, fire safety, food hygiene and disposal of clinical waste.

We looked at a random selection of service certificates, which showed systems and equipment had been appropriately checked, so the health and safety of people living at the home was protected. Accidents had been recorded well, so the manager was able to audit and monitor their frequency and identify any recurring patterns.

Fire safety procedures, risk assessments and checks had all been conducted to ensure people knew what to do in the event of a fire.

Clinical Waste was being disposed of in the correct manner to ensure the risk of cross infection was minimised.

### **Our judgement**

We found Springfield Court to be compliant with outcome 16.

Assessing and monitoring the quality of service provision.

People living at Springfield Court benefited from a well managed home and there were systems in place to monitor the quality of service provided.

# 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 17 HSCA 2008 (Regulated Activities) Regulations 2010	Outcome 01: Respecting and involving people who use services
	<p><b>Why we have concerns:</b></p> <p>People living at the home were able to be involved in decisions about the care and support they received, with their privacy, dignity and independence being continuously promoted. However, plans of care could have reflected people's choices and preferences better. Protection for clothing during meal times could have been less obtrusive in order to promote dignity.</p>	
Diagnostic and screening procedures	Regulation 17 HSCA 2008 (Regulated Activities) Regulations 2010	Outcome 01: Respecting and involving people who use services
	<p><b>Why we have concerns:</b></p> <p>People living at the home were able to be involved in decisions about the care and support they received, with their privacy, dignity and independence being continuously promoted. However, plans of care could have reflected people's choices and preferences better. Protection for clothing during meal times could have been less obtrusive in order to promote dignity.</p>	
Treatment of disease, disorder or injury	Regulation 17 HSCA 2008 (Regulated Activities) Regulations 2010	Outcome 01: Respecting and involving people who use services
	<p><b>Why we have concerns:</b></p> <p>People living at the home were able to be involved in decisions about the care and support they received, with their privacy, dignity and independence being</p>	

	continuously promoted. However, plans of care could have reflected people's choices and preferences better. Protection for clothing during meal times could have been less obtrusive in order to promote dignity.	
Accommodation for persons who require nursing or personal care	Regulation 14 HSCA 2008 (Regulated Activities) Regulations 2010	Outcome 05: Meeting nutritional needs
	<p><b>Why we have concerns:</b></p> <p>People living at the home were very complimentary about the food served and in general had their nutritional needs met. However, it is suggested people are routinely offered a choice of menu. An audit of the dining experience should be conducted by the manager, to closely look at the level of assistance provided for people and to ensure their preferences are taken in to consideration and recorded within their plans of care.</p>	
Diagnostic and screening procedures	Regulation 14 HSCA 2008 (Regulated Activities) Regulations 2010	Outcome 05: Meeting nutritional needs
	<p><b>Why we have concerns:</b></p> <p>People living at the home were very complimentary about the food served and in general had their nutritional needs met. However, it is suggested people are routinely offered a choice of menu. An audit of the dining experience should be conducted by the manager, to closely look at the level of assistance provided for people and to ensure their preferences are taken in to consideration and recorded within their plans of care.</p>	
Treatment of disease, disorder or injury	Regulation 14 HSCA 2008 (Regulated Activities) Regulations 2010	Outcome 05: Meeting nutritional needs
	<p><b>Why we have concerns:</b></p> <p>People living at the home were very complimentary about the food served and in general had their nutritional needs met. However, it is suggested people are routinely offered a choice of menu. An audit of the dining experience should be conducted by the manager, to closely look at the level of assistance provided for people and to ensure their preferences are taken in to consideration and recorded within their</p>	

	plans of care.	
Accommodation for persons who require nursing or personal care	Regulation 23 HSCA 2008 (Regulated Activities) Regulations 2010	Outcome 14: Supporting staff
	<p><b>Why we have concerns:</b></p> <p>The needs of people living at the home were met by a competent and well trained staff team. However, the processes of induction, staff training, supervision and appraisals should be formalised, by introducing a clear recording system for easy auditing purposes.</p>	
Diagnostic and screening procedures	Regulation 23 HSCA 2008 (Regulated Activities) Regulations 2010	Outcome 14: Supporting staff
	<p><b>Why we have concerns:</b></p> <p>The needs of people living at the home were met by a competent and well trained staff team. However, the processes of induction, staff training, supervision and appraisals should be formalised, by introducing a clear recording system for easy auditing purposes.</p>	
Treatment of disease, disorder or injury	Regulation 23 HSCA 2008 (Regulated Activities) Regulations 2010	Outcome 14: Supporting staff
	<p><b>Why we have concerns:</b></p> <p>The needs of people living at the home were met by a competent and well trained staff team. However, the processes of induction, staff training, supervision and appraisals should be formalised, by introducing a clear recording system for easy auditing purposes.</p>	

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 28 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

<b>Document purpose</b>	Review of compliance report
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## Care Quality Commission

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