

Review of compliance

Derbyshire County Council Hazelwood Care Home	
Region:	East Midlands
Location address:	Skeavingtons Lane Cotmanhay Ilkeston Derbyshire DE7 8SW
Type of service:	Care home service without nursing
Date of Publication:	May 2012
Overview of the service:	Hazelwood Care Home provides accommodation and personal care for up to 30 older people, male and female, including a respite care and re-enablement service.

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

Our current overall judgement

Hazelwood Care Home was not meeting one or more essential standards. Action is 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, carried out a visit on 11 April 2012, 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 told us they were satisfied with the service and relatives also confirmed that they had no worries about the care provided. They were very positive about the care that they received and highly praised the staff. One person using the service told us that the service was "very nice" and another said they "like living here" and that "staff are very good". Another person said there was "nothing to grumble about" and a relative described the service as "fantastic". One relative told us that the service was "like home" and another told us that they thought staff did "their best".

People we spoke with stated the food was good and told us they enjoyed their meals. One person told us that the food was "excellent".

What we found about the standards we reviewed and how well Hazelwood Care 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

People were involved in making decisions about their care and were treated respectfully.

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

People's health and care needs were addressed in a way that ensured people were

treated individually.

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

Adherence to policies and procedures ensured that people were safeguarded from abuse and cared for safely.

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

Staff were supported in their work and had sufficient training to enable them to provide the care required.

Outcome 15: The service must tell us about what kinds of services it provides

The service was not fully complying with Regulation 12 and Schedule 3 of the Care Quality Commission (Registration) Regulations 2009.

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

A satisfactory quality assurance system ensured peoples' best interests were protected.

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. We will check to make sure that this action has been taken.

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.

Where we judge that a provider is non-compliant with a standard, we make a judgement about whether the impact on people who use the service (or others) is minor, moderate or major:

A minor impact means that people who use the service experienced poor care that had an impact on their health, safety or welfare or there was a risk of this happening. The impact was not significant and the matter could be managed or resolved quickly.

A moderate impact means that people who use the service experienced poor care that had a significant effect on their health, safety or welfare or there was a risk of this happening. The matter may need to be resolved quickly.

A major impact means that people who use the service experienced poor care that had a serious current or long term impact on their health, safety and welfare, or there was a risk of this happening. The matter needs to be resolved quickly.

Where we identify compliance, no further action is taken. Where we have concerns, the most appropriate action is taken to ensure that the necessary changes are made.

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

There were twenty-six people using the service at the time of the visit. We spoke with seven people using the service, three relatives, three members of staff and the manager and deputy manager during the visit. We spoke with two visiting professionals by telephone following the visit.

People and their relatives praised the service and told us staff were respectful. One person described staff as "thoughtful" and a relative said they were "friendly". People also told us they were able to make choices and were involved in making decisions; one person told us they had chosen the decor for their room and another told us they were always asked about their food preferences.

Other evidence

We looked at two people's care records. One record contained an assessment to establish whether or not the person had capacity to make decisions and we saw that one person had signed an agreement to their care.

A visiting professional told us that the service was "friendly and welcoming".

We observed that people enjoyed warm relationships with staff and that interactions

were polite and friendly.

The manager told us the service had achieved the bronze award for dignity operated by Derbyshire County Council, although they had not received any formal verification of this at the time of the visit.

Our judgement

People were involved in making decisions about their care and were treated respectfully.

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 we spoke with and their families were very positive about the care that they received and highly praised the staff. One person using the service told us that the service was "very nice" and another said they "like living here" and that "staff are very good". Another person said there was "nothing to grumble about" and a relative described the service as "fantastic".

One relative told us that the service was "like home" and another told us that they thought staff did "their best". All relatives we spoke with confirmed that health professionals were called in when necessary; two relatives told us they thought the health of the person they were concerned with had improved since using the service.

People we spoke with stated the food was good and told us they enjoyed their meals. One person told us that the food was "excellent" and all people we spoke with confirmed that if they did not like the choice available alternatives were offered.

Other evidence

A visiting professional told us that the people they were involved with had given positive feedback about the service stating they were looked after well. They told us the service acted on advice given and that independence was encouraged. Another was able to give an example of how someone had improved since using the service.

We observed that staff were attentive to people's individual needs and communicated with them appropriately and that people appeared neat and tidy and clothes were well

laundered.

We looked at two people's care records and they both contained an up to date care plan and relevant risk assessments. The records were clear and organised and confirmed that people had appointments with health professionals such as General Practitioners, opticians and chiropodists.

Staff we spoke with confirmed that there was sufficient staff on duty each day to cater for people's care needs.

We saw that the service used relevant advice for meals and nutritional needs and the menus we saw showed us that there was a choice offered at mealtimes and that the food was varied.

Our judgement

People's health and care needs were addressed in a way that ensured people were treated individually.

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

People confirmed that they felt safe using the service and all the relatives we spoke with told us they had no worries about the way care was provided. They praised the staff and one person said they felt "at peace" and "settled" using the service.

Other evidence

Staff we spoke with were able to describe infection control procedures and said they used personal protective equipment such as gloves and aprons. We saw that the premises were clean and tidy.

Staff were able to describe what to do if they suspected abuse was occurring and told us they knew to report any allegations of abuse to the manager and were confident that these would be looked into properly. They knew which agencies to contact outside the employing organisation. They confirmed that they had undertaken training in safeguarding adults at risk and the service's training record told us safeguarding training had occurred in March 2011, with a further course planned for 2012.

We saw that the service had up to date information on safeguarding adults at risk and that Derbyshire County Council procedures were utilised.

There had been no concerns brought to our attention in the last twelve months and a visiting professional told us they had "no concerns" about the service.

We saw that medication administration record (MAR) charts were completed accurately, with the amount of medication received being recorded on the charts and codes being used properly where medication had not been administered.

We examined the controlled drugs records in use in the service. We found that these were accurate and corresponded correctly with the drugs in stock.

We saw that the storage of medicines was satisfactory and a random stock check showed that medicines were within their expiry dates and that refrigerator temperatures were recorded on a daily basis and were within safe limits.

We saw the service had a valid certificate from the Local Authority awarding it 5 stars for food safety practices.

Our judgement

Adherence to policies and procedures ensured that people were safeguarded from abuse and cared for safely.

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 praised the staff and told us they did a good job. They said staff were kind and confirmed that they received the care required. A relative described staff as "fantastic" and all relatives we spoke with were confident that the staff were able to meet people's needs.

Other evidence

We spoke with three staff and they all told us they liked working in the service. One said they thought the staff team did "really well" and described the management team as "approachable". They told us they received supervision approximately six monthly and that this was useful. They also told us that the management team were readily available for guidance and advice as required.

All three staff confirmed that mandatory health and safety training took place regularly and records we saw confirmed that this had occurred in 2011 and 2012. They also told us that courses relevant to people's specific needs such as dementia and end of life care had occurred in the last twelve months and that they had the opportunity to undertake National Vocational Qualifications (NVQ).

A visiting professional told us that staff were "very good" and were "competent".

Our judgement

Staff were supported in their work and had sufficient training to enable them to provide the care required.

Outcome 15: Statement of purpose

What the outcome says

This is what people who use services should expect.

People who use services:

* Will benefit from the knowledge that the Care Quality Commission is informed of services being provided.

What we found

Our judgement

The provider is non-compliant with Outcome 15: Statement of purpose. We have judged that this has a minor impact on people who use the service.

Our findings

What people who use the service experienced and told us

We did not discuss the statement of purpose with people using the service.

Other evidence

We looked at the service's statement of purpose. We found that it contained inaccurate information such as references to the wrong legislation and using the wrong name for the regulatory body. It did not state which activities it was regulated for.

Our judgement

The service was not fully complying with Regulation 12 and Schedule 3 of the Care Quality Commission (Registration) Regulations 2009.

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

People told us they were satisfied with the service and relatives also confirmed that they had no worries about the care provided.

Relatives we spoke told us they would make a complaint to the manager and were confident that any issues raised would be dealt with in a courteous manner.

Other evidence

We discussed quality assurance with the manager. She told us there were three monthly meetings for people using services in the local area and that these were attended by representatives from Hazelwood House. We saw records of a focus meeting for people using the service that had been held in 2010 to discuss access to health services but there were no other records available to show that more recent meetings had taken place.

The manager confirmed that any necessary repair and maintenance work was undertaken promptly and equipment was ordered as required.

We saw that internal audits had been carried out in relation to quality and health and safety. The quality audit had taken place in 2010 and the health and safety audit in 2011. Both reports seen were broadly favourable and showed that the service was highlighting potential issues and had a timescale to address them.

We saw written feedback received by the service and one commented that the service

was "excellent and professional" and another that it "enhanced the quality of life".

There had been no complaints brought to the attention of the Care Quality Commission in the last twelve months.

Our judgement

A satisfactory quality assurance system ensured peoples' best interests were protected.

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 12 CQC (Registration) Regulations 2009	Outcome 15: Statement of purpose
	How the regulation is not being met: The service was not fully complying with Regulation 12 and Schedule 3 of the Care Quality Commission (Registration) Regulations 2009.	

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 28 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.

Where we judge that providers are not meeting essential standards, we may set compliance actions or take enforcement action:

Compliance actions: These are actions a provider must take so that they **achieve** compliance with the essential standards. 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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