

Review of compliance

Charlton Care Homes Limited Sunnymede Nursing Home (in administration)

Region:	South West
Location address:	Sunnymede Nursing Home, 4 Vandyke Avenue Keynsham Bath Somerset BS31 2UH
Type of service:	Care home service with nursing
Date of Publication:	September 2011
Overview of the service:	Sunnymede nursing home provides nursing care for up to 41 people. The service is registered for the following regulated activities: Accommodation for persons requiring nursing or personal care. Treatment of disease, disorder or injury. Diagnostic and screening procedures.

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

Our current overall judgement

Sunnymede Nursing Home (in administration) 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, 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

The people that spoke to us were positive about how they are supported by the staff. Examples of comments people made included, "I feel happy and safe here", "yes the girls are very good", and "its not too bad here".

Visitors are satisfied with the care and support their relatives are receiving at the home.

We saw people being supported by staff to meet their needs. We saw staff spending time listening to people and talking to them in a warm, good humoured way. We saw certain staff fail to communicate respectfully to people. We saw a staff member putting aprons over service users heads before the lunchtime meal to protect their clothing. This was done without any interaction from the staff member with the service user.

We found that care plans explain in sufficient detail what peoples needs are. Care plans show what staff must do so that people get the care they require.

We found that there are enough staff employed to support and care for people properly so that their needs are met.

We found that people who use the service are supported to make their views known about the quality of service and care they get.

What we found about the standards we reviewed and how well

Sunnymede Nursing Home (in administration) 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 that the majority of staff treat people in a kind and courteous way. People are supported to make their views known about how the service is run.

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

People receive effective and suitable care and support from the staff team. People also benefit from care plans to guide staff to meet their needs. It would benefit some people who have reduced mental capacity if care plans included information about how to meet their range of needs.

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

We found that people are safeguarded from abuse in the home. Staff do training on the subject of abuse and this further safeguards people who use the service.

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

We found that there are enough staff on duty to support people to have their needs met.

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 that the quality of the service that people receive is being checked and monitored.

Actions we have asked the service to take

We have asked the provider to send us a report within 7 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. Any regulatory decision that CQC takes 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 told us about the staff, the care and the support they receive. Examples of comments that we were told include, "I speak as I find and I'm satisfied here", and "you can have a laugh with the carers".

We saw people getting up at different times in the morning, having their meal times in a flexible way and being offered meal times choices as well.

We saw a staff member putting aprons over service users heads before the lunchtime meal to protect their clothing. This was done without any interaction from the staff member with the service user. This action conveys a lack of respect and could be distressing if the person is confused and does not understand what is being done.

We saw people choose what time they got up during the morning. We saw staff ask people what sort of food they would like to eat. This is a good way to give people choice and control in their lives.

We were told that there is an open visiting policy and people can visit the home when they want to. We saw people who use the service meeting visitors during the morning.

We saw staff welcoming people's visitors and making them drinks. Visitors spoke highly to us about the care and support their relatives are receiving at the home.

Other evidence

We saw written evidence in the care plans we read that people who use the service,

their relatives and significant others are consulted by staff about the care and support that they are receiving. We observed staff respond promptly and in a kind way when people asked them for help with their personal care needs. We read recent daily records written by staff about people's daily health and wellbeing. We looked at this information to find about the way that people are being cared for and supported. We read detailed and objective information that shows staff monitor peoples overall health to make sure they have had their needs met.

Our judgement

We found that the majority of staff treat people in a kind and courteous way. People are supported to make their views known about how the service is run.

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 saw the staff helping people with their needs. The staff had a polite and kind approach when helping people. We saw staff sitting next to people and engaging them in social conversations. We saw the nurse on duty attending to people with their needs with a kind and calm manner. The nurse talked to each person they met about their medicines as well as about how they are feeling.

We saw a member of staff who is responsible for organising activities with people start work in the afternoon. The manager told us that the member of staff spends time with people in groups, or on their own. They also spend time playing quizzes and games and going on trips out with them. These activities can help people whose memory may be impaired. We saw information on a notice board about a range of activities that are planned to take place for people who use the service to take part in. We saw books in the lounge for people to read.

We saw photos of people who use the service when they were out on trips to pubs, coffee shops and places in the community.

We saw staff knock on bedroom doors before they went into them to maintain people's privacy.

We were told there is a hairdresser who attends to hair and cuts and 'sets' hair while people are at the home.

Other evidence

We talked to staff about how they ensure people have their needs met when they are caring for them. The staff explained how care duties are allocated to them by nurses at the start of each working shift. Staff told us that they support people in small groups to

ensure that each persons' needs are met.

We read three care plans to find out if people are properly supported to meet their care needs. A care plan is a record to guide the staff to give the right support and care people require. We found there was up to date, helpful information about the care and support people need in the care plans. We saw staff caring for people in the way that has been explained in the persons care plan. This helps to show that people are receiving consistent and suitable care. We read supporting information that showed that people had been assessed as not having full mental capacity. The care plans we read for the people concerned, did not include guidance about how to support people who do not have the mental capacity to make informed decisions in their lives.

Our judgement

People receive effective and suitable care and support from the staff team. People also benefit from care plans to guide staff to meet their needs. It would benefit some people who have reduced mental capacity if care plans included information about how to meet their range of needs.

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 saw staff talk to people with a polite and respectful tone. The people who we met told us that staff treat them properly. The comments in outcome one of the reports are also relevant here.

We saw the manager walking around the home and talking to people. This helps to demonstrate that the manager is keeping in close contact with people. The manager keeping in contact with people who use the service, will help them raise concerns, if they feel at risk from abuse.

We saw a copy of the procedure to guide staff to keep people safe from abuse. We saw that a copy of the safeguarding procedure is kept in the office so that staff can read it. This means staff will know what to do in the event of an allegation of abuse being made in the home.

We read up to date information in training records that staff have had training in understanding the principle of safeguarding people from abuse. This means staff will understand how to keep people safe from abuse.

Staff were able to tell us about the procedure known as 'whistle blowing'. Staff understood that they have a duty to report if they suspect, or know people are being abused.

Other evidence

We did not use other evidence for this outcome area.

Our judgement

We found that people are safeguarded from abuse in the home. Staff do training on the

subject of abuse and this further safeguards people who use the service.

Outcome 13: Staffing

What the outcome says

This is what people who use services should expect.

People who use services:

* Are safe and their health and welfare needs are met by sufficient numbers of appropriate staff.

What we found

Our judgement

The provider is compliant with Outcome 13: Staffing

Our findings

What people who use the service experienced and told us

We looked at how many staff are on duty each day to find out if there are enough of them to support people with their needs. We saw that there are one or two nurses on duty during the day. There is at least five care staff on duty on a morning shift, and three to four staff for an afternoon shift. At night there are at least two staff on duty and a registered nurse. We saw that the registered manager work full time hours. We saw catering staff, domestic staff, maintenance workers and laundry staff also employed at the home. We saw these staff carrying out their duties. Based on the outcomes for people who use the service, the numbers of staff on duty meet their needs.

People told us about the staff team who support them with their needs. One person said "they are nice girls", another person said, "I'm satisfied with them".

We talked to the staff about the peoples needs how they ensure they meet them The staff explained clearly to us what sort of needs people have and how care duties are allocated to ensure that they are effectively met.

Other evidence

We did not use other evidence for this outcome area.

Our judgement

We found that there are enough staff on duty to support people to have their needs met.

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 saw people approaching staff to talk to them about things that matter to them. We saw staff listening to people in a polite way. This shows us people can make their views known to staff. People told us the manager supports people by holding residents and relatives meetings on a regular basis. We were told people can make their views known at the meetings and discuss what matters to them. This demonstrates people who use the service and those who represent them, can make their views known.

Other evidence

The manager told us they have an open door policy to their office, and people can go and speak to them at any time. We saw people who use the service, staff and visitors go to see the manager in the office. This is a simple way that people can make the manager aware of their views.

We saw that there is a quality monitoring tool being used to monitor the service and care people get. We saw the information that had been obtained from an in house quality monitoring survey exercise. We could see that people are asked about a varied range of matters to do with the home.

Our judgement

We found that the quality of the service that people receive is being checked and monitored.

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
	<p>Why we have concerns: Care plans do not show in sufficient detail how to support people who have been assessed as having reduced mental capacity.</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 within 7 days of this report being received.

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

Document purpose	Review of compliance report
Author	Care Quality Commission
Audience	The general public
Further copies from	03000 616161 / www.cqc.org.uk
Copyright	Copyright © (2010) Care Quality Commission (CQC). This publication may be reproduced in whole or in part, free of charge, in any format or medium provided that it is not used for commercial gain. This consent is subject to the material being reproduced accurately and on proviso that it is not used in a derogatory manner or misleading context. The material should be acknowledged as CQC copyright, with the title and date of publication of the document specified.

Care Quality Commission

Website	www.cqc.org.uk
Telephone	03000 616161
Email address	enquiries@cqc.org.uk
Postal address	Care Quality Commission Citygate Gallowgate Newcastle upon Tyne NE1 4PA