

# Review of compliance

Lifestyles Care & Support Limited Rocklyn	
<b>Region:</b>	North East
<b>Location address:</b>	46-47 Esplanade Whitley Bay Tyne and Wear NE26 2AR
<b>Type of service:</b>	Care home service without nursing
<b>Date of Publication:</b>	June 2012
<b>Overview of the service:</b>	Rocklyn is a care home which is registered to provide accommodation for persons who require nursing or personal care. Nursing care is not provided at this home. Rocklyn can accommodate up to 11 persons and provides support to persons with learning disabilities. All bedrooms are single occupancy. The home is a two terraced house conversion and it is located just off the seafront in Whitley Bay close to the

	town centre.
--	--------------

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

## Our current overall judgement

**Rocklyn was meeting all the essential standards of quality and safety inspected.**

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 1 May 2012, observed how people were being cared for, looked at records of people who use services, talked to staff and talked to people who use services.

### What people told us

People told us they have been very happy living at Rocklyn. They said they were able to make their own choices in relation to such issues as food at mealtimes and activities. One person said, "The staff here are great, they look after us and have hearts of gold". Another person said, "The staff say it is our house and we can do what we want. I get asked about what I want to do."

### What we found about the standards we reviewed and how well Rocklyn was meeting them

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

The provider was meeting this standard. People's privacy, dignity and independence were respected. Their views and experiences were taken into account in the way that the service was provided and delivered in relation to their care.

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

The provider was meeting this standard. People experienced care, treatment and support that met their needs and protected their rights.

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

The provider was meeting this standard. People who use the service were protected from the risk of abuse, because the provider had taken reasonable steps to identify the possibility of abuse and prevent abuse from happening.

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

The provider was meeting this standard. People were cared for by staff who were supported to deliver care and treatment safely and to an appropriate standard.

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

The provider was meeting this standard. The provider had an effective system to regularly assess and monitor the quality of the service that people receive.

**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

People we spoke with said they had a great deal of choice and were treated with dignity and respect by staff. They said they were involved in decisions about their care and staff explained things to them when necessary to make sure they understood. People said they were very happy living at the home and would tell staff if they were not happy about something. One person told us, "I can go out when I want to and we can have friends for tea if we want." Another person said, "The staff say this is our home and we can do what we want." One person said to us, "You must knock on someone's door, not just walk in."

#### Other evidence

Throughout our visit we saw staff respected people and interacted with them in a positive, dignified and respectful manner. Staff were friendly and encouraged people to be independent by looking after their own daily living activities. We saw a person making their own lunch and another person told us they do their own clothes washing. When we arrived we observed staff ask a person if they could turn down the music that was playing, before doing so. We also saw people being respectful to each other.

We looked at four out of ten care plans and found they were person-centred with the person's care needs, choices and preferences recorded. They contained likes and

dislikes, including foods, as well as the person's hopes and aspirations for the future. All of the care plans we looked at had been signed by the person that it related to and where appropriate their own comments or wishes had been added. This meant that people were consulted and involved with the planning of their care and support.

We saw that people had been involved in a range of activities. People had recently been on a trip to a farm and had taken part in an Easter egg decorating competition. We saw records of a residents meeting where people had asked staff to help them organise a holiday later this year. Staff told us this had since been arranged. Staff also told us people tell them what they would like to do and they always try and meet these requests.

### **Our judgement**

The provider was meeting this standard. People's privacy, dignity and independence were respected. Their views and experiences were taken into account in the way that the service was provided and delivered in relation to their care.

## Outcome 04: Care and welfare of people who use services

### What the outcome says

This is what people who use services should expect.

People who use services:

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

### What we found

#### Our judgement

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

#### Our findings

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

People we spoke with told us they were well supported by staff who were kind and helpful. They said they were involved in their care. One person said, "I am very happy here. I have been here a long time. I get asked what I want to do and I can choose what I want to eat."

##### Other evidence

We looked at the care plans for four people who lived at the home. These contained information about how each person's care should be provided. They were person-centred and individualised with a historical summary of the person's life.

Each care plan contained a record of the person's level of independence in relation to activities of daily living such as communicating, eating and drinking, washing and bathing, physical health and social contact. There were risk assessments, where necessary, in relation to that person's need.

There was a record in each care plan of that person's physical health needs and external healthcare professional involvement in peoples' care. We saw evidence of appropriate action being taken by the service where there had been an injury to a person and also where a person needed medical attention in relation to an existing health condition. On both occasions this meant the persons health care needs were being met.

People at the home had completed training courses in Emergency First Aid, Food Safety and Health and Safety. People told us this had raised their awareness of their

own safety.

**Our judgement**

The provider was meeting this standard. People experienced care, treatment and support that met their needs and protected their rights.

## Outcome 07: Safeguarding people who use services from abuse

### What the outcome says

This is what people who use services should expect.

People who use services:

\* Are protected from abuse, or the risk of abuse, and their human rights are respected and upheld.

### What we found

#### Our judgement

The provider is compliant with Outcome 07: Safeguarding people who use services from abuse

#### Our findings

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

People we spoke with said they felt safe living at the home. They said they would approach staff or the manager if they had any concerns and they would feel comfortable in doing so.

##### Other evidence

We spoke with staff who could tell us the signs of abuse and what actions they would take if they witnessed or suspected abuse. Policies and procedures were in place for staff to follow if they suspected any person was at risk of harm or abuse. Staff told us they were aware of these policies and procedures. Staff had signed these documents to say that they had read them.

The manager showed us the procedure that had been followed relating to two incidences of harm and these had been dealt with and recorded correctly by the home.

Training undertaken by staff relating to safeguarding was complete and up to date.

##### Our judgement

The provider was meeting this standard. People who use the service were protected from the risk of abuse, because the provider had taken reasonable steps to identify the possibility of abuse and prevent abuse from happening.

## Outcome 14: Supporting staff

### What the outcome says

This is what people who use services should expect.

People who use services:

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

### What we found

#### Our judgement

The provider is compliant with Outcome 14: Supporting staff

#### Our findings

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

We spoke with people using the service but their feedback did not relate to this standard.

##### Other evidence

We spoke with two staff and they confirmed they had received the training they needed to carry out their role. A system was in place to review training requirements and update training when needed. Training reflected vocational studies as well as basic training. Staff had completed a basic induction on commencement of their employment.

Training requirements were identified and a personal development plan was in place for each staff member. We saw a training record for each staff member and copies of training certificates were held on file to evidence the training they had received. The manager showed us evidence of refresher training for staff which was up to date in a number of key areas including health and safety, moving and handling and safeguarding.

We saw there was a staff training and development program in place to give staff an understanding of the needs of the people they cared for. The training needs of the staff were identified in supervision and appraisal sessions. This was to make sure that staff were able to carry out their responsibilities and deliver care and treatment to people living within the home, to the appropriate standard.

##### Our judgement

The provider was meeting this standard. People were cared for by staff who were

supported to deliver care and treatment safely and to an appropriate standard.

## Outcome 16: Assessing and monitoring the quality of service provision

### What the outcome says

This is what people who use services should expect.

People who use services:

\* Benefit from safe quality care, treatment and support, due to effective decision making and the management of risks to their health, welfare and safety.

### What we found

#### Our judgement

The provider is compliant with Outcome 16: Assessing and monitoring the quality of service provision

#### Our findings

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

We spoke with people using this service but their feedback did not relate to this standard.

##### Other evidence

The home had systems in place for assessing and monitoring the quality of the care and support provided to the people living there. The views of both the people who lived at the home and the staff who worked there, were regularly sought through surveys and meetings. The discussions during meetings were recorded, alongside any actions to be followed up. The meetings discussed such things as peoples opinions of the home, food choices and the activities provided by the service. People said they were consulted about their views and they were listened to. As a result, people said they felt there had been an increase in the quality of their care provision.

We saw evidence of weekly checks and testing on fire safety relating to fire doors, fire alarms, emergency lighting and fire extinguishers. In addition to this there was a record of annual maintenance of equipment within the home by the relevant external suppliers. Health and safety and general maintenance checks were done daily in all rooms and any issues were reported to the manager and recorded in the maintenance book to be fixed as appropriate. For example, we saw a leaking toilet in the home which had already been identified and recorded in the maintenance book. These records showed that the home had an effective system in place for the maintenance of the building.

We spoke with the provider who explained that the quality audit systems within the

home were currently under review.

**Our judgement**

The provider was meeting this standard. The provider had an effective system to regularly assess and monitor the quality of the service that people receive.

# 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

<b>Document purpose</b>	Review of compliance report
<b>Author</b>	Care Quality Commission
<b>Audience</b>	The general public
<b>Further copies from</b>	03000 616161 / <a href="http://www.cqc.org.uk">www.cqc.org.uk</a>
<b>Copyright</b>	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

<b>Website</b>	<a href="http://www.cqc.org.uk">www.cqc.org.uk</a>
<b>Telephone</b>	03000 616161
<b>Email address</b>	<a href="mailto:enquiries@cqc.org.uk">enquiries@cqc.org.uk</a>
<b>Postal address</b>	Care Quality Commission Citygate Gallowgate Newcastle upon Tyne NE1 4PA