

Review of compliance

A B C Care Home Limited Burnside Court	
Region:	South West
Location address:	104-106 Torquay Road Paignton Devon TQ3 2AA
Type of service:	Care home service without nursing
Date of Publication:	January 2012
Overview of the service:	Burnside Court is registered to provide accommodation for people requiring personal or nursing care. There is a condition that the home does not provide nursing care, but this can be accessed via the community nursing services if required.

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

Our current overall judgement

Burnside Court was meeting all the essential standards of quality and safety.

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

Why we carried out this review

We carried out this review to check whether Burnside Court had made improvements in relation to:

- Outcome 02 - Consent to care and treatment
- Outcome 07 - Safeguarding people who use services from abuse
- Outcome 08 - Cleanliness and infection control
- Outcome 14 - Supporting staff

How we carried out this review

We reviewed all the information we hold about this provider, checked the provider's records and reviewed information from stakeholders.

What people told us

This review was carried out to follow up on the improvements the provider told us they had carried out following the inspection and site visits undertaken earlier in 2011.

At that time we reviewed all the information we hold about this provider, and carried out two visits on 4th and 8th April 2011. On these visits we observed how people were being cared for; we talked with people who use services and relatives who were visiting; we talked with staff; checked the provider's records; and looked at the records of people who use services. We also looked round the building, and went into most rooms, apart from some where people were receiving care.

Following that inspection, the provider sent us an action plan explaining how they were going to achieve compliance in the areas where we had identified concerns.

To complete this review the provider supplied us with evidence including photographs and copies of certificates and statements to demonstrate they are now compliant with the outstanding requirements from that inspection.

What we found about the standards we reviewed and how well Burnside Court was meeting them

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

Staff knowledge in how to support people with reduced or varying ability to make decisions has been improved.

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

Staff knowledge on legislation supporting people's capacity to make decisions and their rights has been improved.

Outcome 08: People should be cared for in a clean environment and protected from the risk of infection

The laundry is now cleanable and risks of cross infection reduced. Staff knowledge on infection control has been improved.

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

Improved systems for supervision and appraisal of staff means people should be working to their full potential and in a consistent fashion to support people living at the home.

Other information

Please see previous reports for more information about previous reviews.

**What we found
for each essential standard of quality
and safety we reviewed**

The following pages detail our findings and our regulatory judgement for each essential standard and outcome that we reviewed, linked to specific regulated activities where appropriate.

We will have reached one of the following judgements for each essential standard.

Compliant means that people who use services are experiencing the outcomes relating to the essential standard.

A **minor concern** means that people who use services are safe but are not always experiencing the outcomes relating to this essential standard.

A **moderate concern** means that people who use services are safe but are not always experiencing the outcomes relating to this essential standard and there is an impact on their health and wellbeing because of this.

A **major concern** means that people who use services are not experiencing the outcomes relating to this essential standard and are not protected from unsafe or inappropriate care, treatment and support.

Where we identify compliance, no further action is taken. Where we have concerns, the most appropriate action is taken to ensure that the necessary improvements are made. Where there are a number of concerns, we may look at them together to decide the level of action to take.

More information about each of the outcomes can be found in the *Guidance about compliance: Essential standards of quality and safety*

Outcome 02: Consent to care and treatment

What the outcome says

This is what people who use services should expect.

People who use services:

- * Where they are able, give valid consent to the examination, care, treatment and support they receive.
- * Understand and know how to change any decisions about examination, care, treatment and support that has been previously agreed.
- * Can be confident that their human rights are respected and taken into account.

What we found

Our judgement

The provider is compliant with Outcome 02: Consent to care and treatment

Our findings

What people who use the service experienced and told us

At the previous review in April 2011 we visited the service and discussed people's experiences with them. Comment on this can be seen in the previous inspection report.

Other evidence

The provider supplied us with evidence that the staff have received training in the Mental Capacity Act and Deprivation of liberty safeguards. This is legislation which helps to ensure that people's rights to make decisions are respected. It also means that if decisions need to be made on someone's behalf they are recorded appropriately and carried out in people's best interests.

The provider gave us copies of the training certificates for staff, and we have been told how this training was followed up with staff so that the manager could be sure it was understood.

Our judgement

Staff knowledge in how to support people with reduced or varying ability to make decisions has been improved.

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

At the previous review in April 2011 we visited the service and discussed people's experiences with them. Comment on this can be seen in the previous inspection report.

Other evidence

At the last inspection we had received concerns that the bedroom doors had locks fitted which meant that staff might not be able to access someone in an emergency. Although on that inspection we found this was not the case, the provider has informed us that all bedroom door locks have now been decommissioned.

The provider informed us on this inspection that staff have received training in legislation which helps ensure people's rights to make decisions is respected (see outcome 2).

Our judgement

Staff knowledge on legislation supporting people's capacity to make decisions and their rights has been improved.

Outcome 08: Cleanliness and infection control

What the outcome says

Providers of services comply with the requirements of regulation 12, with regard to the Code of Practice for health and adult social care on the prevention and control of infections and related guidance.

What we found

Our judgement

The provider is compliant with Outcome 08: Cleanliness and infection control

Our findings

What people who use the service experienced and told us

At the previous review in April 2011 we visited the service and discussed people's experiences with them. Comment on this can be seen in the previous inspection report.

Other evidence

At our last inspection we were concerned that the laundry area was cluttered and could not be kept clean which presented risks from cross contamination.

The provider supplied us with photographs to show us the work that had been completed in this area since the last inspection visit, including cleaning and removal of unnecessary items. This area was much more suitable to manage infection control systems and keep clean. Additional storage had been provided elsewhere for staff cupboards and belongings.

In addition Burnside Court had been visited by specialist infection control staff who had supported the staff team with updated training in this area. Hand gel was being provided by the front and back door for all visitors to use to control infection coming into the home.

Our judgement

The laundry is now cleanable and risks of cross infection reduced. Staff knowledge on infection control has been improved.

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

At the previous review in April 2011 we visited the service and discussed people's experiences with them. Comment on this can be seen in the previous inspection report.

Other evidence

At the last inspection we saw staff working well together to support people. However the staff support systems were not formalised or consistent.

The provider has told us that a programme of supervision for staff had been put in place, both for groups of staff and also individually. Supervision is a system combining professional development and performance management and is aimed at ensuring staff are working in the same way and to their full potential to support people living at the service. Senior staff have been carrying this out as well as the manager since the last review. This should help to ensure the programme occurs at the planned frequency.

Our judgement

Improved systems for supervision and appraisal of staff means people should be working to their full potential and in a consistent fashion to support people living at the home.

What is a review of compliance?

By law, providers of certain adult social care and health care services have a legal responsibility to make sure they are meeting essential standards of quality and safety. These are the standards everyone should be able to expect when they receive care.

The Care Quality Commission (CQC) has written guidance about what people who use services should experience when providers are meeting essential standards, called *Guidance about compliance: Essential standards of quality and safety*.

CQC licenses services if they meet essential standards and will constantly monitor whether they continue to do so. We formally review services when we receive information that is of concern and as a result decide we need to check whether a service is still meeting one or more of the essential standards. We also formally review them at least every two years to check whether a service is meeting all of the essential standards in each of their locations. Our reviews include checking all available information and intelligence we hold about a provider. We may seek further information by contacting people who use services, public representative groups and organisations such as other regulators. We may also ask for further information from the provider and carry out a visit with direct observations of care.

When making our judgements about whether services are meeting essential standards, we decide whether we need to take further regulatory action. This might include discussions with the provider about how they could improve. We only use this approach where issues can be resolved quickly, easily and where there is no immediate risk of serious harm to people.

Where we have concerns that providers are not meeting essential standards, or where we judge that they are not going to keep meeting them, we may also set improvement actions or compliance actions, or take enforcement action:

Improvement actions: These are actions a provider should take so that they **maintain** continuous compliance with essential standards. Where a provider is complying with essential standards, but we are concerned that they will not be able to maintain this, we ask them to send us a report describing the improvements they will make to enable them to do so.

Compliance actions: These are actions a provider must take so that they **achieve** compliance with the essential standards. Where a provider is not meeting the essential standards but people are not at immediate risk of serious harm, we ask them to send us a report that says what they will do to make sure they comply. We monitor the implementation of action plans in these reports and, if necessary, take further action to make sure that essential standards are met.

Enforcement action: These are actions we take using the criminal and/or civil procedures in the Health and Social Care Act 2008 and relevant regulations. These enforcement powers are set out in the law and mean that we can take swift, targeted action where services are failing people.

Information for the reader

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