

Review of compliance

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| St Andrews Care Homes Ltd Westlands | |
| Region: | South East |
| Location address: | 3 High Street Olney Buckinghamshire MK46 4EB |
| Type of service: | Care home service without nursing |
| Publication date: | May 2011 |
| Overview of the service: | Westlands is a care home licensed to provide accommodation for a maximum of 19 persons, including people who require dementia care. |

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

What we found overall

We found that Westlands was meeting all the essential standards of quality and safety we reviewed but, to maintain this, we suggested that some improvements were made.

The summary below describes why we carried out the 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 20th May 2011, observed how people were being cared for, talked with people who use services, talked with staff, checked the provider's records, and looked at records of people who use services.

What people told us

People told us that they had been given the opportunity to visit the home before they moved in to ensure it met with their needs and expectations. They said that the staff treated them as individuals and respected their views and choices. They told us they were consulted with about any changes to their care and support and were able to make decisions about their day to day care. They had access to a dentist, optician, district nurses, doctors and a chiropodist, all of whom visited the home regularly.

They said that they enjoyed the food provided and a choice was always made available to them.

People told us that they felt safe and that staff looked after them well.

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

Outcome 1: People should be treated with respect, involved in discussions about their care and treatment and able to influence how the service is run

People using the service were respected and involved in their treatment and care.

Overall, we found that Westlands Care Home was meeting this essential standard.

Outcome 2: Before people are given any examination, care, treatment or support, they should be asked if they agree to it

Systems were in place to gain people's consent to care and treatment and to act on their wishes.

Overall, we found that Westlands Care Home was meeting this essential standard

Outcome 4: People should get safe and appropriate care that meets their needs and supports their rights

People received care and support which met their individual needs and preferences

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Overall, we found that Westlands was meeting this essential standard.

Outcome 5: Food and drink should meet people's individual dietary needs

People living in the home were provided with a varied and balanced diet and their particular likes and dislikes catered for.

Overall, we found that Westlands Care Home was meeting this essential standard

Outcome 6: People should get safe and coordinated care when they move between different services

Staff supported people living in the home to obtain health and specialist support, care and treatment they require.

Overall, we found that Westlands Care Home was meeting this essential standard

Outcome 7: People should be protected from abuse and staff should respect their human rights

The home had systems in place to protect people from abuse. Staff had received appropriate safeguarding training. They were aware of their responsibilities to protect people and keep them safe. However, whilst measures were in place to handle people's monies safely, they were not always followed in practice.

Overall, we found that Westlands was meeting this essential standard but, to maintain this, we have suggested that some improvements are made.

Outcome 8: People should be cared for in a clean environment and protected from the risk of infection

The home had policies and procedures in place to control the spread of infection. The environment was kept to a good standard of cleanliness.

Overall, we found that Westlands Care Home was meeting this essential standard

Outcome 9: People should be given the medicines they need when they need them, and in a safe way

Medication was managed safely and securely and people received their medication in a timely manner. Any errors were acted upon and dealt with appropriately and in a timely manner.

Overall, we found that Westlands Care Home was meeting this essential standard

Outcome 10: People should be cared for in safe and accessible surroundings that support their health and welfare

The design and layout of the building was suitable for the needs of the people who lived in the home. However there were no assessments or support plans in place to demonstrate that risks had been identified or managed.

Overall, we found that Westlands was meeting this essential standard but, to maintain this, we have suggested that some improvements are made.

Outcome 11: People should be safe from harm from unsafe or unsuitable equipment

People were provided with equipment to meet with their individual needs. This equipment was in good working order and regularly serviced.

Overall, we found that Westlands was meeting this essential standard.

Outcome 12: People should be cared for by staff who are properly qualified and able to do their job

The service had recruitment procedures in place to ensure that suitable staff were employed to work with people receiving care and support

Overall, we found that Westlands was meeting this essential standard.

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

The home employed sufficient numbers of staff to meet the needs of the people who lived there.

Overall, we found that Westlands was meeting this essential standard.

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

People received care and support from staff who were supervised and whose work was monitored and appraised regularly. Staff were provided with appropriate training to ensure that they had the knowledge and skills to undertake their role competently.

Overall, we found that Westlands was meeting this essential 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

Records showed that there were procedures in place to monitor the care and support provided.

Overall, we found that Westlands was meeting this essential standard

Outcome 17: People should have their complaints listened to and acted on properly

There was an accessible complaints policy and procedure in place to assist people in raising any concerns. People knew who to speak to if they had any complaints and were confident that any concerns would be dealt with appropriately.

Overall, we found that Westlands was meeting this essential standard.

Outcome 21: People's personal records, including medical records, should be accurate and kept safe and confidential

People's personal records were individual, up to date and stored securely as were those of the staff team. Any accidents and incidents were documented and logged appropriately.

Overall, we found that Westlands was meeting this essential standard.

Action we have asked the service to take

We have asked the provider to send us a report within 14 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.

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 1: 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 1: Respecting and involving people who use services

Our findings

What people who use the service experienced and told us
People told us that they had been given the opportunity to visit the home before they moved in to ensure it met with their needs and expectations. They said that the staff treated them as individuals and respected their views and choices. They told us they were consulted with about any changes to their care and support and were able to make decisions about their day to day care. Examples given included what time they wished to go to bed and get up, what they liked to eat and if they wished to join activities or spend time alone.

Other evidence
Staff told us that people were always consulted with on a day to day basis to ensure their wishes and views were heard and acted on where possible. We were told that an independent advocate would assist people in getting their voices heard if required and that one person had this service in the past. An advocate is an independent person who helps people who cannot make some or all

of the decisions about their care, treatment and support.

We noted that staff treated people as individuals and spoke to them politely and respectfully. We observed them knocking on people's doors and waiting until they were invited in.

Our judgement

People using the service were respected and involved in their treatment and care.

Overall, we found that Westlands was meeting this essential standard.

Outcome 2: 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 2: Consent to care and treatment

Our findings

What people who use the service experienced and told us
People told us that they were involved in the reviews of their care and their wishes were taken into account. They said that staff had talked to them about the care and support they would require before they moved to the home. People said that their key worker regularly talked to them about their health, social and personal care needs. They were happy with the support that they received.

Other evidence
We looked at three people’s care plans. We found them to contain individual support plans detailing how people wished to be assisted and supported. Within people’s files we saw that care plan agreements had been signed by individuals/representatives to acknowledge agreement to the content. Where the individual was unable to make decisions, best interests meetings were held with others who knew the person, including health professionals, to ensure they acted in their best interests

Our judgement

Systems were in place to gain people's consent to care and treatment and to act on their wishes.

Overall, we found that Westlands was meeting this essential standard

Outcome 4: 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 4: Care and welfare of people who use services

Our findings

What people who use the service experienced and told us
People told us that they had discussed their preferred routines and their individual needs with staff and were satisfied with the care and support they received. They said that they were supported to access health services when required. This included chiropody, district nurses, dental services and optician services.

Other evidence
We looked at a sample of care plans and found them to be individualised, detailed and regularly reviewed.

The risk assessments in people’s records included risks of developing pressure ulcers, risk of falls, if the person took and administered their own medication and any risks associated with mobility and independence. Where risks had been identified, the actions to be taken to reduce them were documented. In the three people’s files we viewed, the risk assessments were up to date and had been reviewed.

People’s files contained a detailed life history and individual profile which gave a

good 'all round' picture of their likes and dislikes and their preferred way of life. They included people's past experiences, hobbies and interests and their preferred times for waking and retiring to bed.

Daily records were completed for each person.

Throughout our visit we observed a good rapport between people using the service, their carers, the care staff and management. Staff were attentive to people's needs and spoke to them in a kindly manner.

Our judgement

People received care and support which met their individual needs, preferences and welfare.

Overall, we found that Westlands was meeting this essential standard.

Outcome 5: 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 5: Meeting nutritional needs

Our findings

What people who use the service experienced and told us
People told us that they enjoyed the food provided and they were always offered a choice of two meals. They told us that they were given good sized portions and a second helping if they wanted more.
We were told the main meal of the day was served at lunchtime and a variety of snacks at teatime.

Other evidence
We observed staff interacting with people during lunchtime and saw that they were available to assist people who required help. People were able to eat their meal at their own pace. They were not rushed and staff assisted in a kindly, dignified manner.

We spoke to the cook who told us that the meals were all home made from fresh ingredients brought locally and menus were changed seasonally. She told us she regularly spoke to people about the meals provided and had a good knowledge of people's likes and dislikes. The cook told us that she was able to cater for different diets, including any therapeutic diets.

There was a good stock of food in the refrigerators, freezers and cupboards. We saw that appropriate records were being maintained. Records showed that the cook

checked the temperature of cooked food before it was served. The refrigerator and freezer temperatures were also monitored to ensure the food was being stored at the correct temperature.

People's care plans contained nutritional screening assessments and they were weighed regularly to ensure they received adequate nutrition and maintained a healthy weight.

Our judgement

People living in the home were provided with a varied and balanced diet and their particular likes and dislikes were catered for. They were weighed regularly to ensure they received adequate nutrition and maintained a healthy weight.

Overall, we found that Westlands was meeting this essential standard.

Outcome 6: Cooperating with other providers

What the outcome says

This is what people who use services should expect.

People who use services:

- Receive safe and coordinated care, treatment and support where more than one provider is involved, or they are moved between services.

What we found

Our judgement

The provider is compliant
with outcome 6: Cooperating with other providers

Our findings

What people who use the service experienced and told us
People told us that they had access to a dentist, optician, district nurses, doctors and a chiropodist, all of whom visited the home regularly. A visiting hairdresser provided services to those who require. One person said that whilst the home provided hairdressing services they had chosen to keep the hairdresser they had before moving into the home. The home supported this person to do so.

Other evidence
Information in care plans showed that advice had been sought from health care professionals when necessary. These included opticians, dentists, district nurses and GP's. Individual appointments and any treatment given was recorded in people's care records.

Our judgement
Staff support people living in the home to obtain health and specialist support, care and treatment they required.

Overall, we found that Westlands was meeting this essential standard.

Outcome 7: 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

There are minor concerns
with outcome 7: Safeguarding people who use services from abuse

Our findings

What people who use the service experienced and told us
People told us that they felt safe and that staff looked after them well. They said that if they had any concerns they would report them to the manager or their key worker.

Other evidence
Staff told us they had access to policies and procedures to guide them on how to deal with any allegations or suspicions of abuse. They told us that they had been provided with safeguarding training during their initial induction. Ongoing training was provided to ensure their knowledge was kept up to date. During discussion we were informed that they were encouraged to use the whistle blowing policy and they told us that they would do so if the need arose.

We looked at how people's money was being managed and were told measures were in place to handle people's money safely. We were informed that people's money was stored separately and securely and individual records were documented to give an up to date account of all transactions. Receipts were kept to show how the monies had been spent.

We checked the records for three people and found that whilst measures were in place, they were not always followed in practice. One of the three files viewed showed that procedures had not been followed. There had been a failure to record

the amount deposited appropriately for one of the three people's records we viewed. We were therefore unable to determine if the balance remaining was correct. The relative was available to speak to us and confirmed how much had been deposited; she checked the transaction records and confirmed that the balance held was correct. The remaining two people's records we checked tallied with that documented and with the amount of money held.

Our judgement

The home had systems in place to protect people from abuse. Staff had received appropriate safeguarding training They were aware of their responsibilities to protect people and keep them safe. However, whilst measures were in place to handle people's monies safely, they were not always followed in practice.

Overall, we found that Westlands was meeting this essential standard but, to maintain this, we have suggested that some improvements are made.

Outcome 8: 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

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| Our judgement |
| The provider is compliant with outcome 8: Cleanliness and infection control |

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| Our findings |
| What people who use the service experienced and told us People told us that their bedrooms and the living accommodation were always kept clean and tidy. |
| Other evidence We observed the home was clean and there were no unpleasant odours evident. Staff told us that they were aware of their responsibilities in relation to the prevention and control of infection. They said that they were provided with a uniform, plastic gloves, aprons and hand sanitizers to prevent any risk of cross infection. They had been provided with infection control training, which was updated on a regular basis. They told us there were policies and procedures in place which they adhered to. We saw a copy of the infection control policy which had been reviewed and updated in March 2011. The manager told us that they had an infection outbreak within the home in March 2011. She told us that isolation procedures were followed as were the infection control measures and the home had been closed to visitors. The care quality commission was notified of this and we were told that the HSE (health and safety executive) were too. The staff files we viewed showed that infection control training was up to date. We observed staff wore protective clothing and gloves whilst providing people with personal care. |

A designated member of staff was responsible for infection control within the home. This member of staff attended regular infection control meetings and undertook regular audits. We saw documentation to show that a recent hand hygiene audit had taken place to ensure staff were adhering to good practice and the organisation's procedures. We were informed that where any areas of non compliance were found, an action plan was drawn up detailing the necessary actions to ensure compliance. We saw documentation to support this. Staff told us that there were procedures in place for the safe handling and disposal of clinical and non clinical waste.

Our judgement

The home had policies and procedures in place to control the spread of infection. The environment was kept to a good standard of cleanliness.

Overall, we found that Westlands Care Home was meeting this essential standard

Outcome 9: Management of medicines

What the outcome says

This is what people who use services should expect.

People who use services:

- Will have their medicines at the times they need them, and in a safe way.
- Wherever possible will have information about the medicine being prescribed made available to them or others acting on their behalf.

What we found

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| Our judgement |
| The provider is compliant with outcome 9: Management of medicines |

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| Our findings |
| What people who use the service experienced and told us People told us that they received their medication in a timely manner and did not have any concerns. |
| Other evidence Procedures were in place for the safe management and administration of people’s medicines. Staff files confirmed that they had been provided with medication training. They had their competency assessed to ensure they had the skills and knowledge to administer medication safely. People’s care plans contained documentation which listed the medication they were taking. Where people wanted to administer their medications themselves, they were supported to do so, wherever possible, within a risk management process. A system was in place to review people’s medication on a weekly basis where they administered their own medication. Medication was stored securely in locked medication cabinet Medication administration records were in good order and showed that people were |

receiving their medications as prescribed. Records were well maintained with staff signatures alongside each prescribed medication dosage time. There was a process in place to report and record where medication had not been taken and the reason for this.

Protocols were in place for 'as needed' medications which were signed by the GP, manager and pharmacist.

We observed some eye drops that were in use but they had not been dated to indicate when they had been opened. The member of staff was able to recall they had been opened 2 days prior to our visit, but this had not been documented. She informed us that this was not usual practice and that the date of opening was usually recorded on the eye drops' container. She told us that she would follow the home's procedure and return the opened medication to the pharmacy to be replaced. She said the replacement would be dated on opening so staff could be confident that the eye drops being administered were in date.

Our judgement

Medication was managed safely and securely and people received their medication in a timely manner. Any errors were acted upon and dealt with appropriately and in a timely manner.

Overall, we found that Westlands Care Home was meeting this essential standard

Outcome 10: Safety and suitability of premises

What the outcome says

This is what people should expect.

People who use services and people who work in or visit the premises:

- Are in safe, accessible surroundings that promote their wellbeing.

What we found

Our judgement

There are minor concerns
with outcome 10: Safety and suitability of premises

Our findings

What people who use the service experienced and told us
People told us that they were happy with their bedrooms and that the facilities provided met their needs appropriately.

Other evidence
People told us that they were able to bring personal effects and memorabilia to personalise their rooms. This was evident when we toured the home. The bedrooms we viewed were personalised with photographs and personal belongings that reflected people’s interests and hobbies.
All areas of the home were kept to a comfortable temperature throughout.
We were told that systems were in place to ensure electrical equipment was tested and in good working order. Likewise the service regularly tested and documented the alarm system and had a fire risk assessment in place to address an event of fire.

A recent audit of the home was undertaken by the fire authority who found some deficiencies in relation to general fire precautions within the home. The deficiencies found were in relation to the reviewing of the fire risk assessment and the security device on the external fire gate. The manager told us that the fire risk assessment had since been reviewed and they were in discussion with the fire safety officer

about the security device on the external fire exit gate. We were told that a further audit was to be undertaken, by the fire authority, by the end of May 2011.

Whilst touring the home we saw one bedroom contained a radiator guard to protect the individual's health and safety, however the guard needed re affixing to the wall. Another person's bedroom contained some cleaning fluid in the en suite; there was no risk assessment in place to show that any risks to this person's welfare had been assessed.

Our judgement

The design and layout of the building was suitable for the needs of the people who lived in the home. However there were no assessments or support plans in place to demonstrate that risks had been identified or managed.

Overall, we found that Westlands was meeting this essential standard but, to maintain this, we have suggested that some improvements are made.

Outcome 11: Safety, availability and suitability of equipment

What the outcome says

This is what people should expect.

People who use services and people who work in or visit the premises:

- Are not at risk of harm from unsafe or unsuitable equipment (medical and non-medical equipment, furnishings or fittings).
- Benefit from equipment that is comfortable and meets their needs.

What we found

Our judgement

The provider is compliant
with outcome 11: Safety, availability and suitability of equipment

Our findings

What people who use the service experienced and told us
People told us that they were happy with the facilities provided at the home as well as their bedrooms and that they met their needs appropriately. They told us that they were provided with suitable equipment to meet their individual needs.

Other evidence
Equipment such as hoists, grab rails and an emergency call bell was provided to meet people’s individual needs. All of the bedrooms, bathrooms and toilets were connected to the call bell system.
The manager told us there were systems in place to ensure that equipment is maintained and serviced appropriately to ensure that people were not at risk from unsuitable or unsafe equipment. The equipment that we saw was in good working order. We did not look at the servicing records during this visit.

Care plans contained documentation to show that moving and handling assessments were in place for each person. They were reviewed and kept up to date. Staff training certificates verified that they were provided with moving and

handling training to assist people safely and consistently.

Our judgement

People were provided with equipment to meet with their individual needs. This equipment was in good working order and regularly serviced.

Overall, we found that Westlands was meeting this essential standard.

Outcome 12: Requirements relating to workers

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 staff who are fit, appropriately qualified and are physically and mentally able to do their job.

What we found

Our judgement

The provider is compliant
with outcome 12: Requirements relating to workers

Our findings

What people who use the service experienced and told us
People told us that they liked the staff who worked at the home and they were always very caring and attentive to their needs and well being. They also told us that they worked very well as a team

Other evidence
We were told that staff did not commence work until appropriate vetting of prospective staff had been undertaken. This included gaining a full and satisfactory Criminal Record Bureau (CRB) clearance and an Independent Safeguarding Authority adult first check, two references and health declaration statements.

We looked at three staff personnel files and found the recruitment process to be robust. All the required documentation was held in the files and appropriate checks had been sought including work permits where necessary.

Our judgement
The service had recruitment procedures in place to ensure that suitable staff were employed to work with people receiving care and support.

Overall, we found that Westlands was meeting this essential standard.

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
People told us there was always enough staff available to help and assist them, both in the day time and during the night. They all said the staff were kind and looked after them well.

Other evidence
We discussed the staffing levels with the manager who informed us that 4 care staff and a team manager/leader were generally rostered to work during the daytime. She told us that she was also in the home if needed. During the night people's needs were met by 2 waking staff with a further member of staff on call if required. People living in the home confirmed that their needs were met in a prompt manner and that they did not have to wait long for a member of staff to help or assist them. There were two part time maintenance staff who both work Monday to Thursday for four and a half hours each.
On the day of our visit staffing levels appeared appropriate to meet the needs of people. No one was seen having to wait for assistance. Staff were observed undertaking care related activities with people and spending time talking to people.

Our judgement

The home employed sufficient numbers of staff to meet the needs of the people who lived there.

Overall, we found that Westlands was meeting this essential standard.

Outcome 14: Supporting workers

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 workers

Our findings

What people who use the service experienced and told us
We did not talk to people about this outcome area but did observe positive interactions between the staff and people living in the home.

Other evidence
Staff told us that they were provided with a good level of training to assist them in their roles.
We looked at a sample of four staff personnel files and saw that the newer staff had completed an induction to familiarise them with the service and working practices. Staff records showed that they were keeping up to date in mandatory training such as moving and handling, safeguarding, fire safety, first aid, infection control and food hygiene. Staff who administered medication had been trained to do so. We saw there had been training sessions on pressure area care and sensory deprivation awareness.
Staff spoke positively about the training opportunities provided. One person told us that they have excellent training opportunities and were enabled to undertake training in subjects over and above the mandatory training. This person said they had asked to attend deaf awareness training and their request was fulfilled.
Staff said they felt very well supported, received regular supervision and found the management team to be very approachable. Staff told us that regular staff meetings

were held, where they could discuss any concerns. They said they were provided with an annual appraisal of their work where any concerns, training needs and personal development were discussed. We saw documentation within staff personnel files to support this.

Our judgement

People received care and support from staff who were supervised and whose work was monitored and appraised regularly. Staff were provided with appropriate training to ensure that they had the knowledge and skills to undertake their role competently.

Overall, we found that Westlands was meeting this essential 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 did not speak to people about this outcome area.

Other evidence
The home had systems in place to monitor the quality of service that people received. People’s views were sought both on an informal and formal basis, through talking to people on a daily basis, during their reviews of care, through the use of quarterly surveys and regular residents meetings.

We saw that people’s care plans were reviewed regularly or where their needs had changed following any incidents and updated as necessary. Any accidents or incidents were documented.

We were informed that quarterly management review meetings are held to review the results of audits, feedback from surveys, any trends in complaints, accidents and incidents. Action plans were put into place detailing any actions to be taken and by whom. We saw an action plan detailing issues raised from last year’s annual surveys with measures in place to address concerns raised, and the dates by which they would be completed.

We saw documentation which confirmed that appropriate health and safety checks

were undertaken and maintenance records were kept

Our judgement

Records showed that there were procedures in place to monitor the care and support provided.

Overall, we found that Westlands was meeting this essential standard

Outcome 17: Complaints

What the outcome says

This is what people should expect.

People who use services or others acting on their behalf:

- Are sure that their comments and complaints are listened to and acted on effectively.
- Know that they will not be discriminated against for making a complaint.

What we found

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| Our judgement |
| The provider is compliant with outcome 17: Complaints |

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| Our findings |
| <p>What people who use the service experienced and told us People told us that they knew who to speak to if they had any concerns or were unhappy and they were confident in doing so. They said if they had any concerns or complaints about any aspect of their care and support they would talk to the manager or their key worker. They were confident that any concerns they may have would be dealt with appropriately.</p> <p>Other evidence We saw an effective complaints procedure was in place to ensure people could voice any concerns that they may have. This was provided in an accessible format to ensure that everybody knew how to make a complaint and the timescales in which they could expect their concerns to be addressed. We were informed that there had been no complaints received during the last 12 months. People told us that residents' meetings are held regularly and they could also bring any concerns up at these. The manager said that she has an 'open door' policy and people and/or their relatives could meet with her to discuss any concerns that they may have.</p> |

Our judgement

There was an accessible complaints policy and procedure in place to assist people in raising any concerns. People knew who to speak to if they had any complaints and were confident that any concerns would be dealt with appropriately.

Overall, we found that Westlands was meeting this essential standard.

Outcome 21: Records

What the outcome says

This is what people who use services should expect.

People who use services can be confident that:

- Their personal records including medical records are accurate, fit for purpose, held securely and remain confidential.
- Other records required to be kept to protect their safety and well being are maintained and held securely where required.

What we found

Our judgement

The provider is compliant
with outcome 21: Records

Our findings

What people who use the service experienced and told us
We did not speak to people about this outcome area.

Other evidence
All individuals had a personalised care plan which had been regularly reviewed with their involvement. Individual risk assessments were also documented and formed part of their care plan.

Staff files and people’s care plans were all stored securely in the office and in line with data protection legislation. During induction staff were made aware of confidentiality.

Any accidents and incidents had been logged and documented appropriately.

Our judgement
People’s personal records were individual, up to date and stored securely as were those of the staff team. Any accidents and incidents were documented and logged

appropriately.

Overall, we found that Westlands was meeting this essential standard.

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 | 11 | 7 Safeguarding people who use services from abuse |
| | <p>Why we have concerns: The home had systems in place to protect people from abuse. Staff had received appropriate safeguarding training. They were aware of their responsibilities to protect people and keep them safe. However, whilst measures were in place to handle people's monies safely, they were not always followed in practice.</p> | |
| Accommodation for persons who require nursing or personal care | 15 | 10 Safety and suitability of premises. |
| | <p>Why we have concerns: The design and layout of the building was suitable for the needs of the people who lived in the home. However there were no assessments or support plans in place to demonstrate that risks had been identified or managed.</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 14 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

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