

Review of compliance

Westgate Healthcare Limited
Westgate House Care Centre

Region:	East
Location address:	Tower Road Ware Hertfordshire SG12 7LP
Type of service:	Care home service with nursing
Date of Publication:	May 2012
Overview of the service:	The service is registered for the activities 'Accommodation for persons who require nursing or personal care, Treatment of disease, disorder or injury and Diagnostic or screening procedures' and accommodates up to 109 people who require nursing and personal care.

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

Our current overall judgement

Westgate House Care Centre 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 2 May 2012, checked the provider's records, observed how people were being cared for, talked to staff and talked to people who use services.

What people told us

Three people told us that they the home was a good place to live in. One person commented: "It is wonderful here, they are very kind and help us how we want." All three people told us that staff respected them, asked them if they were happy with care and listened to them. All three people felt safe. One person explained that they would tell the unit manager (calling them by names) if, "there was any problem, or we wanted something, or to say what we want."

People explained that they had an opportunity to express their views through their residents meeting, that they called "Residents Committee", through "Residents and Families Meeting", through yearly survey or speaking directly to unit managers. One person explained how appreciative they were when staff helped them write their views on the written survey form.

Several people told us that they preferred to sleep with their bedroom door open, but when staff were helping people with personal care the doors were closed to ensure respect for people privacy and dignity. One person wanted to have their doors closed and staff respected this preference and kept the door closed.

Two people commented that staff were knowledgeable and skilled in helping them with all the tasks and particularly singled out the unit manager as, "Very well trained and skilled."

All three people confirmed that they were consulted about their care plan when care plans were reviewed and stated that they had choice regarding their care and provision provided within the home.

One person stated that transport services that take them out were excellent and well coordinated. The same person explained that there were enough staff per each shift to respond when people called them.

What we found about the standards we reviewed and how well Westgate House Care Centre 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.

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 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 told us that they were listened to and respected by staff. They could make their own decisions and their preferences were respected.

A person told us that they preferred to have their bedroom door closed and that staff respected that, while three other people confirmed that they wanted their bedroom doors to be kept open. Another person explained that people could choose between a shower and bath and also in regards to food, that the choices were respected.

Other evidence

We noted that a number of bedroom doors were kept open overnight. Three people confirmed that they wanted their door opened. The unit manager stated that people's wishes were respected and their dignity and privacy promoted. We observed staff going into the person's bedroom to help them with personal care and staff closed the door. We also noted that staff responded within 20 seconds to each call bell ring throughout our visit.

We observed staff talking patiently and gently to people and that staff spent time listening and talking with people, making them more relaxed and comfortable.

We observed a person going through the home freely, without restrictions, in their

electric wheelchair. We saw four people and one staff member in the main lounge on this 35-bedded unit, engaging and communicating together.

The operational manager showed us a brochure that was given to all people who wanted to come to the home. The brochure contained appropriate information and was nicely prepared informing people what to expect if they chose this home to move in.

Our judgement

The provider was meeting this standard. People's privacy, dignity and independence were respected.

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

A person explained to us that they were consulted about their care plan reviews. All three people with whom we spoke told us that they knew their care plans and risk assessment.

A person explained to us that the home arranged a speech therapist to work with them and help them recover after a stroke.

Two people told us that they trusted staff, as "There is a process to evacuate us and the staff know it, especially the unit manager. She knows all the details."

Other evidence

We checked three care plans that contained details of people, of planned care and individual risk assessments drawn to protect people.

We did note that most people's bedroom doors were kept open, but their risk assessment appropriately addressed this issue and three people confirmed that they wanted their doors opened.

During our visit we noted that staff were responding to call bells within 20 seconds. We observed a staff rushing to respond to a call, although the call was about a dropped cup of tea that staff appropriately cleaned up immediately after checking that the person was all right.

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

All three people who we spoke with told us that they felt safe and that they knew how to report any potential problem.

Other evidence

The provider responded appropriately to any allegation of abuse. We spoke with a unit manager who explained the procedures that would be implemented in case of any allegations made.

The operational manager confirmed some past safeguarding actions already completed regarding safeguarding people since the transitional registration in October 2010.

We checked safeguarding training records that showed that staff were update with this training.

The manager was on a two-day safeguarding training during our visit and there was a plan to pass on the training to all staff upon her completion.

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

Three people stated that staff were excellent and two of them commented in more detail, explaining that staff were well trained, they knew their job, they showed a high level of respect and safeguarded people who use the service.

Other evidence

The training record showed that all staff were either up to date with all training or were booked for training sessions in the near future.

The home provided training on subjects beyond the minimum required topics. This included training on mental capacity assessment, tissue viability and pressure sores which was provided externally by skin care specialists. There was also some specialised training for registered nurses. The records showed that this resulted in better outcome for a person who had been admitted originally with grade 3 pressure sores that healed within two months.

The administrator kept accurate records and checked the registration status of nurses and the manager monitored these records.

Staff supervision was up to date according to records and comments that two staff made to us. All staff were supervised six times per year as records also confirmed. The manager supervised all unit managers, they supervised senior staff and seniors were responsible for supervising care assistants.

Two staff members spoken with commented that they felt well supported and added

that they could attend any training they thought would be beneficial to meet people's needs.

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

People who used the service stated that they could talk to the unit manager and the other staff at any time with any comments they wanted to make. One person confirmed that they were supported to fill in a yearly survey and to express their views. All three people told us that their views could be expressed through 'Residents Committee meetings' and 'Residents and Relatives Meetings'.

Other evidence

The operational manager explained the quality review process carried out by the home. She stated that people who used the service were consulted through questionnaires yearly. Relatives were also provided with questionnaires left for them in people's bedrooms to fill in when they visited.

The operational manager showed us records of the last surveys and summarised results showing that most people were very happy with the service.

Staff spoken with showed that they knew people very well and knew about their needs and preferences. Two people explained that they knew staff, too, by their names and trusted to tell them if they wanted to express their views.

Individual risk assessments seen in three people's folders showed that all aspects of risks were appropriately assessed and the measures to minimise the risk were recorded. These records were reviewed and monitored on a monthly basis as records confirmed.

Our judgement

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

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Author	Care Quality Commission
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