

Review of compliance

Hatfield Investments Limited Crossways	
Region:	East
Location address:	1 The Boulevard Sheringham Norfolk NR26 8LH
Type of service:	Care home service without nursing
Date of Publication:	September 2011
Overview of the service:	Crossways is a residential care home that provides personal care, support and accommodation for 24 older people. It is owned and operated by Hatfield Investments Ltd and does not provide nursing care.

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

Our current overall judgement

Crossways was meeting all the essential standards of quality and safety but, to maintain this, we have suggested that some improvements are made.

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

Why we carried out this review

We carried out this review as part of our routine schedule of planned reviews.

How we carried out this review

We reviewed all the information we hold about this provider, looked at records of people who use services, talked to staff and talked to people who use services.

What people told us

We spoke with four people who lived in the home. They told us that their needs were met and that they were consulted about the care and support that they were provided with. People were complimentary about the staff that cared for them and told us that the staff always treated them with respect and that their privacy was respected. They told us that there were enough staff on duty to assist them and that they felt safe living in the home. They also told us that the environment was comfortable and clean and that they were provided with all the equipment they needed.

What we found about the standards we reviewed and how well Crossways 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

People were treated with respect, were consulted and their choices and decisions were recorded and complied with.

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

Care plans are written in a person centred manner and people have their individual needs appropriately assessed and met on admission to the home and as their needs increase.

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

human rights

People had their concerns listened to and dealt with but they were not completely protected because not all staff knew how to recognise, prevent and report abuse.

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

Staff members are competent and trained to meet the individual needs of the people living in the home. However, there is no systematic way of ensuring staff training is kept up to date.

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 comments people make are listened to and acted upon and they are provided with care and support that is monitored and assessed.

Actions we have asked the service to take

We have asked the provider to send us a report within 28 days of them receiving this report, setting out the action they will take to improve. We will check to make sure that the improvements have been made.

Where we have concerns we have a range of enforcement powers we can use to protect the safety and welfare of people who use this service. Any regulatory decision that CQC takes is open to challenge by a registered person through a variety of internal and external appeal processes. We will publish a further report on any action we have taken.

Other information

Please see previous reports for more information about previous reviews.

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

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

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

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

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

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

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

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

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

Outcome 01: Respecting and involving people who use services

What the outcome says

This is what people who use services should expect.

People who use services:

- * Understand the care, treatment and support choices available to them.
- * Can express their views, so far as they are able to do so, and are involved in making decisions about their care, treatment and support.
- * Have their privacy, dignity and independence respected.
- * Have their views and experiences taken into account in the way the service is provided and delivered.

What we found

Our judgement

The provider is compliant with Outcome 01: Respecting and involving people who use services

Our findings

What people who use the service experienced and told us

People living in the home told us that staff consulted them and gave them choices on all aspects of their daily lives. One person said "Staff let me make my own decisions." Another person said "Staff talk to me all the time and I can choose when I get up and go to bed or go out into the town."

We saw that staff spoke with people politely and with respect. One person told us that staff respected their privacy when they were in the bathroom and another said staff always knocked on their bedroom door before entering.

Other evidence

During our visit to the home on 24 August 2011 we looked at three plans of care. We noted that they were complete and contained personal, health and social information that demonstrated that people living in the home were involved in discussions and agreed to the care and support they received. The information clearly told us of the daily routines chosen by each person and recorded their likes, dislikes, preferences and interests.

Staff told us that they supported people living in the home to make their own decisions and to live the life of their choice. Two said "I get to know how people like to be cared

for by talking to them and listening and acting upon their choices and decisions." They told us that they treated people with respect and dignity by regarding each person as an individual and by ensuring that their rights to privacy and to choose and decide were always promoted.

Our judgement

People were treated with respect, were consulted and their choices and decisions were recorded and complied with.

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 told us that staff looked after them well and knew how to care for them. One person said "I get all the help I need, when I need it" and another person stated "This is a really nice place to live and they know when I am not well and call my doctor."

We saw that staff supported people to meet their social and recreational needs. During our visit to the home we observed an exercise class being carried out by staff members with a large group of people living in the home. We noted that this generated a lively and fun atmosphere. People we spoke with confirmed that there was a regular programme of activities and they could choose whether or not to take part.

Other evidence

We looked at the care records held for three people. They showed that people had their needs assessed before they moved into the home and during their stay to ensure their care and support needs were understood and could be met. We noted that everyone had a person centred care plan that held up to date information and care and risk assessments. These explained the health history of the person, the care and support they needed and agreed to, monitored their health and held a daily record of their wellbeing and changing needs. They also recorded social information about each person such as the person's life history and their past or current hobbies and interests to help staff to personalise the conversations they have with people living in the home.

Staff with whom we spoke accurately knew the care, health, support and preferences of people living in the home and showed that they ensured that people received safe and

appropriate care and support. They told us that the plans of care held relevant information and that they used them to find out about the care and support that each person required. They also told us that they took part in a handover session at the beginning and end of each shift to ensure that new information, on each person living in the home, was shared with staff and recorded. They showed us that they had knowledge of the social history of most of the people living in the home and told us that they would talk to the person if they did not know about their past.

Our judgement

Care plans are written in a person centred manner and people have their individual needs appropriately assessed and met on admission to the home and as their needs increase.

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

There are minor concerns with Outcome 07: Safeguarding people who use services from abuse

Our findings

What people who use the service experienced and told us

People with whom we spoke told us that they felt really safe living in the home. Three people stated "Staff treat me very well and I feel relaxed and safe living here."

Other evidence

We have not received any notifications of safeguarding incidents at the home since the last key inspection dated 25 September 2008.

Staff we spoke with showed us that they knew how to ensure that people were safe and how to access the information they needed to ensure people received the medical and social care and support they needed. They demonstrated that they knew how to protect people's human rights through choice but they were unsure of how to recognise, prevent and report abuse.

We discussed staff lack of knowledge on safeguarding vulnerable adults with the manager. They told us that they and their staff team made every effort to ensure that people living in the home were protected from abuse. They told us that some senior staff members had completed training in how to recognise, prevent and report abuse, but that most staff members had not undertaken the training. They told us that they would arrange for all staff to complete the training.

Our judgement

People had their concerns listened to and dealt with but they were not completely protected because not all staff knew how to recognise, prevent and report abuse.

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

There are minor concerns with Outcome 14: Supporting staff

Our findings

What people who use the service experienced and told us

People we spoke with were complimentary about the approach of staff that worked in the home. One stated "Staff members are excellent, friendly and kind" another told us "Staff are very good and give me all the help I need." They all told us that staff knew how to care for them.

Other evidence

During our visits to the home on 24 August 2011 we viewed the staff training records and noted that all staff had completed mandatory and specialist training to ensure that they knew how to meet the needs of each person. We noted that staff had completed updated training in some subjects. However, we were not able to identify when each staff member needed to update their training because a training matrix was not held that showed that updated training was planned and undertaken by staff in a timely way.

We discussed the lack of planned updated training information with the manager. They told us that staff members did complete updated training and that they would create a training matrix to show that the training was planned and to ensure that each staff member undertook updated training when they needed to.

Staff with whom we spoke told us that they took part in training to ensure that they were trained to meet the needs of everyone living in the home. They told us that if the needs of the person changed and they needed training that the Manager arranged for it to be carried out.

Our judgement

Staff members are competent and trained to meet the individual needs of the people living in the home. However, there is no systematic way of ensuring staff training is kept up to date.

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 we spoke with told us that staff members regularly asked them if they were happy with the service they received. They told us that they could discuss any concerns they had about their care and support and/or the running of the home with the manager and staff members at any time. One person told us "If I am unhappy about anything the staff listen to me and help me sort it out." Other people said "I have no complaints and if I did I would tell the manager and they would sort it out."

Other evidence

We spoke with the manager and they told us about the various methods used to check the quality of the service. They explained that a survey questionnaire was sent out to everyone each year to gather comments and views of people using, visiting and working in the home. They told us questions were asked about the running of the home, quality of care and support provided, food, activities, complaints and concerns and the improvements needed. The manager told us that from the replies they received they compiled a plan of improvements to the service provided and the home. This was confirmed in the Quality Audit Survey seen to have been carried out in May 2011.

They also said that staff carried out monthly reviews with each person living in the home and that every day staff discussed the needs of each person during each shift handover. They explained that this ensured that the service people living in the home received was monitored, that people were consulted on if they were happy with the changes made to their plan of care and that staff were aware of the changes and

agreements made.

Our judgement

The comments people make are listened to and acted upon and they are provided with care and support that is monitored and assessed.

Action we have asked the provider to take

Improvement actions

The table below shows where improvements should be made so that the service provider **maintains** compliance with the essential standards of quality and safety.

Regulated activity	Regulation	Outcome
Accommodation for persons who require nursing or personal care	Regulation 11 HSCA 2008 (Regulated Activities) Regulations 2010	Outcome 07: Safeguarding people who use services from abuse
	Why we have concerns: People had their concerns listened to and dealt with but they were not completely protected because not all staff knew how to recognise, prevent and report abuse.	
Accommodation for persons who require nursing or personal care	Regulation 23 HSCA 2008 (Regulated Activities) Regulations 2010	Outcome 14: Supporting staff
	Why we have concerns: Staff members are competent and trained to meet the individual needs of the people living in the home. However, a record of the plan of updated training that each staff member needs to complete is needed to ensure staff members remain up to date and fully trained.	

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 28 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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Care Quality Commission

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