

Review of compliance

<p>R & E Kitchen Springfield House Care Home</p>	
<p>Region:</p>	<p>South East</p>
<p>Location address:</p>	<p>95-97 Portsmouth Road Woolston Southampton Hampshire SO19 9BE</p>
<p>Type of service:</p>	<p>Care home service without nursing</p>
<p>Date of Publication:</p>	<p>November 2011</p>
<p>Overview of the service:</p>	<p>Springfield House is a privately owned care home for older people who have dementia needing personal care and accommodation. It provides care for up to 23 older people. It is registered to provide 'Accommodation for persons who require nursing or personal care'. The registered providers are R & E Kitchen and the registered manager is Ms. Julie Harris.</p>

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

Our current overall judgement

Springfield House Care Home 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 to check whether Springfield House Care Home had made improvements in relation to:

Outcome 16 - Assessing and monitoring the quality of service provision

How we carried out this review

We reviewed all the information we hold about this provider, carried out a visit on 7 October 2011, checked the provider's records, observed how people were being cared for and talked to people who use services.

What people told us

We spoke to one person in their own room. They told us they liked living in the home and felt safe in the home. They told us staff work hard and try to meet all their needs.

What we found about the standards we reviewed and how well Springfield House Care Home was meeting them

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 service has put more formal systems in place to ensure people who use the service are safe and that the quality of care provision is risk managed. The service is compliant with this outcome.

Other information

In a previous review, we suggested that some improvements were made for the following essential standards:

- 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

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

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 16: Assessing and monitoring the quality of service provision

What the outcome says

This is what people who use services should expect.

People who use services:

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

What we found

Our judgement

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

Our findings

What people who use the service experienced and told us

We spoke to one person in their own room. They told us they liked living in the home and felt safe in the home. They told us staff work hard and try to meet all their needs.

Other evidence

We visited the service in July 2011 and found the service was non compliant with this outcome. A compliance action was made. The service informed us in writing what action they were going to take to ensure they would be compliant with this outcome. This visit was to check the service had taken appropriate action and was compliant with this outcome area.

During this visit the manger was able to show us the action she had taken since our previous visit. Files had been created relating to quality audits in the home. The manger stated she had delegated some audits to other members of staff. The cook confirmed they were responsible for checking the kitchen was kept clean and ensuring staff followed the cleaning schedules. The manager stated she was responsible for ensuring all areas of the home were kept clean. She told us this involved her looking in people bedrooms and ensuring all areas were clean and tidy.

The manager told us more formal ways of monitoring the service people receive were in place. All comments and complaints are recorded centrally. The manager stated this ensured she was able to look for any patterns of concerns.

The manger showed us evidence that surveys had been sent out to family members and people living in the home. The manager told us professional surveys were still being created. We looked at some surveys which had been completed by people living in the home. It was noted one person had made comments about the lockable storage in their room. When speaking to this person they confirmed staff had tried to find a key for the lockable storage unit in their room. The manager confirmed this was in hand. The person told us staff in the home work very hard to try and meet their needs.

Our judgement

The service has put more formal systems in place to ensure people who use the service are safe and that the quality of care provision is risk managed. The service is compliant with this outcome.

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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