

Review of compliance

Mrs P Crossley Clanfield Residential Home	
Region:	East Midlands
Location address:	3 Toll Bar Road Islip Kettering Northamptonshire NN14 3LH
Type of service:	Care home service without nursing
Date of Publication:	May 2012
Overview of the service:	Clanfield Residential Home is a large residential home which is owned and managed by Mrs P Crossley. It is registered to provide accommodation for up to 30 people who require nursing or personal care.

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

Our current overall judgement

Clanfield Residential Home 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 12 April 2012, observed how people were being cared for, looked at records of people who use services, talked to staff and talked to people who use services.

What people told us

There were 26 people living at the service when we visited on 12 April 2012 and 19 April 2012.

We spoke with three people in residence and they told us they had received the support they needed. One person said, "the staff are very kind." Another person told us that the home was "very good."

One relative who was visiting told us the food was "excellent." Another visitor told us that they could join in with the activities with their family member, such as DVD race nights and watching musical entertainers.

We used the Short Observational Framework for inspection (SOFI). SOFI is a specific way of observing care to help us understand the experience of people who could not talk with us.

What we found about the standards we reviewed and how well Clanfield Residential Home 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's views and experience were taken into account in the way the service was provided and delivered in relation to their care. The provider was meeting this regulation.

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

People experienced care, treatment and support that met their needs and protected their rights. The provider was meeting this regulation.

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

People who used 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. The provider was meeting this regulation.

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

People were cared for by staff who were supported to deliver care and treatment safely and to an appropriate standard. The provider was meeting this regulation.

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 had an effective system in place to regularly assess and monitor the quality of service that people received. The provider was meeting this regulation.

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 were supported in promoting their independence and community involvement.

We spoke with three people living at Clanfield Residential Home. They told us there were a good range of activities and we saw people taking part in craft activities. We spoke with four relatives who all said that they could talk to the manager at any time if they wanted to discuss any issues. We observed staff treated people with dignity and respect when supporting them with eating and moving around the home. We saw that during lunchtime, people were given choices of food and drink at that time so that people could see what they were choosing.

Other evidence

People were involved in making decisions about their care.

We looked at two care plans which showed that six monthly reviews were held with the person and their family members wherever possible to make decisions about how they would like to be supported by staff.

We saw that there was a family notice board in the lounge area for family members to keep updated on any new information. We saw notes of a recent resident's meeting

which were displayed on the notice board. Another meeting had been scheduled for two months time.

An activities co-ordinator was employed to offer daily activities for people such as craft activities, quizzes, trips out and one to one chats. There were also activities offered by visitors arranged by the activities co-ordinator, such as exercise sessions and musical entertainment.

Our judgement

People's views and experience were taken into account in the way the service was provided and delivered in relation to their care. The provider was meeting this regulation.

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's needs were assessed and care and treatment was planned and delivered in line with their individual care plan.

We spoke with three people living at the home who said they liked living at the home and they received the support they needed.

Relatives we spoke with said the care their family member received was very good. One relative told us they often arrived at different times of the day and had always been happy with their family member's care. Another relative said they attended their family member's care review the week before our visit. They said that improvements suggested at the review had already been put into place.

Other evidence

Care and treatment was planned and delivered in a way that ensured people's safety and welfare.

We looked at two people's care records which detailed their preferences in areas such as personal care, support with mobility and communication. The manager told us care records were reviewed monthly and we saw in people's care plans that reviews had taken place. We saw risk assessments were in place where needed and these had been regularly reviewed to ensure that each person's changing needs were met.

One person living at the home required additional support from the district nurse and

dietician and regular visits from the GP. We saw in the person's care record that health advice had been gained when needed. Health professionals and the person's family had been involved in decisions about the person's care.

Another person's care record showed that at her care review all aspects of her needs had been discussed with her and her family member and they had signed the review record. The views of the person and their family member had been recorded. The person stated that, "staff are all very good to me". The person's family member said that they were happy with the care their mother received.

A survey had been sent to people living at the home and their family members within the last three months. The results of the survey showed that people had stated that different aspects of the home were either good or excellent. We saw that a staff survey had been completed in November 2011. Staff had raised issues about the activities offered for people in the home. The manager said they had addressed the issues and activities were now offered in another lounge and on a one to one basis. We saw people's activity records which showed that people were offered one to one activities.

Our judgement

People experienced care, treatment and support that met their needs and protected their rights. The provider was meeting this regulation.

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

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.

People we spoke with said they felt safe living at Clanfield Residential Home.

Other evidence

The provider responded appropriately to any allegation or concern about abuse.

Staff said they had received safeguarding training. They showed a good understanding of what they would do if they witnessed or suspected any form of abuse. We looked at staff training records that confirmed staff had received training in safeguarding vulnerable adults.

Where there had been safeguarding concerns, the manager and staff had responded by communicating with health care professionals, the local county council Safeguarding Team and people's families for the well being of the people who lived at the home.

Our judgement

People who used 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. The provider was meeting this regulation.

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

Staff were able to obtain further relevant qualifications.

We spoke with three people who said staff supported them very well. Relatives we spoke with were very happy with the care provided to their family members.

Other evidence

Staff received appropriate professional development.

Staff said they had received all the training they needed. We saw staff training records which showed that staff had received mandatory training such as manual handling and health and safety. Staff had extra training where needed in dementia, end of life care and the Mental Capacity Act which meant that they could meet people's individual needs.

We saw records which showed that the deputy manager or other senior staff held individual supervision meetings with staff every six weeks. Staff also had annual appraisals to assess their performance over the last year and to plan their training for the year ahead. The deputy manager said that she regularly checked staff competency by observing staff supporting people in the home. The deputy manager and staff said there were regular staff meetings and that notes were kept of the meetings. The deputy manager said that the staff meetings had recently changed to make them more focussed on certain staff which had worked well.

Our judgement

People were cared for by staff who were supported to deliver care and treatment safely and to an appropriate standard. The provider was meeting this regulation.

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 use the service, their representatives and staff were asked for their views about their care and treatment and they were acted on.

Relatives of people living at the service said that the manager listened to their views and made any necessary improvements.

Other evidence

The provider took account of complaints and comments to improve the service.

The deputy manager said that she carried out monthly monitoring checks on all areas of the running of the home. This covered areas such as medication arrangements for storage and administration, randomly checking care records and health and safety. A senior member of staff carried out monthly checks on staff training. One member of staff we spoke with said they were reminded by the training coordinator when their training was due to be renewed. Another member of staff analysed accidents in the home to check for any trends so that people's individual needs could be monitored.

The deputy manager told us that where maintenance improvements were needed such as building repairs, these were written in a book for the maintenance person to complete. She said that the maintenance person signed when work was completed and that she checked the book regularly.

There were annual surveys sent to people living at Clanfield Residential Home and their

family members. The last survey was completed within the last three months. A member of staff had produced a summary of the comments from the surveys, including actions to be completed as a result. A survey was sent to staff in November 2011. Where staff had raised issues, the manager and deputy manager had ensured that any improvements needed were put into place.

Fire drills were carried out every three months. We saw records which showed that fire alarms were tested monthly.

Our judgement

The provider had an effective system in place to regularly assess and monitor the quality of service that people received. The provider was meeting this regulation.

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

Document purpose	Review of compliance report
Author	Care Quality Commission
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