

Review of compliance

Mrs Asma Khan and Mrs Shagufta Hussain
Greenlands Residential Home

Region:	North West
Location address:	44-46 Green Lane Bolton Lancashire BL3 2EF
Type of service:	Care home service without nursing
Date of Publication:	September 2011
Overview of the service:	Greenlands is a privately owned residential care home registered to provide care for up to 28 people. The property is detached and set in its own well maintained grounds. The home is situated close to local amenities and is accessible for local transport to Bolton town centre. The home has both single and shared rooms. They are individually decorated and furnished and include a wash hand basin and a call

	<p>bell system. The home offers the choice of two lounges and a separate dining room.</p>
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Summary of our findings for the essential standards of quality and safety

Our current overall judgement

Greenlands Residential Home was meeting all the essential standards of quality and safety.

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, 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

Service users spoken with said the staff were very good and one member of staff was described as 'an angel'. Another service user said, "I am very happy here, I am well looked after".

We spoke with a visitor to the home who was very complementary about the management and the staff team saying, "They are great, this home is a very happy place and it's well run". Another visitor told us, "I am happy with the care my relative receives, I have no complaints".

We asked service users about their daily routine, one service user said, "There are plenty things going on".

We were told, "The staff are very polite, visitors are always made welcome, and there is plenty to eat". Another said, "I am very happy here at Greenlands, "The staff are very good".

What we found about the standards we reviewed and how well Greenlands 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 were able to express their views about things that were important to them and had a say about how their care was provided.

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

People who used the service experienced safe and appropriate care and support that met their identified needs.

Outcome 05: Food and drink should meet people's individual dietary needs

People who use the service were provided with appropriate food and drink to meet their nutritional needs.

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

People who use the service are protected from abuse or exploitation within the home.

Outcome 09: People should be given the medicines they need when they need them, and in a safe way

Immediate action had been taken to ensure the security of storage for any controlled drugs and consent sought to ensure that all medication was safely administered.

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

People who use the service had their needs met by sufficient numbers of suitably trained and experienced staff.

Outcome 16: The service should have quality checking systems to manage risks and assure the health, welfare and safety of people who receive care

Systems were in place for gathering and acting upon information about the quality of the service provided.

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

Service users spoken with said the staff were very good and one member of staff was described as 'an angel'. Another service user said, "I am very happy here, I am well looked after".

We spoke with a visitor to the home who was very complementary about the management and the staff team saying, "They are great, this home is a very happy place and it's well run". Another visitor told us, "I am happy with the care my relative receives, I have no complaints".

Other evidence

We visited Greenlands Care Home on 23 August 2011. Whilst looking around the home we saw what assistance was being offered by staff and how they interacted with the service users. We were told that some people were still getting up and dressed and we observed that some were having their breakfast.

We found interactions between staff and service users to be friendly and respectful. Staff were seen knocking on service user's bedroom doors before entering to assist them. Some staff were bi-lingual which benefits people from the different ethnic backgrounds and culture living at the home. Service users were not hurried or rushed

by staff; enough time was given to get people dressed in a relaxed manner.

We asked service users about their daily routine, one service user said, "There are plenty things going on". During our visit the hairdresser was at the home and most of the ladies had their hair washed and set. In the afternoon an entertainer had been booked and we observed that most of the service users were enjoying a Karaoke sing-a-long.

We asked about the food and were told, "The meals were very good". The daily menu was displayed in the foyer. At meal times we observed that most of the service users ate in the dining room, however some preferred their meal in the lounge or in their own room.

We looked in most of the bedrooms; several had been decorated and refurbished. Bedrooms were warm, clean and tidy and most of them had been personalised with the service users own personal belongings.

The home has several bathrooms and toilets on both floors. These were seen to be well equipped with suitable adaptations and bath hoists.

As part of our visit we also looked at care files. Information was up to date and the records had been recently reviewed and updated. Information evidenced the individual care, treatment and support each service user required and how this was to be provided.

Our judgement

People were able to express their views about things that were important to them and had a say about how their care was provided.

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

The service users and a visitor we spoke to were very complementary about the staff and the care given. One visitor said, "I have already booked my room here". One service user was unsure how long she had lived at the home but said, "It's very nice here". Several of the staff had worked at Greenlands for a numbers of years and one said. "I enjoy working here very much".

Other evidence

As part of this review we requested that the provider send us information about how the service ensured that the service users received safe care and treatment that met their needs and protected their rights.

The provider informed us that prospective service users were assessed before they were admitted to home to ensure their individual needs could be met.

We were told that once the assessment had been done and the service user had been admitted to the home a care plan would be put in to place. A care plan details the individual care and support needs that a service user may have and shows how those needs are to be met by staff, for example type of diet required, risk assessments in relation to falls, pressure care etc.

We looked at two care plans. Both contained information to show how the service user was to be cared for. The care plans detailed areas regarding personal care, diet, mobility, medication and personal safety. A daily report sheet was completed at the

end of each shift so that staff were made aware of the service user's general well being and how they had spent their day.

Care plans had been reviewed monthly or more frequently were required and any changes documented.

Our judgement

People who used the service experienced safe and appropriate care and support that met their identified needs.

Outcome 05: 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 05: Meeting nutritional needs

Our findings

What people who use the service experienced and told us

Feedback from service users was positive about the meals provided. We were told by a service user, "The food is very nice".

Other evidence

We observed the lunch time meal. Most of the service users ate their meal in the dining room sat with their friends, others preferred to eat in the lounge or in their own room. Most of the service users could eat independently; those who needed help were assisted by staff in a discreet and sensitive manner. Staff were heard encouraging people to eat their meal and were interacting well with them. Some service users were enjoying chatting with their group of friends over lunch.

Lunch is the main meal of the day and service users were served stew and dumplings with a selection of vegetables, followed by sponge pudding and custard. We asked about an alternative choice to the main meal as this was not written of the menu board. We were told that if someone wanted something different it was not a problem. Service users and their families (so they are aware of what their relatives are eating) may benefit from knowing in advance what choices are available.

Hot and cold drinks and snacks were available during the day. A hot meal was also served late afternoon and suppers are available.

We were shown the food storage and supplies and there was ample fresh, tinned and dried food available.

The home caters for service users who required a soft or pureed diet, a diabetic diet and cultural preferences.

The provider sent us information about this outcome as requested. We were told that a good variety of food were offered and that nutritional assessments were completed. Service users were regularly weighed and this was recorded. We were also told that staff had undertaken training in nutrition.

The provider told us that meal times were flexible and unhurried. The dining room was bright and comfortable environment for service users to relax and enjoy their meals.

Our judgement

People who use the service were provided with appropriate food and drink to meet their nutritional needs.

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

We did not ask service user any questions concerning their views about this outcome.

Staff confirmed that they had undertaken training in the protection of vulnerable adults; this was covered on their induction course on commencement of work and on mandatory refresher training.

Other evidence

The provider sent us information about this outcome as requested. We were told that staff receive training in safeguarding as part of their induction programme.

The home's policy and procedures included: The Safeguarding policy, The local authority Protecting Vulnerable Adults Policy and Whistle blowing. These were accessible to all staff.

We were told that there has been no recent safeguarding referrals or concerns made by the home to the safeguarding team.

Our judgement

People who use the service are protected from abuse or exploitation within the home.

Outcome 09: 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

Our judgement

The provider is compliant with Outcome 09: Management of medicines

Our findings

What people who use the service experienced and told us

We did not ask service user any questions concerning their views about this outcome.

Other evidence

We looked at how medicines were being managed. We were told that only staff who were trained in the safe handling of medicines administered medication.

We observed the lunch time medication round and saw that medication was given in an appropriate manner and that service users were offered a drink to help them swallow their tablets. Staff then recorded on the individuals Medicine Administration Record (MAR) sheet details of the medication the service user had been given. We did a checked some of the medicines against the MAR sheet from the morning medication round and these had all been given correctly.

The home has a small amount of controlled drugs; these were stored in a locked cash tin inside the drugs trolley. These were checked and had been countersigned in the Controlled Drugs Register. Previously the way these drugs were stored would have been acceptable, however legislation now states that all controlled drugs must be stored in a recognised controlled drugs cupboard. The manager has sent us confirmation since our visit informing us that the correct type of cupboard has now been ordered.

It had been brought to our attention by a third party, that following a medicines training

course that staff mentioned that some people at the home had their tablets crushed and were not sure if this was acceptable. We discussed this with the manager who confirmed that four people at the home either had their medication crushed or were given it covertly (hidden). This method of administering medication is only acceptable with consent by the service user's General Practitioner (GP). The manager had some written consent from families but only verbal consent from GPs. In order to protect the service users from risk of harm and staff at the home administering medication incorrectly, written consent must be available or the manager should obtain the medicine in a liquid form. The manager has sent us confirmation since our visit informing us that GPs have now given written consent.

Our judgement

Immediate action had been taken to ensure the security of storage for any controlled drugs and consent sought to ensure that all medication was safely administered.

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

We spoke to some service user about the staff. Those able to comment were happy with the staff, one said, "The staff were very good and one member of staff was described as 'an angel'. Another service user said, "I am very happy here, I am well looked after".

Some of the service users were unable to communicate clearly enough to us, to give their views about the service they received.

Other evidence

On the day of our visit there were 22 service users living at Greenlands. The home is registered for 28 service users however the manager tends to stay under the registered numbers and is using some of the shared rooms for single occupancy.

Staffing ratios in the home appeared to be sufficient to meet the service user's needs. Staff had time to spend with service users and were not dismissive of their needs and requests. On the day of our visit both the owners were there, four carers, the cook and a domestic. The home has two waking staff on duty throughout the night.

We spoke with some staff who told us that they had worked at the home for a number of years. One member of staff confirmed that they had received regular training and supervision.

Our judgement

People who use the service had their needs met by sufficient numbers of suitably trained and experienced staff.

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 ask the service users any questions concerning their views about this outcome.

Other evidence

During our visit we looked at ways in which the service was reviewed to ensure it was run in the best interests of the service users living there.

The provider sent us information about this outcome as requested. We were told that the manager is at the home six days a week. This gives relatives the opportunity to speak with her.

The manager audits care plans, medication, infection control and environmental standards.

The home had regular staff, service users and relatives meetings. We looked at some of the service user satisfaction questionnaires, which had been completed in June 2011. Comments were positive, one said, "The staff are very polite, visitors are always made welcome, there is plenty to eat". Another said, "I am very happy here at Greenlands, "The staff are very good".

Our judgement

Systems were in place for gathering and acting upon information about the quality of the service provided.

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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