

Review of compliance

<p>Dr B A Odedra Neville House Residential Home</p>	
<p>Region:</p>	<p>North West</p>
<p>Location address:</p>	<p>Neville Street Chadderton Oldham Greater Manchester OL9 6LD</p>
<p>Type of service:</p>	<p>Care home service without nursing</p>
<p>Date of Publication:</p>	<p>May 2012</p>
<p>Overview of the service:</p>	<p>Neville House Residential Home provides support with personal care needs to 18 older people. The home provides accommodation on both the ground and first floors in eight single and five shared rooms. A passenger lift is available. On the ground floor there is a large lounge and a dining room.</p> <p>At the rear of the premises there is a</p>

	<p>small car park and garden area. Local amenities such as shops, pubs and local health care services are close by and there are good transport links to Oldham centre.</p>
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Summary of our findings for the essential standards of quality and safety

Our current overall judgement

Neville House 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 9 May 2012, checked the provider's records, observed how people were being cared for, talked to staff, reviewed information from stakeholders and talked to people who use services.

What people told us

At the time of our visit 18 people were living at the home. We spoke with three people and asked them for their views and experiences of staying at the home. We also spoke with two visitors at the home. We heard that people felt they received good care. People told us "Staff look after us properly", "Staff respect you. They are smashing" and "They treat me as though I was someone special". We heard that people felt safe.

We heard that visitors were welcomed. One visitor said that there was "Always a cosy atmosphere in the home". Another visitor said that their relative had stayed in local authority care services previously but the service provided at Neville House Residential Home was even better. The person said staff "Give 120%". We heard one visitor say they had "Complete faith" their relative was all right when they left the care home.

Both visitors told us that there is always something going on no matter what time of day they visited. One person said they played quizzes, games, sing-a-longs, and bingo and watched DVDs.

We heard that people's wishes were respected. One person said "Staff listen to you and you do have choices". People told us the food was very good and that it was "Always homemade".

We heard that the manager and staff were "Amazing" and that they worked hard. People told us they thought the home was very clean.

We spoke with the local authority commissioners. They told us that they monitored the quality of the service provided in the home but were not aware of any concerns.

What we found about the standards we reviewed and how well Neville House 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 who used the service were able to be involved, as far as possible in decisions about their care and support. Their privacy, dignity and independence were respected.

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

People were provided with safe and effective care that was in line with their individual needs and wishes.

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

Systems were in place to minimise the risk of abuse to people the care home supports.

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

People's health and welfare needs were met by staff who were trained, supported and supervised.

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

People received a safe service that was monitored and developed to ensure quality standards were maintained.

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 looked after properly. They said staff worked hard. One person told us "They treat me as though I was someone special", and "Staff listen to you and you do have choices." People said their wishes were respected.

We heard that people benefited from regular social stimulation. People told us that there was many activities going on. One person said they joined in quizzes, bingo, games, sing-a-longs and watching DVDs. They told us that they attended activities in the community using Ring and Ride or black cab taxis for transport. Visitors to the home told us that whenever they visited there was always some activity going on.

One visitor said that she observed the staff treat each person with respect and dignity.

People told us that the food was very good and that they were given choices at mealtimes. We heard that if a person did not like or want what was on the menu then the cook did their best to find an alternative.

Other evidence

When we arrived at the home in the morning, we saw that the majority of people living in the home were sat in the lounge. Music from the 1960s was playing and some

people were singing along to the records. The majority of people were alert and appeared interested in what was happening. We heard that the TV was not switched on until later in the afternoon when there were quizzes or films showing. Later in the morning, staff sat with people in the lounge and held a quiz.

We spoke with care staff who told us that they were involved in providing planned activities twice a day. The manager told us that a person from Age Concern visited once a month to provide additional stimulation. We saw there was an activity board in the hallway near the lounge. The manager told us that the activities displayed on board were in the process of being updated. We heard that people had been consulted about activities they had stated their preferences.

We saw minutes from a "Resident and Relatives" meeting from July 2011 and a copy of a newsletter sent out to people in January 2012. These referred to activities, planned social occasions and redecoration of the home.

We saw that people moved freely about the home, using both their private bedrooms and communal areas as they wished. We saw that care staff were warm and friendly with people and provided support in a respectful way. Staff took the time to explain to people what they were doing, when they were providing assistance.

We looked at some care records and care plans. These showed that new people were assessed before admission to the home and that health and social care assessments were obtained. This helped to ensure that the service was appropriate, and was able to meet the identified needs of a new person. The care records we looked at showed that people were consulted about their personal preferences and this information was included in the care plans.

We interviewed some care staff and they were able to tell us how they ensured people's care needs were met whilst promoting privacy and dignity.

Our judgement

People who used the service were able to be involved, as far as possible in decisions about their care and support. Their 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

People told us that they received good care and that they felt looked after and safe. We saw that the majority of people liked to spend their time in the communal lounge.

One visitor told us that the manager and staff at the home ensured their relative's health care needs were met by arranging GP, optician and podiatry visits when they were needed. Another visitor told us that the manager and staff pampered their relative. The visitor said this made her feel happy her relative was living at the home.

Other evidence

We looked at care records for three people. The records we saw included social work care assessments and the home's pre-admission assessments. We saw that care plans contained a range of health care risk assessments including mental health, moving and handling, falls and nutritional assessments. We saw that people's weights were regularly monitored and the optician and podiatrist visited people in the home.

At the time of our visit, an optician was visiting the home.

The care plan records we looked at contained detailed information, which told us, what the person needed and how they preferred their care and support was to be delivered. We saw that people had been asked about their social backgrounds. This meant that care staff could have a chat with people about the things that were important to them before they moved into the home.

We saw that the manager reviewed each person's care plan and risk assessments each month. The manager told us that she was reviewing the format of the care plan documentation to ensure it complied with legislation. She told us that she would be including with the care plan records evidence that people who received services and or their relatives could sign agreement and consent to their care plans.

We saw that care staff were aware of each person's needs and offered support and assistance in a respectful manner. The care staff we spoke with had a good understanding of each person's individual needs.

Our judgement

People were provided with safe and effective care that was in line with their individual needs and wishes.

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 people specific questions relating to this outcome. However, one person said they felt safe living at the home.

Other evidence

Our records showed that we have not received any safeguarding allegations or concerning information about this service.

We spoke with three care support staff. They told us what action they would take if they suspected abuse or had any concerns about the health and welfare of people they were supporting. Staff confirmed that they had received training in protecting vulnerable adults and we saw staff training certificates for this.

Our judgement

Systems were in place to minimise the risk of abuse to people the care home supports.

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

People spoke positively about the manager and staff in the home. The people living in the home all said that the staff worked hard. The manager and staff were described as "Amazing", "Smashing", "Really good" and "Brilliant".

People told us that they felt they were "Treated as someone special" and "Pampered". One visitor told us that there was good communication between staff.

Other evidence

We interviewed three care staff on duty at the time of our visit. All said they enjoyed working at the home. We heard that the manager was approachable and supportive. Staff told us that they learnt something new every day.

Staff told us that they received plenty of training and this included statutory health and safety training for things like moving and handling and fire safety. Other training included safeguarding people and abuse, medication and dementia care. All but two of the care staff in the home had either a National Vocational Qualification (NVQ) level 2 or 3. The two care staff without the qualification had commenced on a training course to achieve this.

Staff told us they received one to one supervision with the manager and they had regular staff meetings.

We looked briefly at some staff files, which contained records of the training staff had attended and copies of training certificates. Records were available of the regular one

to one supervision and job appraisal meetings staff attended.

Our judgement

People's health and welfare needs were met by staff who were trained, supported and supervised.

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 people specific questions relating to this outcome.

Other evidence

The manager showed us the home's Business Continuity Plan, routine equipment maintenance certificates and a refurbishment action plan for 2011 and 2012. We saw that audits for medication, slip trip and falls had been carried out in recent months. There was an up to date infection control policy and staff's competency in hand washing technique had been assessed in 2011.

The manager had sent out questionnaires in September 2011 to people living in the home and their relatives to ask for feedback about the quality of service provided. The returned questionnaires from people living in the home and relatives rated all aspects of the service and staff as either good or excellent.

We saw minutes from a 'residents and visitors' meeting from July 2011 and a 'Resident's' newsletter. Both showed that people had been consulted about the meals and activities provided in the home.

Staff records showed that supervision was carried out regularly. Minutes of staff meetings were available. Staff confirmed that they attended supervision and the staff meetings.

We saw that care records were reviewed regularly and updated.

The manager told us that they had not received any formal complaints but dealt with people's everyday concerns there and then.

We asked the local authority's commissioning services if they had any concerns about this service. They confirmed they were not aware of any concerns.

Our judgement

People received a safe service that was monitored and developed to ensure quality standards were maintained.

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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