

Review of compliance

Mrs Rita Ethel Farmery and Mr Stuart Peter Farmery
Dovecott Care Home

Region:	Yorkshire and Humberside
Location address:	83 Weelsby Road Grimsby North East Lincolnshire DN32 OPY
Type of service:	Care Home without nursing.
Publication date:	April 2011
Overview of the service:	Dovecott provides care for 20 people. The accommodation is set over two floors. The home has completed a first floor extension providing a further 7 single ensuite rooms and reconfiguration of an existing double bedroom into a single ensuite bedroom. The home is set close to the centre of Grimsby and local parks and other amenities. There is parking to the rear of the building and in side streets next to the home. The owners are developing the garden area and courtyard for service user use. The home has 3 communal areas including a dining room and service users can smoke in a

	designated area. There are ample toilet and bathroom facilities.
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Summary of our findings for the essential standards of quality and safety

What we found overall

We found that Dovecott was not meeting one or more essential standards. Improvements were needed.

The summary below describes why we carried out the 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 the 16 March 2011, observed how people were being cared for, talked with staff, checked the provider's records, and looked at records of people who use services.

What people told us

The group of people currently using the service have a variety of complex needs and communication difficulties and were not able to tell us directly about their care, however we observed interactions between them and the staff that support them. We found that care staff were very aware of the individual personal and healthcare needs of the people that use the service and supported them to make choices about their care and daily life.

During the visit we spoke with a number of relatives who confirmed their satisfaction with the service and told us:

- 'the staff are all lovely and have looked after my father with such kindness and dedication'

- 'I am very happy with the standards of care at the home and have no complaints at all.
- 'the bedroom is nice, he has a few of his personal things here and he is settled, it's always kept clean and tidy.'
- 'I have recently completed a survey about the home, I am very pleased with everything'.

What we found about the standards we reviewed and how well Dovecott was meeting them

Outcome 1: People should be treated with respect, involved in discussions about their care and treatment and able to influence how the service is run

Our review of this service has shown us that people were involved in the decision making about the home and supported to make choices about their care and daily lives as far as they were able to do so.

- Overall, we found that Dovecott Care Home was meeting this essential standard.

Outcome 2: Before people are given any examination, care, treatment or support, they should be asked if they agree to it

Our review of this service has shown us that people who use the service were supported in providing consent to care and treatment. Where people who use the service lack capacity to give consent there were procedures in place to ensure that formal assessment was undertaken and best interest meetings were held.

- Overall, we found that Dovecott Care Home was meeting this essential standard.

Outcome 4: People should get safe and appropriate care that meets their needs and supports their rights

Our review of this service has shown us that people's needs were assessed, planned for and met in the home and they had access to a range of health and social care professionals. A risk management plan, to guide staff when supporting a specific person, would ensure a consistent approach to their care.

- Overall, we found that improvements were needed for this essential standard.

Outcome 5: Food and drink should meet people's individual dietary needs

Our review of this service has shown us that people's nutritional needs were assessed and met through a varied, nutritious menu and professional input when required.

- Overall, we found that Dovecott Care Home was meeting this essential standard.

Outcome 6: People should get safe and coordinated care when they move between different services

Our review of this service has shown us that the home cooperates with other providers and relevant services ensuring that people receive coordinated care, treatment and support.

- Overall, we found that Dovecott Care Home was meeting this essential standard.

Outcome 7: People should be protected from abuse and staff should respect their human rights

Our review of this service has shown us that the home had staff training and policies and procedures in place to ensure that people were safeguarded from abuse.

- Overall, we found that Dovecott Care Home was meeting this essential standard.

Outcome 8: People should be cared for in a clean environment and protected from the risk of infection

Our review of this service has shown us that the home was clean, hygienic and had procedures for the prevention and control of infection which protects people who use the service as far as reasonably practicable from the spread of infection.

- Overall, we found that Dovecott Care Home was meeting this essential standard.

Outcome 9: People should be given the medicines they need when they need them, and in a safe way

Our review of this service has shown us that medicines are handled and administered appropriately. Policies and procedures are in place, staff have received training and regular audits are carried out to ensure that medicines are handled correctly.

- Overall, we found that Dovecott Care Home was meeting this essential standard.

Outcome 10: People should be cared for in safe and accessible surroundings that support their health and welfare

Our review of this service has shown us that people live in a safe, homely and comfortable environment.

- Overall, we found that Dovecott Care Home was meeting this essential standard.

Outcome 11: People should be safe from harm from unsafe or unsuitable equipment

Our review of this service has shown us that people have equipment which meets their assessed needs. The equipment in the home is properly maintained, suitable for its purpose and used correctly.

- Overall, we found that Dovecott Care Home was meeting this essential standard.

Outcome 12: People should be cared for by staff who are properly qualified and able to do their job

Our review of this service has shown us that people who use the service are cared for by staff who have been properly recruited.

- Overall, we found that Dovecott Care Home was meeting this essential standard.

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

Our review of this service has shown us that there are sufficient staff to meet the individual care and welfare needs of the people who use the service and that staffing levels are regularly reviewed.

- Overall, we found that Dovecott Care Home was meeting this essential standard.

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

Our review of this service has shown us that people who live in the home have their care and welfare needs met by staff who are properly trained and supervised in their role.

- Overall, we found that Dovecott Care Home was meeting this essential standard.

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

Our review of this service has shown us that the home had a system in place that monitored the quality of the service it provided. This enabled consultation with people

living in the home and others involved in the service, any shortfalls in the service to be identified and improvements to be made.

- Overall, we found that Dovecott Care Home was meeting this essential standard.

Outcome 17: People should have their complaints listened to and acted on properly

Our review of this service has shown us that there was a system in place for people who use the service or others acting on their behalf to raise comments or complaints with procedures for staff to follow in how these are dealt with.

- Overall, we found that Dovecott Care Home was meeting this essential standard.

Outcome 21: People's personal records, including medical records, should be accurate and kept safe and confidential

Our review of this service has shown us that people who use the service could be confident that their personal records were being stored safely and securely. Consideration to provide larger office accommodation within the service would improve overall storage arrangements and accessibility of records.

- Overall, we found that Dovecott Care Home was meeting this essential standard.

Action we have asked the service to take

We have asked the provider to send us a report within 14 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.

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 1: 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 1: Respecting and involving people who use services.

Our findings

What people who use the service experienced and told us
The group of people currently using the service have a variety of complex needs and communication difficulties and were not able to tell us directly about their care, however we observed interactions between them and the staff that support them. We found that care staff were very aware of the individual personal and healthcare needs of the people that use the service and supported them to make choices about their care and daily life.

Other evidence
When we inspected the home in March 2010, under the previous regulatory system, we found that up to date information about the service was available to help people make a decision about moving in to the home and that arrangements were in place to ensure that people’s needs were properly assessed and that individual needs of people using the service had been planned prior to their admission to the home.
People living in the home told us that they were consulted about their care and

were frequently asked their opinions about life in the home.

North East Lincolnshire CTP visited the home in January 2011 and conducted an audit of the quality of care provided and reviewed how the home had implemented the Dignity in Care Standards. They told us that the home had made satisfactory progress in this area; that they had appointed a dignity champion; that information with regards to the dignity and privacy of people has been displayed within the home and that staff were in the process of making changes to care plans to ensure that personalised information was included.

As part of this assessment we conducted a site visit on 16 March 2011 and reviewed a selection of care records. We found that people had a care needs assessment in place and that some of the assessments and care plans had been personalised and designed to promote the individual needs and wishes of the person involved. The manager showed us a new assessment record and told us that this new format was to be introduced at the home. We reviewed this document and found that it was comprehensive and would prompt staff to record more detailed personalised information relating to the person's needs in each area.

The manager also told us of another new document that was in development. The document was entitled 'This is me' and staff told us that they consulted with individuals and their families to complete the record. We reviewed this document and found that it included information about the person's past life and preferences and choices on aspects of their daily living.

We observed members of staff interacting with people and saw that this was carried out in a way that promoted choice and dignity. We also observed that people were individual in their style of dress and were well presented. The hairdresser was visiting the home at the time of the site visit and we saw people were enjoying this activity.

Our judgement

Our review of this service has shown us that people were involved in the decision making about the home and supported to make choices about their care and daily lives as far as they were able to do so.

Outcome 2: Consent to care and treatment

What the outcome says

This is what people who use services should expect.

People who use services:

- Where they are able, give valid consent to the examination, care, treatment and support they receive.
- Understand and know how to change any decisions about examination, care, treatment and support that has been previously agreed.
- Can be confident that their human rights are respected and taken into account.

What we found

Our judgement

The provider is compliant with outcome 2: Consent to care and treatment

Our findings

What people who use the service experienced and told us
The group of people currently using the service have a variety of complex needs and communication difficulties and were not able to tell us directly about their care; however we observed interactions between them and the staff that support them. We found that care staff were very aware of the individual personal and healthcare needs of the people that use the service and supported them to make choices about their care and daily life.

Other evidence
When we inspected the home in March 2010 under the previous regulatory system we found that: up to date information about the service was available to help people make a decision about moving in to the home, that arrangements were in place to ensure that people’s needs were properly assessed and that individual needs had been planned for prior to admission. People living in the home told us that they were consulted about their care and were frequently asked their opinions about life in the home.

In October 2010 North East Lincolnshire CTP visited the home and conducted an audit of the quality of service provided. They found that the manager had attended training and meetings that had been arranged by the local authority regarding mental capacity and that there was a strong awareness within the home around mental capacity issues.

As part of this assessment we conducted a site visit on 16 March 2011. We reviewed a selection of care records and found that people living in the home or their representatives had been involved in decisions about their care and support.

The manager told us that if a person lacked capacity to make decisions about important aspects of their care, then a best interests meeting would be held with the relevant people involved in supporting that person. When we look at records we found that meetings had been arranged to discuss end of life care for one individual and to review the continued placement at the home for another person using the service.

Our judgement

Our review of this service has shown us that people who use the service were supported in providing consent to care and treatment. Where people who use the service lack capacity to give consent there were procedures in place to ensure that formal assessment was undertaken and best interest meetings were held.

Outcome 4: 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

There are moderate concerns with outcome 4: Care and welfare of people who use services

Our findings

What people who use the service experienced and told us
The group of people currently using the service have a variety of complex needs and communication difficulties and were not able to tell us directly about their care; however we observed interactions between them and the staff that support them. We found that care staff were very aware of the individual personal and healthcare needs of the people and they demonstrated a very kind, patient and courteous approach towards people throughout the visit.

Relatives spoken with during the visit confirmed their satisfaction with the care support provided to their loved ones. They told us ‘the staff are all lovely and have looked after my father with such kindness and dedication’ and ‘I am very happy with the standards of care at the home and have no complaints at all’.

Other evidence
When we inspected the home in March 2010, under the previous regulatory system, we found that the people who lived at the home were very satisfied with way their health and personal needs were being met and that improvements had been made to the quality of recording in the care plans.

In November 2010 North East Lincolnshire CTP visited the service and conducted a review of the quality of care provided. This review included an audit of how the home had implemented the End of Life Standards. They told us that the home had made satisfactory progress in this area; that staff had accessed specific training and that they have utilised the specific care documentation implemented by the community health professionals.

As part of this assessment we conducted a site visit on 16 March 2011. We reviewed a selection of care records for people who used the service and found that the care plans included the assessed needs and the actions care staff were required to take to meet them. We noted that care plans had been updated when needs changed and that risk assessments for nutrition, falls, pressure damage, moving and handling and individual issues such as the need for bed rails and use of the call bell had been completed. Where staff had identified a medium or high risk a support plan had been developed that identified any specific equipment and care support required.

We also found that one person's records did not include a risk management plan to provide staff with guidance in how to manage challenging behaviours displayed by this individual. These behaviours had been directed towards staff when they were providing support with personal care needs. Staff told us that this person often went into other people's bedrooms and picked up their possessions. The manager told us that the behaviour of this person had recently changed and that a reassessment was being conducted that included monitoring by health professionals.

We reviewed the daily records made by staff and found them to be detailed and that they provided a good account of how people's needs were met on a day to day basis. Staff had recorded how people had spent their day and what they had enjoyed doing, they also recorded any changes in the person's health and well being and if they required any medical intervention.

In one person's care records we found that the home had worked with the community health team to provide end of life support and that the home had contributed to the Liverpool Care Pathway recording. We also found that pain monitoring charts and detailed records of nutritional and fluid intake had been maintained for this individual. The manager told us that they always tried to ensure people had a choice to remain in the home at the end of their life.

At the site visit we observed how staff interacted with people living in the home and found that they made the time to spend with people and that they enabled people to make choices about their care and how they wanted to spend their time even where their understanding and communication was very limited.

Our judgement

Our review of this service has shown us that people's needs were assessed, planned for and met in the home and they had access to a range of health and social care professionals. A risk management plan, to guide staff when supporting a

specific person, would ensure a consistent approach to their care.

Outcome 5: 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 5: Meeting nutritional needs

Our findings

What people who use the service experienced and told us

The group of people currently using the service have a variety of complex needs and communication difficulties and were not able to tell us directly about their care, however we observed interactions between them and the staff that support them. We found that care staff were very patient, kind and understood people’s nutritional needs and the support they needed.

Other evidence

When we inspected the home in March 2010, under the previous regulatory system, we found that people were very satisfied with the quality of the meals and that the care records provided clear details of the individual support people required to ensure their nutritional needs were met.

As part of this assessment we conducted a site visit on 16 March 2011. We reviewed a selection of care records for people who used the service and found that the care plans included nutritional risk assessments and details of people’s food preferences and dietary needs. The manager told us that none of the people currently living at the home had any specific dietary needs, other than those who required a ‘soft’ diet and that the dietician was not currently involved with any individuals care. The manager provided us with records that confirmed that the dietician had been

involved in the nutritional management of a person in the past. We found that people's weight had been monitored monthly and when we looked at individual records we found that the weight of these individual's had remained stable.

During the site visit we observed the lunch time service. We saw that the meal looked appealing and that portions were of good size. The dining area was nicely decorated, tables were well presented and people could choose where to eat their meal. Indeed, some people chose to sit in an adjacent lounge to eat their meal. Some people required equipment such as plate guards to maximise their independence during meal times and we observed that this equipment was provided. During the course of our observations we saw that people appeared to enjoy their lunchtime experience

We observed staff assisting people with their meals and this was undertaken in a caring and sensitive manner. Staff explained to people what was for lunch and asked people what they would like to eat. One person required full assistance with feeding and we found that staff carried this out efficiently without rushing the person to finish. Through out the visit we observed people being offered regular drinks and staff supporting people with this.

The manager told us that the menus were regularly reviewed and that staff had received additional training in this area. The additional training attended by staff was with regards to management of nutrition and specifically for those people who had eating and drinking difficulties.

Our judgement

Our review of this service has shown us that people's nutritional needs were assessed and met through a varied, nutritious menu and professional input when required.

Outcome 6: Cooperating with other providers

What the outcome says

This is what people who use services should expect.

People who use services:

- Receive safe and coordinated care, treatment and support where more than one provider is involved, or they are moved between services.

What we found

Our judgement

The provider is compliant with outcome 6: Cooperating with other providers

Our findings

What people who use the service experienced and told us

The group of people currently using the service have a variety of complex needs and communication difficulties and were not able to tell us directly about their care. The home involved support from health professionals and other services to ensure the health and wellbeing of people was promoted and maintained.

Other evidence

When we inspected the home in March 2010, under the previous regulatory system, we found that the care records for people contained assessments from the local placing authority and those completed by staff working at the home both prior to or on admission to the home. We found that senior staff and management staff had been involved in community project work and health initiatives such as infection control management and winter flu crisis meetings.

As part of our assessment of this service we asked the provider for further information about how they comply with this outcome. They provided us with a copy of their data protection policy and their business contingency plan. These documents described the processes that were in place with regards to the sharing of information with other providers or services in an emergency.

This outcome did not constitute part of the site visit. However, when we were assessing compliance with other outcome areas we found information that was relevant to this outcome area.

In the care files we reviewed we found that health and social care professionals such as district nursing services, community mental health team, GP's and consultants had been involved in people's health and social care management. When we spoke to a community psychiatric nurse following the visit they confirmed that they had a positive working relationship with staff at the home. When we reviewed records of home surveys returned by health care professionals we found that they were satisfied with the care given to their patients and considered the staff were always very friendly and keen to assist them.

Our judgement

Our review of this service has shown us that the home cooperates with other providers and relevant services ensuring that people receive coordinated care, treatment and support.

Outcome 7: 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 7: Safeguarding people who use services from abuse

Our findings

What people who use the service experienced and told us

The group of people currently using the service have a variety of complex needs and communication difficulties and were not able to tell us directly about their care. We observed that staff spoke to people in a kind, patient and respectful manner supporting people to make choices about their care and daily living.

Other evidence

When we inspected the home in March 2010, under the previous regulatory system, we found that all the staff had attended safeguarding training earlier in the year and people who use the service felt that the staff would respond to any concerns raised.

Following the last inspection we received concerns regarding the service provided at the home. We passed this information onto the local safeguarding team and an investigation was conducted. The outcome of this investigation was that the allegations made were not substantiated. The report completed as a result of this investigation made comment that they had found that all staff had received first aid training and had responded appropriately to an emergency situation.

As part of this assessment we conducted a site visit on 15 March 2010. During the course of this visit we observed that staff listened to people and showed them respect, and when people requested assistance that this had been provided in a kind and supportive way.

Staff told us the safeguarding reporting procedures that were in place at the home and the action that they would take should they have concerns or witness any abusive practice. We these actions were consistent with guidance contained within the policies and procedures that were in place

Our judgement

Our review of this service has shown us that the home had staff training and policies and procedures in place to ensure that people were safeguarded from abuse.

Outcome 8: Cleanliness and infection control

What the outcome says

Providers of services comply with the requirements of regulation 12, with regard to the *Code of Practice for health and adult social care on the prevention and control of infections and related guidance*.

What we found

Our judgement

The provider is compliant with outcome 8: Cleanliness and infection control

Our findings

What people who use the service experienced and told us
The group of people currently using the service have a variety of complex needs and communication difficulties and were not able to tell us directly about their care. People’s health needs have been supported by adequate infection control processes and there have been no reported outbreaks of infection at the service.

Other evidence
When we inspected the home in March 2010, under the previous regulatory system, we found that staff from the home had been and continued to be involved in health project work such as infection control and pandemic flu management.

As part of our assessment of this service we asked the provider for further information about how they comply with this outcome. The provider submitted this information in the form of a Provider Assessment of Compliance which describes in detail how this service was compliant with this outcome.

The provider told us that policies and procedures were in place and that they had identified a staff representative for the local infection control link meetings. They had implemented the ‘Essential steps to safe, clean care’ and that this involved staff training and regular audits of hand hygiene practices. They also told us that they continued to work closely with the community infection control nurse.

As part of this review we contacted the Environmental Health Agency. They told us that following their inspection of the kitchen facilities in December 2010, that they had made a number of requirements. The majority of the requirements related to aspects of cleaning and food temperature monitoring which the manager confirmed she had taken action to address.

This outcome did not constitute part of the site visit that was conducted on the 16 March 2011. However, when we were assessing compliance with other outcome areas we made observations that were relevant to this outcome area.

We found that the home was clean, tidy and comfortable. However, we also noted that there was an offensive odour emanating from the sitting room carpet. This room was not currently in use due to redecoration and refurbishment and the manager confirmed that the refurbishment of this room included the provision of a new carpet.

During our tour of the premises we found that aprons, gloves, antiseptic gel and hand wash were available throughout the home. Laundry facilities were sited in a separate building and the home employed cleaning and laundry staff.

Our judgement

Our review of this service has shown us that the home was clean, hygienic and had procedures for the prevention and control of infection which protects people who use the service as far as reasonably practicable from the spread of infection.

Outcome 9: 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 9: Management of medicines

Our findings

What people who use the service experienced and told us
The group of people currently using the service have a variety of complex needs and communication difficulties and were not able to tell us directly about their care. We observed that staff were kind and patient when supporting people to take their medicines.

Other evidence
When we inspected the home in March 2010, under the previous regulatory system, we found that improvements had been made to the medication administration records and that both medication practices and storage facilities to be satisfactory. The management had commenced audits of the medication systems and the records produced as a result of these audits included any actions or improvements the staff needed to make.

As part of our assessment of this service we asked the provider for further information about how they comply with this outcome. The provider submitted this information in the form of a Provider Assessment of Compliance which describes in detail how this service was compliant with this outcome.

The provider told us that the home had a system in place whereby all medicines

were signed into the home, stored safely, recorded when administered and disposed of appropriately. They provided detail of the policies and procedures that were in place to guide staff and told us that medications were only administered by people who were suitably trained. The provider told us that as part of the end of life care strategy the home was able to carry a stock of anticipatory medication to support this aspect of people's care.

As part of this assessment we conducted a site visit on 16 March 2011 when we observed a staff member administering medications. We found that the staff member that administered the medications was very patient and sensitive when she administered medications to those people who had little understanding. This member of staff sat with the resident and explained about the medication and waited until it was taken.

In December 2010 an audit of medication practices had been conducted by the pharmacy contracted to provide pharmacy services to the home. We reviewed their report and found that overall the medication systems in the home were well managed. However, at the time of the site visit the manager told us that action had not been taken with regards to the three good practice recommendations that had been made with regards to recording and storage of medication. Following the visit we received confirmation that action had been taken to address these recommendations.

Our judgement

Our review of this service has shown us that medicines are handled and administered appropriately. Policies and procedures are in place, staff have received training and regular audits are carried out to ensure that medicines are handled correctly.

Outcome 10: Safety and suitability of premises

What the outcome says

This is what people should expect.

People who use services and people who work in or visit the premises:

- Are in safe, accessible surroundings that promote their wellbeing.

What we found

Our judgement

The provider is compliant with outcome 10: Safety and suitability of premises

Our findings

What people who use the service experienced and told us
The group of people currently using the service have a variety of complex needs and communication difficulties and were not able to tell us directly about their care. We observed that people were settled and comfortable in their surroundings and staff supported them in choosing where to spend their time.

Relatives spoken with during the visit confirmed their satisfaction with the homes environment. One person told us ‘the bedroom is nice, he has a few of his personal things here and he is settled’.

Other evidence
When we inspected the home in March 2010, under the previous regulatory system, we found that people were happy with their accommodation and the facilities at the home were clean, safe and comfortable.

In October 2010 North East Lincolnshire CTP conducted an audit of the quality of service provided at the home. They found that the home was clean but noted that there had been a slight odour in one of the rooms. Their report told us that the manager had confirmed to them at this time that the carpet in this room was

scheduled for replacement.

As part of this review we asked the provider for further information about how they comply with this outcome. They provided us with a copy of the home's maintenance plan which detailed the improvement work that had been carried out to the facilities and all of the work that had been planned for the year. They also told us that regular checks had been conducted of the water, fire safety, gas and electrical systems.

This outcome did not constitute part of the site visit that was conducted on the 16 March 2011. However, when we were assessing compliance with other outcome areas we made observations that were relevant to this outcome area.

We observed that the home was clean and maintained and that work was in progress to replace a number of the windows in the sitting room. We also noted that this sitting room was on the schedule of redecoration for the home.

Our judgement

Our review of this service has shown us that people live in a safe, homely and comfortable environment.

Outcome 11: Safety, availability and suitability of equipment

What the outcome says

This is what people should expect.

People who use services and people who work in or visit the premises:

- Are not at risk of harm from unsafe or unsuitable equipment (medical and non-medical equipment, furnishings or fittings).
- Benefit from equipment that is comfortable and meets their needs.

What we found

Our judgement

The provider is compliant with outcome 11: Safety, availability and suitability of equipment

Our findings

What people who use the service experienced and told us
The group of people currently using the service have a variety of complex needs and communication difficulties and were not able to tell us directly about their care. Staff were observed using equipment safely when providing support to people in meeting their assessed needs and maximising their independence.

Other evidence
When we inspected the home in March 2010, under the previous regulatory system, we found that equipment and aids were provided to those people that required them to assist their independence; that this equipment had been well maintained and that staff had received training in how to use it safely. The management had introduced regular environment checks so that any issues could be identified quickly and resolved.

This outcome did not constitute part of the site visit that was conducted on the 16 March 2011. However, when we were assessing compliance with other outcome areas we made observations that were relevant to this outcome area.

Our review of care records found that they contained risk assessments where equipment was being used to support people's care, welfare and to maximize their independence.

Equipment such as wheelchairs, hoists, hot water temperatures and window restrictors had been checked monthly and records of any actions taken by staff where faults or problems had been identified were available. We were also provided with records that confirmed that appropriate servicing of equipment had taken place.

Our judgement

Our review of this service has shown us that people have equipment which meets their assessed needs. The equipment in the home is properly maintained, suitable for its purpose and used correctly.

Outcome 12: Requirements relating to workers

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 staff who are fit, appropriately qualified and are physically and mentally able to do their job.

What we found

Our judgement

The provider is compliant with outcome 12: Requirements relating to workers

Our findings

What people who use the service experienced and told us
The group of people currently using the service have a variety of complex needs and communication difficulties and were not able to tell us directly about their care. We observed staff speaking with people in a kind, patient and respectful manner.

Relatives spoken with during the visit told us ‘the staff are lovely’ and ‘the staff are very nice and kind’.

Other evidence
When we inspected the home in March 2010, under the previous regulatory system, we found that a robust recruitment process was in place to ensure staff were safe to look after people living in the home.

In October 2010 North East Lincolnshire Care Trust Plus conducted an audit of the quality of service provided at the home. They found that the home had recruited one new member of staff and that all of the required pre- employment checks had been conducted and that references were in place for this member of staff.

This outcome did not constitute part of the site visit that was conducted on the 16

March 2011. However, when we were assessing compliance with other outcome areas we made observations that were relevant to this outcome area.

The Manager told us that no new staff had been employed at the service since October 2010 and we observed very positive interaction between all staff members and the people living in the home.

Our judgement

Our review of this service has shown us that people who use the service are cared for by staff who have been properly recruited.

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
The group of people currently using the service have a variety of complex needs and communication difficulties and were not able to tell us directly about their care. We observed staff speaking with people in a kind, patient and respectful manner.

Relatives spoken with during the visit told us ‘the staff are lovely’ and ‘the staff are very nice and kind’

Other evidence
When we inspected the home in March 2010, under the previous regulatory system, we received very positive comments about the staff from surveys and discussions during the visit. People told us ‘staff are very caring’ and ‘staff maintain high standards all the time’. When we reviewed the staffing numbers that were available we found that sufficient staff were on duty and staff told us that they enjoyed working at the home.

As part of our assessment of this service we asked the provider for further information about how they comply with this outcome. The provider submitted this information in the form of a Provider Assessment of Compliance which describes in detail how this service was compliant with this outcome.

The provider told us that the home carries out dependency assessments to determine the dependency level of each person living in the home and that this is reviewed regularly. They told us that they use the Residential Forum staffing tool to calculate the number of staffing hours needed to meet the needs of each person. The provider told us that following review of these figures they had established that the staffing hours provided regularly exceeded those required to meet the care needs of people. They also told us that staff turnover was very low and that this ensured continuity of care for people who use the service and that staff were aware of people's needs.

This outcome did not constitute part of the site visit that was conducted on the 16 March 2011. However, when we were assessing compliance with other outcome areas we made observations that were relevant to this outcome area.

When we reviewed care records we found that staff monitored the dependency levels of people and that these were regularly reviewed.

During the visit we observed care practices in the home. Staff appeared organised, had time to spend with people and there were enough staff available to meet the needs of people using the service at that time. The manager told us that they ensured additional staff were on duty at those times when people needed additional cares and gave the example of those people receiving end of life care.

Our judgement

Our review of this service has shown us that there are sufficient staff to meet the individual care and welfare needs of the people who use the service and that staffing levels are regularly reviewed.

Outcome 14: Supporting workers

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 workers

Our findings

What people who use the service experienced and told us
The group of people currently using the service have a variety of complex needs and communication difficulties and were not able to tell us directly about their care. We observed staff speaking with people in a kind, patient and respectful manner.

Relatives spoken with during the visit told us ‘the staff are lovely’ and ‘the staff are very nice and kind’.

Other evidence
When we inspected the home in March 2010, under the previous regulatory system, we received positive comments about the staff who worked in the home. People told us that staff were very caring and that they maintained high standards all the time. We also found that staff were well trained and supervised in their role.

In October 2010 North East Lincolnshire Care Trust Plus conducted an audit of the quality of service provided at the home and found that staff training records were generally up to date.

As part of our assessment of this service we asked the provider for further information about how they comply with this outcome. The provider sent us copies of

staff training records and when we reviewed these records we found that 90% of the care staff have achieved National Vocational Qualification level 2, many of the staff had achieved a higher qualification with three staff having gained level 4.

The provider told us that the home accesses the majority of training through the local authority and when we reviewed the records they provided to us we found that staff had attended both mandatory courses and a wide range of service specific training courses over the past year such as dementia, Liverpool Care Pathway, sensory impairment, eating and drinking difficulties, person centred planning, nutrition and stroke awareness.

This outcome did not constitute part of the site visit that was conducted on the 16 March 2011. However, when we were assessing compliance with other outcome areas we made observations that were relevant to this outcome area.

Staff told us that they received a lot of training which had helped them in their role and that they received regular supervision from their manager. The manager told us that new staff completed an in-house induction programme and that they also completed the Skills for Care induction standards and competencies.

However, when we discussed what training staff had received in the management of difficult behaviour, the manager told us that staff had accessed this course in the past but that some staff were less confident than others in managing aspects of one person's current behaviours. She also told us that staff would benefit from some refresher training and that she would arrange for this training to be delivered.

Our judgement

Our review of this service has shown us that people who live in the home have their care and welfare needs met by staff who are properly trained and supervised in their role.

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

The group of people currently using the service have a variety of complex needs and communication difficulties and were not able to tell us directly about their care. We found that care staff were very aware of the individual personal and healthcare needs of the people that use the service and supported them to make choices about their care and daily life.

One relative told us 'I have recently completed a survey about the home, I am very pleased with everything'.

Other evidence

When we inspected the home in March 2010, under the previous regulatory system, we found that people who used the service and their relatives were consulted about the service and that staff carried out regular management audits to ensure people were safe and free from harm. We also received positive comments about the service from people living in the home and their relatives.

In October 2010 North East Lincolnshire Care Trust Plus conducted an audit of the quality of service provided at the home and found little evidence that the quality assurance programme had been maintained.

As part of our assessment of this service we asked the provider for further information about how they comply with this outcome. The provider submitted this information in the form of a Provider Assessment of Compliance which describes in detail how this service was compliant with this outcome.

The provider told us that annual surveys are given to people who use the service, their relatives and health and social care professionals who regularly visit the service. They told us that the results of these surveys are collated and that these are fed back to the relevant group. In addition to this the provider told us that they carried out regular checks of the environment, equipment, medications and care plans. In doing this they had identified an area for improvement in that they did not have a robust system in place for the recording of incidents, near misses and adverse events that may occur in the home. The provider told us that they plan to devise a document for the recording of such incidents, that can be audited and that this will be in place by the end of April 2011.

When we visited on 16 March 2011 the provider told us that residents meetings had not been held since the previous year and that the reason for this was that the majority of people using the service were now unable to participate in such a meeting. They told us that as these meetings were not being held that they consulted where possible on a one to one basis with individuals and their families about aspects of the service such as activities, menus and home décor.

We reviewed the results of recent surveys issued to relatives and health and social care professionals and found that they were all very positive and that no negative comments had been received. Relatives had made comments that the atmosphere was warm and friendly and that their relative had received a high level of care due to the staff's ability to anticipate needs'.

Our judgement

Our review of this service has shown us that the home had a system in place that monitored the quality of the service it provided. This enabled consultation with people living in the home and others involved in the service, any shortfalls in the service to be identified and improvements to be made.

Outcome 17: Complaints

What the outcome says

This is what people should expect.

People who use services or others acting on their behalf:

- Are sure that their comments and complaints are listened to and acted on effectively.
- Know that they will not be discriminated against for making a complaint.

What we found

Our judgement

The provider is compliant with outcome 17: Complaints

Our findings

What people who use the service experienced and told us
The group of people currently using the service have a variety of complex needs and communication difficulties and were not able to tell us directly about their care. We found that care staff were very aware of the individual personal and healthcare needs of the people that use the service and supported them to make choices about their care and daily life.

One relative told us 'I have recently completed a survey about the home, I am very pleased with everything'.

Other evidence
When we inspected the home in March 2010, under the previous regulatory system, we found that a complaints policy was available and that it had been reviewed and that staff were aware of what action they should take should people raise concerns.

Following this inspection we received concerns regarding the service. We passed these onto the local safeguarding team and they conducted an investigation. The outcome of this investigation was that the allegations made were not substantiated.

In October 2010 North East Lincolnshire Care Trust Plus conducted an audit of the quality of service provided at the home and found that no complaints had been received since their last visit.

This outcome did not constitute part of the site visit that was conducted on the 16 March 2011. However, when we were assessing compliance with other outcome areas we made observations that were relevant to this outcome area.

We observed that complaints information was available in the hall area of the home and relatives told us that they would feel happy to approach the staff if they had any issues.

We have not received any other information to suggest that this service is not compliant with this outcome.

Our judgement

Our review of this service has shown us that there was a system in place for people who use the service or others acting on their behalf to raise comments or complaints with procedures for staff to follow in how these are dealt with.

Outcome 21: Records

What the outcome says

This is what people who use services should expect.

People who use services can be confident that:

- Their personal records including medical records are accurate, fit for purpose, held securely and remain confidential.
- Other records required to be kept to protect their safety and well being are maintained and held securely where required.

What we found

Our judgement

The provider is compliant with outcome 21: Records

Our findings

What people who use the service experienced and told us
The group of people currently using the service have a variety of complex needs and communication difficulties and were not able to tell us directly about their care. We found that people were encouraged to make choices about their daily lives and these were recorded.

Other evidence
When we inspected the home in March 2010, under the previous regulatory system, we found that the quality of recording in the home had improved; that the required records were in place, up to date and regularly reviewed.

As part of our assessment of this service we asked the provider for further information about how they comply with this outcome.
The provider submitted this information in the form of a Provider Assessment of Compliance which describes in detail how this service was compliant with the outcome. The provider told us that policies and procedures with regards to the management of records were in place; that all records were stored securely and that records were managed in accordance with the Data Protection Act 1998. There were

no electronic records held.

This outcome did not constitute part of the site visit that was conducted on the 16 March 2011. However, when we were assessing compliance with other outcome areas we made observations that were relevant to this outcome area.

When we looked at the office where records were stored we found that it was very cramped. We discussed this with the manager and asked that consideration be given to the provision of alternative, larger office accommodation to ensure sufficient storage space was available and to enable easier staff and management access to those records.

We have not received any other information to suggest that this service is not compliant with this outcome.

Our judgement

Our review of this service has shown us that people who use the service could be confident that their personal records were being stored safely and securely. Consideration to provide larger office accommodation within the service would improve overall storage arrangements and accessibility of records.

Action we have asked the provider to take

Compliance actions

The table below shows the essential standards of quality and safety that **are not being met**. Action must be taken to achieve compliance.

Regulated activity	Regulation	Outcome
Accommodation for persons who require nursing or personal care.	9	4
	How the regulation is not being met: Our review of this service has shown us that people's needs were assessed, planned for and met in the home and they had access to a range of health and social care professionals. A risk management plan, to guide staff when supporting a specific person, would ensure a consistent approach to their care.	

The provider must send CQC a report that says what action they are going to take to achieve 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 to us within 14 days of this report being received.

Where a provider has already sent us a report about any of the above compliance actions, they do not need to include them in any new report sent to us after this review of compliance.

CQC should be informed in writing when these compliance 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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