

# Review of compliance

Mr & Mrs J Elliott Park House Rest Home	
<b>Region:</b>	North East
<b>Location address:</b>	2 Richmond Road Stockton-on-Tees Cleveland TS18 4DS
<b>Type of service:</b>	Care home service without nursing
<b>Date of Publication:</b>	June 2012
<b>Overview of the service:</b>	Park House was established in 1983 and is a family owned and run home catering for 17 residents. It is registered for the regulated activity of accommodation for persons who require nursing or personal care.

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

## Our current overall judgement

**Park House Rest 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 to check whether Park House Rest Home had taken action in relation to:

- Outcome 01 - Respecting and involving people who use services
- Outcome 04 - Care and welfare of people who use services
- Outcome 11 - Safety, availability and suitability of equipment
- Outcome 14 - Supporting staff
- Outcome 16 - Assessing and monitoring the quality of service provision

### How we carried out this review

We reviewed all the information we hold about this provider, carried out a visit on 31 May 2012, checked the provider's records, looked at records of people who use services, talked to staff and talked to people who use services.

### What people told us

The visit took place because we were following up concerns raised at an inspection in November 2011. We were following up the issues relating to not treating people with respect, care practices, maintaining equipment, staff training and the quality assurance system. Therefore when talking with people we concentrated on these specific areas.

We spoke with three people who live at Park House and two relatives, all were very positive about the care and support that had been provided. One person said, "I can make my own decisions, I decide what time I go to bed and get up, I am not tied to anything, it is flexible" and "I am definitely treated with dignity and respect."

We saw that Park House had been decorated in preparation for the Jubilee weekend and saw that a party had been arranged. On the second inspection day we saw that photographs of the party were on display, showing people joining in with the festivities and enjoying themselves.

### What we found about the standards we reviewed and how well Park House Rest 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**

The provider was meeting this standard. People's privacy, dignity and independence were respected.

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

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

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

The provider was meeting this standard. People were protected from unsafe or unsuitable equipment.

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

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

The provider was meeting this standard. The provider had an effective system to regularly assess and monitor the quality of service that people receive.

**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

We spoke with three people who live at Park House and two relatives, all were very positive about the care and support that had been provided. One person said, "I can make my own decisions, I decide what time I go to bed and get up, I am not tied to anything, it is flexible" and "I am definitely treated with dignity and respect."

We saw that Park House had been decorated in preparation for the Jubilee weekend and saw that a party had been arranged. On the second inspection day we saw that photographs of the party were on display, showing people joining in with the festivities and enjoying themselves.

##### Other evidence

We carried out an inspection visit to Park House on 25 November 2011. During the visit, we found that there was no evidence to show that people were able to make informed choices around their care and treatment.

During this inspection, we looked at the care records of two people living at Park House. We saw that improvements had been made to the care records, which now included more information about people's individual likes, dislikes and preferences. We also saw that there was evidence contained within the care records to show that people

and/or their relatives had been consulted about their assessments and care plans.

We saw that more person centred information had been collated through people's life histories. We also saw that life story books were about to be introduced. This means that people will have their care provided by staff who have access to more personal information about them and the lives they have led.

We observed people being offered choices in respect of drinks and meals and also that people were able to have a lie in or remain in their own rooms if they chose to do so.

**Our judgement**

The provider was meeting this standard. People's 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

We spent time observing how staff spoke and interacted with people living at Park House. We saw that people were spoken to kindly, offered choices in terms of hot drinks and their meals and saw that they were treated with respect.

A relative we spoke with told us they were very satisfied with how their family member was being cared for. They said, "It is very welcoming and homely, they are always clean and well presented and have gained weight since admission" and "We are always kept informed of changes and in fact they have discussed and then initiated some changes particularly in respect of medication."

##### Other evidence

We carried out an inspection visit to Park House on 25 November 2011. During the visit, we found that care records were in place for people however they did not fully reflect people's current needs and were not written in a person centred format.

During this visit, we looked at two people's care records in detail. We saw that a range of assessments were in place, which had been updated monthly and people's care amended as a result of changing needs. We saw that the overall assessment of care needs document was very much a tick box with little space for additional comments, however we saw that more specific comments had been made in additional supporting documentation. The care progress record was also being used as the basis for people's care plans, which did not contain the level of detail to give staff the information they needed. We were however satisfied that people's needs were being met, for

example, we saw that the risk assessment for skin integrity highlighted the person to be at risk. A brief plan of care was in place, which did not contain information about involvement of the district nurse and the use of pressure relieving equipment. When we spoke with the manager and staff, this had clearly been put in place and the person had a pressure relieving mattress as well as cushion for their chair, which we observed.

On the second inspection day we were shown a new care plan sheet that the manager was going to introduce. Once fully completed this would provide staff with a good level of care information. The manager also confirmed that they were in the process of reviewing and updating the care records for all people living at Park House.

**Our judgement**

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

## 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

We spoke with people who used the service but their feedback did not relate to this standard.

##### Other evidence

We carried out an inspection visit to Park House on 25 November 2011. During the visit, we found that there was insufficient evidence that people's needs could be met if they changed in the future.

During this inspection, we were informed by the provider that planning permission had been granted by the local council for an assisted bathroom and wet room. We also saw that as well as the mobile hoist, additional equipment had been purchased since the last inspection. A stand aid hoist and a set of sit on scales were now available meaning that there was enough equipment to promote the independence and comfort of people who use the service. Staff spoken with said they had received training in the use of the equipment and they felt that the new equipment had made a difference to care delivery.

##### Our judgement

The provider was meeting this standard. People were protected from unsafe or unsuitable equipment.

## 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 spoken with were positive about the staff. One person said, "The girls are smashing, they are always there to help, they are kind and lovely." Another person said, "Staff are lovely, can have a laugh and joke, I get treated really nice here."

Both relatives we spoke with said they were very confident that the staff were well able to meet their family members needs. One relative spoke of the nice relationships with staff and they said, "It is a close knit friendly atmosphere, it is just like going to his/her house."

People living at Park House and relatives, without exception said there was always plenty of staff available and people did not have to wait if they needed anything.

##### Other evidence

We carried out an inspection visit to Park House on 25 November 2011. During the visit, we found that an effective process was not in place to ensure the training programme was kept up to date. Additionally, staff supervision meetings had not taken place on a regular basis.

During this inspection, we looked at a range of training records including training matrices, individual staff training records and training certificates. The way in which training was recorded had improved since the last inspection and the information was now up to date and easier to analyse. One of the matrices showed the mandatory training that had taken place including, safer people handling, food hygiene and fire. We spoke with three staff, who all said they had received regular updates in regard to

training. Two staff also said that additional training was available and had recently completed 'end of life care' training. This means that people were cared for by staff whose health, safety and care practices were reviewed and updated.

We spoke with the three staff about supervision and appraisal and they confirmed that these had taken place. We also looked at staff supervision and appraisal information, which showed that all staff had received regular supervision. We looked at the appraisal information for three staff, all had received a recent appraisal.

**Our judgement**

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

## Outcome 16: Assessing and monitoring the quality of service provision

### What the outcome says

This is what people who use services should expect.

People who use services:

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

### What we found

#### Our judgement

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

#### Our findings

##### What people who use the service experienced and told us

People spoken with said they had the opportunity to attend meetings if they wanted to. They said they were able to express their views.

##### Other evidence

We carried out an inspection visit to Park House on 25 November 2011. During the visit, we found that there were insufficient processes in place to monitor the quality of its service provision.

During this inspection we saw that meetings had been arranged and held for people who live at Park House as well as for the staff who work there. The minutes of these meetings also showed that people were kept informed of forthcoming changes to the home, such as the development of a wet room and that a number of windows were being replaced. The service had a quality audit, which is extremely comprehensive. The manager said that this is completed on an annual basis. There was evidence contained within to show that aspects of the audit had been completed in July 2011 and August 2011, however this had not been fully completed and no action plans were available. The manager acknowledged this and said that they would be progressing this. We also saw that relatives had completed questionnaires since the last inspection, which showed overall satisfaction with the service and care provided.

The manager provided us with copies of audits carried out by the Primary Care Trust's pharmacist as well as infection control. We saw from these audits that the service was compliant in these areas.

**Our judgement**

The provider was meeting this standard. The provider had an effective system to regularly assess and monitor the quality of service that people receive.

# 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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