

Review of compliance

Mr & Mrs P Newton Donness Nursing Home	
Region:	South West
Location address:	42 Atlantic Way Westward Ho Bideford Devon EX39 1JD
Type of service:	Care home service with nursing
Date of Publication:	February 2012
Overview of the service:	Donness is a care home with nursing for up to 34 people. The home has various communal rooms on different floors of the building including dining rooms, lounge rooms and a visitors lounge room. The home has twenty six single bedrooms, and four bedrooms that can be shared if people choose to do so. Many rooms have en suite facilities. There is a large sun balcony with views

	<p>over the sea so people can sit outside. The home is close to local amenities and there is a bus route to Bideford.</p>
--	---

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

Our current overall judgement

Donness Nursing Home was meeting all the essential standards of quality and safety.

The summary below describes why we carried out this review, what we found and any action required.

Why we carried out this review

We carried out this review to check whether Donness Nursing Home had made improvements in relation to:

- Outcome 04 - Care and welfare of people who use services
- Outcome 08 - Cleanliness and infection control
- Outcome 12 - Requirements relating to workers
- Outcome 13 - Staffing

How we carried out this review

We reviewed all the information we hold about this provider, carried out a visit on 26 January 2012, observed how people were being cared for, looked at records of people who use services, talked to staff and talked to people who use services.

What people told us

A responsive review of Donness Nursing Home was completed on 27th July 2011. This was in response to safeguarding alerts relating to:

- how pressure area care is managed
- how well the nursing home cares for people with complex needs
- how infection risks are managed
- how medicines are managed and whether this is done safely
- how staff are recruited and whether this protects people
- whether the staffing levels meet the needs of people.

CQC received an action plan from the registered providers about how they intended to comply with regulations, and we continued to be part of the multi agency strategy meeting which was then closed.

We carried out a further unannounced inspection at Donness Nursing Home on 26 January 2012 to check on compliance of outcome 4 (care and welfare) and outcome 13 (staffing). We wanted to check whether the service was following their action plan to meet the regulations in these outcomes. We also looked at improvements the service had made

so we have included outcomes 8 (infection control) and outcome 12 (recruitment) in this review. Overall, we saw that there have been a lot of improvements made at Donness Nursing home so that compliance has been achieved with outcomes 4 and 13.

We looked at two care plans in detail to see what information had been gathered relating to people's care and welfare. We also looked at handover information used each shift to pass on details about care needs for people.

We spoke with three people currently living at the service, two of whom were people whose records we looked at. Overall comments from people we spoke with were very positive and included, 'there have been a lot of new staff, which is better' and "they're very kind and always check on how you're doing".

We observed the care and support of eight people for short periods of time and spoke with six care workers. We saw that care workers interacted well with people and that care and support was delivered promptly and in a kind and respectful manner. People enjoyed a lively exercised class in the lounge whilst we were visiting and this catered for everyone's needs and abilities.

People looked clean and neat and tidy in their own clothes. The home was spotlessly clean.

Changes had been made to the way needs are recorded for people. These had been streamlined making them accessible, easier to follow and more person centred.

People did not tell us anything about the recruitment of care workers. However, the provider sent us information about this and we saw that there has been improvement in the way checks are done, which ensured that people are protected.

What we found about the standards we reviewed and how well Donness Nursing Home was meeting them

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

People are receiving appropriate care because care plans and other records are complete and reviewed. Peoples' needs are being fully assessed to plan the delivery of all aspects of care and treatment.

Overall we found that Donness Nursing Home was meeting this essential standard.

Outcome 08: People should be cared for in a clean environment and protected from the risk of infection

Infection control measures are consistently followed and this has reduced the risk of cross infection for people living at the home.

Overall, we found that Donness Nursing 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

Recruitment practice has improved so that suitable care workers look after people.

Overall we found that Donness Nursing 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

Staffing levels have improved and are in line with people's needs, which are closely monitored.

Overall we found that Donness Nursing was meeting this essential standard.

Other information

Please see previous reports for more information about previous reviews.

**What we found
for each essential standard of quality
and safety we reviewed**

The following pages detail our findings and our regulatory judgement for each essential standard and outcome that we reviewed, linked to specific regulated activities where appropriate.

We will have reached one of the following judgements for each essential standard.

Compliant means that people who use services are experiencing the outcomes relating to the essential standard.

A **minor concern** means that people who use services are safe but are not always experiencing the outcomes relating to this essential standard.

A **moderate concern** means that people who use services are safe but are not always experiencing the outcomes relating to this essential standard and there is an impact on their health and wellbeing because of this.

A **major concern** means that people who use services are not experiencing the outcomes relating to this essential standard and are not protected from unsafe or inappropriate care, treatment and support.

Where we identify compliance, no further action is taken. Where we have concerns, the most appropriate action is taken to ensure that the necessary improvements are made. Where there are a number of concerns, we may look at them together to decide the level of action to take.

More information about each of the outcomes can be found in the *Guidance about compliance: Essential standards of quality and safety*

Outcome 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

In the previous inspection we found that people did not always have the right level of support when they needed it.

During this inspection visit we spoke with three people using the service and observed the care of another eight people. People spoke very positively about their care and treatment. One person told us that they "really like it here, the staff are very good". Another person told us that "there has been a lot of new staff, which is better".

We spoke to six care workers and all of them told us that staffing levels had been increased during the day time, which meant that they had more time to look after each person and ensure they had the right level of supervision. For example, at lunchtime we saw that a person needing help with eating had constant 1:1 attention from a care worker.

We observed care workers interacting with people at different times of the day in a kind and respectful manner. The calls bells were not ringing for long periods. One person told us "if I ring the bell they come very quickly."

We saw that people were being supported to take part in activities both structured group session and individual one to one time. For example we spent 45 minutes with a group of eight people involved in a lively exercise class. There was a lot of laughter and people were smiling and joining in. The exercises were geared towards each person's abilities, which helped to ensure that everyone was able to take part.

We spoke with the activities coordinator who had been working out a programme of activities for people to help them keep stimulated. The manager also told us that they were working on life stories and activity profiles to help identify what activities people may prefer. We saw some of these in the care files we looked at.

Other evidence

In the previous inspection we found that gaps in plans of care led to increased risks for people because of inadequate monitoring. The provider sent us an improvement plan highlighting changes that had been made, which included streamlining records, reviewing care plans and monitoring progress with this.

We spoke to one person about their needs and health and looked at their care records. We were able to track how this person's health had been monitored, which included having regular blood tests. We saw that there had been regular discussions with the person's GP and requests made for this person to be examined, which resulted in treatment being prescribed. Therefore, records accurately reflected the changing needs of this person and demonstrated how decisions were made with them and other health professionals involved in their care.

We saw that plans had been reviewed at least monthly and that assessments had been updated to reflect changing needs.

Our judgement

People are receiving appropriate care because care plans and other records are complete and reviewed. Peoples' needs are being fully assessed to plan the delivery of all aspects of care and treatment.

Overall we found that Donness Nursing Home was meeting this essential standard.

Outcome 08: 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 08: Cleanliness and infection control

Our findings

What people who use the service experienced and told us

People we spoke to made positive comments. For example one person told us "they keep my room spotless, always coming in cleaning and changing my bed and clothes."

People looked clean and were individually dressed in their own clothes. We observed care workers supporting people to bathrooms or their own bedrooms when their clothes needed changing. This demonstrated that people's dignity was maintained.

The home was spotlessly clean.

Other evidence

We spoke to six care workers about infection control practice. We were told that they always have access to protective clothing such as gloves and aprons, which we observed being used. We observed that care workers followed good hand washing practices after delivering care to an individual.

The care workers told us that the vast majority of linen and clothing was handled by domestic staff. The provider sent us information following the last inspection demonstrating that domestic staff responsible for handling laundry had been given training about the correct machine settings to use and also made aware of guidance (Health Protection Agency and Department of Health) on infection control practice. We spoke to a person responsible for dealing with laundry and were shown a chart that they had been instructed to follow. The person told us that all the domestic staff had been made aware of this and it had been monitored. Therefore, infection control procedures have improved and reduced the risks for people living in the home.

Our judgement

Infection control measures are consistently followed and this has reduced the risk of cross infection for people living at the home.

Overall, we found that Donness Nursing Home was meeting this essential standard

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

People we spoke to did not tell us anything directly relating to the recruitment of new staff.

Other evidence

The provider sent us an improvement plan after the last inspection. Steps had been taken to ensure that appropriate checks were completed prior to employment. The provider told us that they had updated their knowledge about Home Office requirements so that if they employed a foreign worker in the future they would know what to do.

We spoke to six care workers about the checks that are done for newly employed people. Two care workers had been recruited since the last inspection and told us that references and a CRB (criminal records bureau) had been obtained prior to employment. For example, one person told us these checks were done "before I was allowed to work".

Our judgement

Recruitment practice has improved so that suitable care workers look after people.

Overall we found that Donness Nursing was meeting this essential standard.

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

People who lived in the home told us that care workers were always "friendly" and "thoughtful" and there were always enough care workers to meet their personal care needs. One person told us 'there has been a lot of new staff, which is better'.

Throughout the day we saw that people had attention when they needed it and according to their plans of care.

Other evidence

We spoke to six care workers about their work. All of the care workers had a positive attitude and told us that they enjoyed working at the home. They told us that the manager listened and had increased the numbers of care workers on each shift since the last inspection. One person said that this "has taken a lot of pressure off and we have more time to sit and talk to people". Another care worker told us that spending time with people is "actively encouraged" and that "matron's been updating care plans".

We looked at three weeks of duty rosters, which showed actual shifts that had been worked. There were low levels of sickness and leave had been covered. The duty rosters showed that staffing levels had been increased since we last inspected the home.

We spoke to the provider who told us that they were closely monitoring people's needs and had been reviewing these regularly. They told us they would increase the number of care workers further if people's needs changed or more people were admitted to the

home.

Our judgement

Staffing levels have improved and are in line with people's needs, which are closely monitored.

Overall we found that Donness Nursing was meeting this essential standard.

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

Document purpose	Review of compliance report
Author	Care Quality Commission
Audience	The general public
Further copies from	03000 616161 / www.cqc.org.uk
Copyright	Copyright © (2010) Care Quality Commission (CQC). This publication may be reproduced in whole or in part, free of charge, in any format or medium provided that it is not used for commercial gain. This consent is subject to the material being reproduced accurately and on proviso that it is not used in a derogatory manner or misleading context. The material should be acknowledged as CQC copyright, with the title and date of publication of the document specified.

Care Quality Commission

Website	www.cqc.org.uk
Telephone	03000 616161
Email address	enquiries@cqc.org.uk
Postal address	Care Quality Commission Citygate Gallowgate Newcastle upon Tyne NE1 4PA