

Review of compliance

Mrs Fiona Collins Bramley House Residential Home	
Region:	South East
Location address:	Westcott Street Westcott Dorking Surrey RH4 3NX
Type of service:	Care home service without nursing
Date of Publication:	January 2012
Overview of the service:	<p>Bramley House is a turn of the century property set in gardens. The home is registered to accommodate up to sixteen older people.</p> <p>Accommodation is provided over two floors. A stair lift is available.</p> <p>People have their own bedroom. Most bedrooms have their own private</p>

	<p>bathroom and en-suite facilities. The home provides a range of communal areas including a conservatory, which over looks the gardens.</p>
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Summary of our findings for the essential standards of quality and safety

Our current overall judgement

Bramley House Residential Home was meeting all the essential standards of quality and safety but, to maintain this, we have suggested that some improvements are made.

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

Why we carried out this review

We carried out this review as part of our routine schedule of planned reviews.

How we carried out this review

We reviewed all the information we hold about this provider, carried out a visit on 7 December 2011, 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

During this visit we spoke with five people who use the service. All people told us that they were happy living there and they were all satisfied with the care and support that they receive.

We observed the lunchtime meal, which was well presented and nutritious. People told us that they enjoyed their meals and alternative options were available. Two people said that staff are aware of their likes and dislikes.

People living in the home spoke positively about the care and support they receive.

What we found about the standards we reviewed and how well Bramley House Residential Home was meeting them

Outcome 01: People should be treated with respect, involved in discussions about their care and treatment and able to influence how the service is run

There was no information to confirm that peoples plan of care had been agreed by them. People who use the service were treated with respect and their dignity was promoted.

Overall, we found that Bramley House was meeting this essential standard but, to maintain this, we have suggested that some improvements are made.

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

People using the service receive safe care and support.

Overall, we found that Bramley House was meeting this essential standard.

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

People using the service felt safe. Staff were trained and were able to respond appropriately to any actual or suspected abuse that occurred. The provider needs to obtain the up to date Surrey multi agency safeguarding vulnerable adults from abuse procedures.

Overall, we found that Bramley House was meeting this essential standard but, to maintain this, we have suggested that some improvements are made.

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

Systems were in place, which ensures that people using the service have a safe and clean environment to live in

Overall, we found that Bramley House was meeting this essential standard

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

The service has systems in place to ensure staff receive the right training and support to care for people who use the service. Staff receive supervision to support them in their role.

Overall, we found that Bramley House 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

The provider has ensured that people who use the service are safe and the quality of care provision is monitored.

Overall, we found that Bramley House was meeting this essential standard

Actions we have asked the service to take

We have asked the provider to send us a report within 28 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.

Where we have concerns we have a range of enforcement powers we can use to protect

the safety and welfare of people who use this service. When we propose to take enforcement action, our decision is open to challenge by a registered person through a variety of internal and external appeal processes. We will publish a further report on any action we have taken.

Other information

Please see previous reports for more information about previous reviews.

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

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

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

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

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

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

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

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

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

Outcome 01: Respecting and involving people who use services

What the outcome says

This is what people who use services should expect.

People who use services:

- * Understand the care, treatment and support choices available to them.
- * Can express their views, so far as they are able to do so, and are involved in making decisions about their care, treatment and support.
- * Have their privacy, dignity and independence respected.
- * Have their views and experiences taken into account in the way the service is provided and delivered.

What we found

Our judgement

There are minor concerns with Outcome 01: Respecting and involving people who use services

Our findings

What people who use the service experienced and told us

People using the service told us that they were happy living in the home and that staff always respect their right to privacy. With comments such as 'The staff are kind and caring'.

Other evidence

The service provides a homely environment for people to live in. People's preferences were respected such as times of getting up. We observed staff respecting people's right to privacy. We observed staff talking to people in a respectful and caring manner. For one person we noted in their night time care plan their permission had been sought for staff to carry out night time checks.

We noted that people's care plans contained information about their preferred name of address, routines and likes and dislikes.

Two people told us that staff had discussed their care and support with them but they were not aware of their plan of care. The care plan did not contain information to confirm whether people had been consulted or had agreed to their plan of care confirming that they were happy with it.

The home holds regular meetings where people can air their views and make suggestions. People's views were also sought through feedback questionnaires.

People using the service are provided with a service user guide, which can be adapted in large print. We were told that changes were going to be made to the service's website, which will include a facility to ensure that people with visual impairment will be able to access this more easily.

The service provides an entertainment programme. We saw this information on display. This included arts and crafts, music, exercise, yoga and visiting entertainers. Links are maintained with the local community. Holy communion takes place and coffee mornings are held. The service benefits from having a vehicle, which enables people using the service to attend outside social events such as visits to the theatre, local schools and garden centres.

Our judgement

There was no information to confirm that people's plan of care had been agreed by them. People who use the service were treated with respect and their dignity was promoted.

Overall, we found that Bramley House was meeting this essential standard but, to maintain this, we have suggested that some improvements are made.

Outcome 04: Care and welfare of people who use services

What the outcome says

This is what people who use services should expect.

People who use services:

* Experience effective, safe and appropriate care, treatment and support that meets their needs and protects their rights.

What we found

Our judgement

The provider is compliant with Outcome 04: Care and welfare of people who use services

Our findings

What people who use the service experienced and told us

People using the service told us that they were happy with their care and support.

People's needs are assessed before they move into the home. A person's representative said that they had the opportunity to visit the home before their relative moved in.

People using the service told us that they were happy with their care and support.

Other evidence

An assessment of needs is undertaken when people are referred to the service with a view to moving in. This process involves obtaining information from various sources including the person, their carer, health care professionals and the local authority.

We looked at three people's plan of care. These provided information and guidance for staff to follow to ensure that people's identified care and support needs could be met. We noted that staff had signed the care plan to confirm that they had read it. Care plans were regularly reviewed. Care plans were also in place for supporting people at night time.

Care plans and guidelines had been put in place for supporting people safely with moving and handling. Risk assessments were up to date. Where people had been assessed as being at risk of falls information and guidance was recorded in their plan of care to reduce this risk.

Care plans included guidelines for managing specific health conditions and risks such

as the prevention of pressure areas.

We also noted for one person they require encouragement with drinking. We observed that drinks were provided for this individual in their bedroom. This person told us that staff always respond when they require assistance and that the staff provide them with regular drinks. We observed that this person's call bell was accessible to them.

This service is not registered to provide nursing care. Advice and support is obtained from a range of external health care professionals including, GP and district nurses. Support is also provided by community palliative care teams if this is needed. Records were kept of people's health care appointments and consultations.

Our judgement

People using the service receive safe care and support.

Overall, we found that Bramley House was meeting this essential standard.

Outcome 07: Safeguarding people who use services from abuse

What the outcome says

This is what people who use services should expect.

People who use services:

* Are protected from abuse, or the risk of abuse, and their human rights are respected and upheld.

What we found

Our judgement

There are minor concerns with Outcome 07: Safeguarding people who use services from abuse

Our findings

What people who use the service experienced and told us

Three people we spoke with said that they felt safe living in the home.

Other evidence

The service has a safeguarding and whistle blowing procedure in place, which makes reference to Surrey's multi agency safeguarding vulnerable adults from abuse procedures. However the provider had not obtained the most up to date version to ensure that their own policy is up to date.

We looked at three members of staff training certificates, which demonstrated that that they had attended safeguarding training. The provider told us that are attending the local authority multi agency safeguarding training in January 2012.

Staff we spoke with confirmed that they had attended safeguarding training. They knew how to recognise the signs of abuse and that they must report all cases of concern to the appropriate person.

Our judgement

People using the service felt safe. Staff were trained and were able to respond appropriately to any actual or suspected abuse that occurred. The provider needs to obtain the up to date Surrey multi agency safeguarding vulnerable adults from abuse procedures.

Overall, we found that Bramley House was meeting this essential standard but, to

maintain this, we have suggested that some improvements are made.

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

We did not speak to people about this outcome on this occasion, so we cannot report what people told us.

Other evidence

The service provided a homely environment for people to live in. There is a communal sitting room and a conservatory that provides a pleasant area for people to use, which overlooks well maintained gardens. The home was decorated with Christmas decorations, which people using the service had been involved in making.

People have their own bedrooms, which they can personalise to their choice. Most bedroom rooms had their own private bathroom and en-suite facilities. Separate assisted bathrooms were also available. A Stannah Stairlift has been installed for people to be able to access the second floor easier.

Some refurbishment has taken place. Radiator covers have been installed to ensure peoples safety. Although we noted that some radiators were uncovered in some of the communal areas. The provider said that these are to be installed shortly. We were also informed that the landing carpet was also being replaced.

We saw some records, which demonstrated that regular servicing and maintenance of equipment takes place. Fire drills take place and fire equipment checks are carried out. The service employs an external company to undertake their health and safety audits.

Our judgement

Systems were in place , which ensures that people using the service have a safe and clean environment to live in

Overall, we found that Bramley House was meeting this essential standard

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

We did not speak to people about this outcome on this occasion, so we cannot report what people told us.

Other evidence

The registered provider is also registered to manage the service. There is a care coordinator in post who assists them.

New staff receive a three day induction. A member of staff that we spoke with confirmed that they had received induction. We were also told that supplied with a handbook, which contained policies and procedures.

The service provides a range of training, which staff are expected to attend. We looked at three members of staff training records. It was clear that they had attended statutory training including, safeguarding, health and safety, moving and handling, infection control and food hygiene. Staff are supported to attend other specialist training such as dementia awareness.

Staff are supported to obtain National Vocational Qualifications. Seven members of care staff had attained National Vocational Qualifications (Level 2) or above. The care coordinator told us that will be undertaking a diploma in health and social care. Staff told us that they receive formal supervision.

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Our judgement

The service has systems in place to ensure staff receive the right training and support to care for people who use the service. Staff receive supervision to support them in their role.

Overall, we found that Bramley House was meeting this essential 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

We did not speak to people about this outcome on this occasion, so we cannot report what people told us.

Other evidence

People using the service are supported to participate in home meetings, which are documented. The manager provides feedback questionnaires to people using the service their relatives and care managers to gain their views on the care provided.

The service has recently been audited by an External organisation. This identifies what the service does well and where they could improve. A report was available for us to see, which was detailed.

Our judgement

The provider has ensured that people who use the service are safe and the quality of care provision is monitored.

Overall, we found that Bramley House was meeting this essential standard

Action we have asked the provider to take

Improvement actions

The table below shows where improvements should be made so that the service provider **maintains** compliance with the essential standards of quality and safety.

Regulated activity	Regulation	Outcome
Accommodation for persons who require nursing or personal care	Regulation 17 HSCA 2008 (Regulated Activities) Regulations 2010	Outcome 01: Respecting and involving people who use services
	Why we have concerns: Peoples plan of care had not been agreed by them or their representative.	
Accommodation for persons who require nursing or personal care	Regulation 11 HSCA 2008 (Regulated Activities) Regulations 2010	Outcome 07: Safeguarding people who use services from abuse
	Why we have concerns: The provider needs to obtain the up to date local authority multi agency safeguarding vulnerable adults from abuse procedures.	

The provider must send CQC a report about how they are going to maintain 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 28 days of the date that the final review of compliance report is sent to them.

CQC should be informed in writing when these improvement 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

Document purpose	Review of compliance report
Author	Care Quality Commission
Audience	The general public
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