

Review of compliance

Mr Stephen Geach
Oak View Residential Care Home

Region:	South East
Location address:	47-49 Beach Road Hayling Island Hampshire PO110JB
Type of service:	Care home services without nursing Mr Stephen Geach is registered to provide the following regulated activity: Accommodation for people who require nursing or personal care.
Date the review was completed:	21/01/2011
Overview of the service:	This service provides accommodation and personal care for up to 32 people who have dementia or a physical disability. The property is a large detached house situated on Beach Road in Hayling Island, near to the sea front.

	<p>Following the implementation of the Health and Social Care Act 2008, all providers of care homes had to apply for registration under the new legislation. As part of the transitional registration arrangements no compliance conditions were added to the registration.</p>
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Summary of our findings for the essential standards of quality and safety

What we found overall

We found that Oak View was meeting all the essential standards of quality and safety we reviewed.

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 21 January 2011, observed how people were being cared for, talked to people who use the service, talked to staff and the manager, checked the provider's records, and looked at records of people who use services.

What people told us

As part of our review we visited Oak View and spoke with two of the people who use the service, four relatives, two members of staff and the manager. We also observed interactions between staff and people who use the service.

A person who lives at Oak View told us that staff respect their privacy and dignity and consult them about how their care is delivered. Visitors we spoke with also said the services consults with them about their relatives care and keeps them informed about important health matters. We observed that staff asked if people required support and respected their choices. People who use the service told us that staff were good at dealing with their health issues and that there are opportunities to access the community. They gave positive comments about the choice of meals and said that staff were always available to support people at mealtimes if required. People who live in the home and relatives also commented positively about the staff and manager, describing them as "calm, professional and understanding". They told us

that the service listen to them, act on what they say and deal with any concerns or issues promptly and appropriately.

What we found about the standards we reviewed and how well Oak View 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

People who use the service are supported to express their preferences and be involved in making decisions that affect them in their everyday lives.

- Overall, we found that Oak View 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

The service is further developing systems to ensure that people who use the service can continue to be confident that their rights are respected and taken into account.

- Overall, we found that Oak View was meeting this essential standard.

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

People who use the service experience appropriate care, treatment and support that meet their needs.

- Overall, we found that Oak View was meeting this essential standard.

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

People who use the service are encouraged to eat well and are assessed and supported to ensure they have adequate nutrition and hydration.

- Overall, we found that Oak View was meeting this essential standard.

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

The service works in cooperation with other agencies to ensure that people who use the service receive the care and support they need.

- Overall, we found that Oak View was meeting this essential standard.

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

The home has systems in place to ensure that people who use the service are protected from abuse, or the risk of abuse, and their human rights are respected and upheld.

- Overall, we found that Oak View was meeting this essential standard.

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

The home has systems in place to ensure that people who use the service are protected from the risk of infection.

- Overall, we found that Oak View was meeting this essential standard.

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

People who use the service have their medication at the times they need them and in a safe way.

- Overall, we found that Oak View was meeting this essential standard.

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

People who use the service live in a home that is well-maintained, secure and accessible.

- Overall, we found that Oak View was meeting this essential standard.

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

The home has systems in place to ensure that people who use the service are not at risk of harm from unsafe or unsuitable equipment.

- Overall, we found that Oak View was meeting this essential standard.

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

Oak View has effective recruitment systems in place to ensure that staff are qualified and competent to carry out their role and meet the needs of people who use the service.

- Overall, we found that Oak View 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

The home ensures that there are sufficient staff on duty at all times to support people who use the service.

- Overall, we found that Oak View was meeting this essential standard.

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

People who use the service benefit from being supported by staff who are well supervised and who receive the required training and knowledge.

- Overall, we found that Oak View 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

People who live at Oak View benefit from the systems that are in place to monitor the quality of service they receive and make improvements where necessary.

- Overall, we found that Oak View was meeting this essential standard.

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

The home has systems in place to deal with comments and complaints and supports people to use these systems.

- Overall, we found that Oak View was meeting this essential standard.

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

The home ensures that records relating to people who use the service are accurate, held securely and remain confidential.

- Overall, we found that Oak View was meeting this essential standard.

Action we have asked the service to take

We found that the provider of Oak View to be compliant with all 16 of the essential standards of quality and safety. There is a strong focus on ensuring staff support individuals based on the assessment of need and expressed wishes and preferences. The arrangements to engage and involve those who use the service are effective with particular attention given to those who have communication problems. The service is committed to learning and demonstrates this by actively seeking information from those living at Oak View, their carers and any agencies which fund the care. Complaints are encouraged and welcomed as another means of obtaining feedback on how the service meets needs. Staff induction and training is used to ensure that staff understand their role and how care should be delivered in line with the expressed wishes of people living at home. The environment in which people are living is cared for and particular attention is given to ongoing maintenance and refurbishment, as well as health and hygiene.

We are not requiring the registered provider to take any action from this compliance review.

Other information

Please see previous review reports for more information.

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
A person who uses the service told us that staff respect their privacy and dignity and involve them in the way their care is carried out.

We spoke with four visitors who all told us that they are involved in and consulted about their relative’s care. They told us that staff respect and promote people’s independence, privacy and dignity. This was further confirmed by observing staff providing support to people throughout the visit.

Other evidence
When we arrived the manager introduced us to people using the service who were sat in one of the lounge areas. A staff member told us that some people had completed a questionnaire about their preferences and how they like to be supported by staff. A person who had filled in the questionnaire told us that “staff are very good, excellent at carrying out what has been asked for on the form”.

A senior member of staff showed us the care plan for another person who uses the service, who was not able to fill in a questionnaire. There was no evidence within the plan of the individual being involved. The staff member told us that the person's relative can ask to see the plan at any time.

The manager told us that the service is in the process of further developing the care plans, with some support from Adult Service's Quality Improvement Officer. We saw how staff were starting to record 'a day in the life' personal histories with the help of people who use the service and their relatives and friends. After the visit we spoke with the Quality Improvement Officer, who confirmed that care planning in the home was being developed further to make the process more personalised.

Our judgement

People who use the service are supported to express their preferences and be involved in making decisions that affect them in their everyday lives. On the basis of the evidence provided and the views of people using the service we found the service to be compliant with this outcome.

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
A person who uses the service told us they are consulted about the care they receive. This was further confirmed through speaking with four relatives of people who live in the home. We observed that staff asked if people required support and respected their choices.

Other evidence
The provider told us that the service has a comprehensive policy on capacity and consent outlining good practice principles, plus procedures for seeking consent. The provider identified a need to gain more information on some aspects of this. People who use the service are also involved in their care through daily practices such as choosing from the menu, how to spend their day and what activities to take part in. Every six months the service carries out a quality survey involving people who use the service or those acting on their behalf.

We asked a member of staff about their understanding of choice, consent and capacity. They told us that this is a developing part of the care planning and would involve people who use the service, relatives and health and social care

professionals as appropriate. The staff member did not demonstrate knowledge of the implications for the service of The Mental Capacity Act and confirmed that training on this and Deprivation of Liberty Safeguards is planned for March 2011.

We spoke with Adult Service's Quality Improvement Officer who told us that she was currently providing short-term support to the manager of the home. Improvements were continuing to be made by the service in relation to assessing people's capacity to consent and care planning.

We saw records showing that a Deprivation of Liberty referral and assessment had been carried out by the home for one person who uses the service. This is to ensure that actions taken to protect an individual who lacks capacity to make decisions are in that person's best interests. The process included the person's representatives and external health and social care professionals and was fully recorded with a date for review.

Our judgement

The service is further developing systems to ensure that people who use the service can continue to be confident that their rights are respected and taken into account.

On the basis of the evidence provided and the views of people using the service we found the service to be compliant with this outcome.

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

The provider is compliant with outcome 4: Care and welfare of people who use services

Our findings

What people who use the service experienced and told us
A person who uses the service said that staff “are first class at dealing with health issues”. They also told us that entertainers come to the home and there is an activities organiser who takes people out for shopping and day trips.

A visitor told us that staff look after their relative “very well”. They said that when their relative had become unwell this had been well managed by the staff. The visitor described to us the circumstances surrounding their relative’s admission to the home and the subsequent improvement in the person’s health and wellbeing.

Other visitors told us that when their relative had needed assistance at night the staff had responded promptly. They said that the home always kept them informed about any health issues affecting their relative. The visitors told us that the home arranges a lot of entertainment and that their relative had become more sociable since coming to live there. They said they were always made to feel welcome by staff.

Other evidence
The provider informed us that care plans are reviewed on a monthly basis. These cover all areas of needs and preferences and are informed by a range of

assessments and risk assessments. Health needs are monitored and this can be demonstrated through daily care records, healthcare intervention records and other records such as food and fluid intake charts.

A member of staff showed us a care plan demonstrating how a person's needs had been assessed and then reviewed and updated as their needs changed. The care plan included weight charts and assessments of risk and how these were managed, for example in relation to the person's mobility. The individual's religious and spiritual needs and how the home supports these were also recorded.

The provider had identified that the home needed to expand their emergency plan to ensure that the service can continue to operate as effectively as possible in the event of a significant emergency. This plan was to be completed by February. During our visit the manager told us how this was progressing, for example a place of safety had been identified.

Our judgement

People who use the service experience appropriate care, treatment and support that meet their needs. On the basis of the evidence provided and the views of people using the service we found the service to be compliant with this outcome.

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
A person who lives in the home told us that the food is excellent. They said that they had requested a favourite meal to be included on the menu and the manager was arranging this. They told us that people are given support with eating if necessary and there is always a member of staff standing by. Another person who uses the service, who had been an enthusiastic cook, said that the food is “top rate” and that they are given a choice of meals.

The relatives of another person who lives at Oak View said that their relative enjoys the meals and “feels like it is a hotel or restaurant”.

Other evidence
The kitchen and dining areas are part of a new wing of the home that has been well thought out and furnished to a high standard. The dining area is separated from an adjoining lounge by glass panels and doors, so that both areas benefit from a good deal of natural light and sense of space. Breakfast cereal dispensers at one end of the room help promote choice and independence. We observed lunch taking place. The atmosphere was calm and relaxed and staff were asking each person what they wanted to eat from the menu. One person who uses the service preferred to have their lunch in the lounge and this was catered for.

The provider informed us that staff understand how to support individuals requiring

assistance at mealtimes and practice is good in terms of motivation, encouragement, assisted eating and the provision of adaptations. Special diets, including pureed and soft, are provided in line with care plans and people are not interrupted at mealtimes. The sample of care records we saw confirmed that people's nutritional needs are assessed and that food and fluid intake is monitored when needed.

The service contract with a specialist company for meal provision. The manager told us how pureed food is formed into the shape of the original food, so that meals served in this way retain colour and variety, which helps to promote appetite. The provider told us that this company have a good focus on nutrition and have good information about nutrition and diet generally. The provider has identified a need to talk to the company about improving the availability of this information to people who use the service and stakeholders, in an appropriate format to promote understanding.

Our judgement

People who use the service are encouraged to eat well and are assessed and supported to ensure they have adequate nutrition and hydration. On the basis of the evidence provided and the views of people using the service we found the service to be compliant with this outcome.

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
On this occasion, we did not directly ask people who use the service about this outcome.

Other evidence
The provider told us that the service rarely has situations where responsibility for care is shared with different providers, other than periodic healthcare interventions. All healthcare professionals are able to view care plans and care documentation on a 'need to know' basis when visiting an individual with any healthcare need.

A member of staff explained how the home had referred a person who uses the service to their general practitioner as part of an ongoing assessment of the person's changing needs. The manager told us how the service has links with other healthcare professionals, such as the Rapid Assessment Nurse who has provided guidance and arranged training on preventing falls. Our telephone conversation with the Adult Service's Quality Improvement Officer also confirmed that the manager of the home consults with other agencies to ensure that people's needs are met.

Our judgement
The service works in cooperation with other agencies to ensure that people who use the service receive the care and support they need. On the basis of the evidence

provided we found the service to be compliant with this outcome.

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
On this occasion, we did not directly ask people who use the service about this outcome.

Other evidence
Following a safeguarding review held in November 2010, an action plan was agreed between Oak View and Hampshire County Council safeguarding team. This included support from the Adult Service’s Quality Improvement Officer, who we spoke with after our visit. She told us that the manager of the home was proactive in meeting the action points and confirmed that the safeguarding matter was closed. The Quality Improvement Officer told us she did not have any current knowledge of any concerns in relation to the safety and welfare of people using the service.

The provider told us that all staff receive mandatory training in Safeguarding Vulnerable Adults every year, which is provided by an external trainer. Staff are fully aware of the processes for dealing with any allegation of abuse, including reporting, recording, not carrying out investigations, and co-operating with social services as the lead agency.

The provider said the service provides a stimulating environment and a range of

meaningful activities, which can reduce the risk of negative behaviour and potential abuse. Staff understand how to deal with negative behaviour in appropriate ways and receive specialist training in challenging behaviour every year, also provided by an external company. Staff are also receiving more training from Hampshire County Council, to highlight a more positive understanding of different behaviours.

We spoke to a member of staff who was aware of the safeguarding procedure and confirmed they had training about this and responding to challenging behaviour. We saw certificates showing that both types of training had been provided and were included in the training plan for 2011.

The manager had provided evidence that Deprivation of Liberty safeguarding referrals were made when appropriate to do so.

Our judgement

The home has systems in place to ensure that people who use the service are protected from abuse, or the risk of abuse, and their human rights are respected and upheld. On the basis of the evidence provided we found the service to be compliant with this outcome.

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
On this occasion, we did not directly ask people who use the service about this outcome. Visitors told us that staff clean their relative's room while she is having lunch, so as not to intrude on her privacy.

Other evidence
Prior to this review the provider informed us that the service is continuing to develop policies in line with the Health & Social Care Act 2008 Code of Practice. All staff have training on hand washing and when and how personal protective equipment should be used. A policy has been designed to ensure staff are clear with procedures in the home and all staff receive a copy and sign to say they have received this information. The service has made arrangements with the local authority Environmental Health Office to discuss regular visits from the team to support, guide and direct staff at the service.

During our visit we observed a good standard of cleanliness throughout the home. We spoke with the Head of Housekeeping who is the appointed lead person for infection prevention and control. She confirmed that procedures are in place and that these are monitored to ensure a safe and clean environment. We saw certificates showing that relevant training had been provided and was included in the training plan for 2011.

Our judgement
The home has systems in place to ensure that people who use the service are

protected from the risk of infection. On the basis of the evidence provided we found the service to be compliant with this outcome.

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
A person who uses the service told us that staff gave them their medication with a drink and checked that they had taken it. The person did not remember being asked whether they would like to manage their own medication, but said they were happy with this arrangement as they felt it was more consistent.

We spoke with the relatives of two other people who use the service. They told us that they had no concerns about the way that medication was managed in the home.

Other evidence
The provider informed us that the service has clear written policies covering all aspects of how medications are managed in the home, including actions to be taken if a medication administration error has been identified. Consent to care and treatment forms are completed on admission by the people who use the service or their representatives. Information such as a persons' capacity to administer their own medication is assessed before admission to the home and continually monitored.

We saw a staff members training records, which showed they had received training

in medication awareness. The staff member told us that medications are given by senior staff who have received the training. We saw an example of one person's medication administration record, which was up-to-date and showed that medications had been given at the prescribed times. We saw that medication is stored securely in the home. A member of staff showed us that daily records are kept that include visits by healthcare professionals and details of any medication reviews.

Our judgement

People who use the service have their medication at the times they need them and in a safe way. On the basis of the evidence provided and the views of people using the service we found the service to be compliant with this outcome.

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 relatives of someone who uses the service told us that maintenance issues are dealt with promptly. Another person commented that their relative had been given a room overlooking the park and their own telephone, in accordance with their wishes.

We saw that a person who lives in the home and their relatives have their own swipe cards to access the person's room, which promotes privacy and independence.

Other evidence
We saw that the premises are well maintained and suitable to meet the needs of people using the service. The provider told us that an ongoing building plan is in place, which ensures that the continual updating and redecorating of the building is maintained. In 2010 a new wing was added to the premises, which included a new lounge, kitchen and dining areas, an outside alfresco dining area, landscaped gardens overlooking the parks, two new fully assisted bathrooms and a further communal toilet. In addition to the increased communal space, three new large bedrooms had resulted in a reduced percentage of shared to single bedrooms on offer to people who use the service.

During our visit we saw these improvements. The refurbishment had been carried out to a high standard, including the furniture, fixtures and fittings. The manager said

that further improvements are planned in relation to the older parts of the building.

The service is currently working on an emergency plan to give clear and precise information for staff to follow in the event of an emergency. Risk assessments are carried out to ensure the premises are fit for purpose.

There is a log book that visitors are asked to sign as a security measure and also in accordance with fire safety regulations. The provider told us that due to the nature of the service there is a locked door policy to ensure people's safety and security. Assessments are carried out to ensure that security arrangements are applicable to each individual and this is recorded in their care plans. A person who uses the service told us they can access the community with staff support and that they were happy with this arrangement.

Our judgement

People who use the service live in a home that is well-maintained, secure and accessible. On the basis of the evidence provided and the views of people using the service we found the service to be compliant with this outcome.

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
On this occasion, we did not directly ask people who use the service about this outcome.

Other evidence
The provider told us that the service has a range of aids and adaptations to assist people, such as chair lifts, hoists, stand aids and an assisted bath. All specialist equipment is regularly tested to ensure it is safe and secure for people who live in the home and staff to use. Risk assessments are carried out to ensure the safety of people who enter or use the premises.

The provider said that all staff receive appropriate training before they are allowed to use any specialist equipment and this training is updated on a regular basis. We saw evidence to support this in a sample of staff training records. The provider said staff are trained to explain to people using the service what the equipment is and how it is going to be used, to make sure that the person using the service knows and agrees to what is happening and feels safe.

During our visit we saw that staff used a privacy screen when assisting a person in a

communal area, so that the person's dignity was maintained. A person who uses the service told us that staff always did this. We saw a sample of records showing that moving and handling and health and safety training is provided.

Our judgement

The home has systems in place to ensure that people who use the service are not at risk of harm from unsafe or unsuitable equipment. On the basis of the evidence provided we found the service to be compliant with this outcome.

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
A person who uses the service told us that staff are all 'first class' and that he is always introduced to new staff when they start work. Another person who lives in the home said that the manager is excellent. Relatives of people who use the service described staff as calm, professional, caring and understanding.

Other evidence
The provider informed us that there are robust systems and procedures in place to follow when recruiting staff. We looked at the records for two recently recruited staff members. The records included all the necessary checks such as Criminal Records Bureau (CRB) and Independent Safeguarding Authority (ISA). Previous employment references had also been obtained and there was written evidence that the staff had received induction training.

The provider told us that the home uses an industry recognised induction workbook for new staff members who have little or no experience or knowledge of working in a care environment. This takes place over a twelve week period and is monitored by a senior member of staff with training and assessing experience. There is an ongoing programme of training and development to equip and update staff with the skills to perform their role.

We spoke with a member of staff who demonstrated a good understanding of the needs of the people who use the service and of the agreed ways of meeting their needs. Throughout our visit we observed that staff treated people with consideration, dignity and respect.

Our judgement

Oak View has effective recruitment systems in place to ensure that staff are qualified and competent to carry out their role and meet the needs of people who use the service. On the basis of the evidence provided and the views of people using the service we found the service to be compliant with this outcome.

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
A person who uses the service told us that there are always at least four or five care staff on duty during the day and that he had “no doubt” that staff have the right skills to do their job. Relatives of another person said there is generally enough staff to provide the expected standard of care and that staff were attentive to individuals' needs. Another person's relatives told us that staff are “always available, smiling, calm and kind”.

Other evidence
The provider told us about the staffing arrangements for the service and said that all staff were up-to-date with training and had good understanding of the needs of people who live in the home.

During our visit we observed that there was sufficient staff on duty to respond to the needs of people using the service. In addition to the manager and care staff the home employs domestic and catering staff, so that the care staff role is not compromised by the need to perform these other duties.

Our judgement
The home ensures that there are sufficient staff on duty at all times to support people who use the service. On the basis of the evidence provided and the views of people using the service we found the service to be compliant with this outcome.

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
People who use the service and their relatives who we spoke to told us they felt that staff had the right skills to provide care and support.

Other evidence
The provider told us that staff training and development needs are identified based on the needs of the people who use the service. Training attendance is monitored and discussed at supervision meetings. Staff rotas are taken into consideration to ensure that all staff are able to attend training. All staff had or were working towards National Vocational Qualifications (NVQ) in health and social care. The provider is aware that in the future NVQs will be replaced with diploma qualifications. The provider said that feedback obtained from people who use the service and their representatives relating to staff competence was always positive.

We spoke with a member of staff who told us about some of the training they had received and how this helped them to understand and respond to the needs of people who use the service. We saw a sample of three staff members training records, which confirmed that induction and further training was provided. Training included Dementia Awareness, Challenging Behaviour Awareness, Abuse Awareness, Emergency First Aid, Moving and Handling, Infection Control, Medication Awareness, Documentation and Record Keeping.

The manager showed us that there is an ongoing training programme in place for 2011. There were two dates scheduled for each subject to ensure staff are able to attend and staff are given the dates in advance to put in their diaries. Training in the Mental Capacity Act and Deprivation of Liberty Safeguards was planned for March 2011.

The records also showed that supervision meetings took place between individual staff members and the manager. A staff member we spoke with told us she felt well supported by the management.

Our judgement

People who use the service benefit from being supported by staff who are well supervised and who receive the required training and knowledge. On the basis of the evidence provided and the views of people using the service we found the service to be compliant with this outcome.

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
A person who uses the service told us that the provider and manager ask them for their views about the service. Relatives said that the service listen to them and act on what they say.

Other evidence
During our visit the provider came to the home and spoke with people who use the service and staff. The manager said that the provider responds to her requests if things need doing or replacing.

The provider told us about the systems the service has in place to monitor the quality and safety of the care, treatment and support they provide. This includes quality assurance surveys which are given to people who use the service and others acting on their behalf. Through this information the service can identify areas that may need improvement or require attention. There are frequent internal audits to monitor specific aspects of the service such as medication and finances. There are also regular audits by an external consultant, which support and advise the management of the home on areas for development.

The detailed results and outcomes of surveys were displayed on a notice board in the home. This showed, for example, that entertainment and activities had improved in the spring and summer of 2010. Despite increased resources this rating then reduced in December and so the service was again reviewing this area. Another example of the service acting on feedback from people who use the service and their families was that a new information pack had been created to answer frequently asked questions. The ratings also showed that people felt that healthcare arrangements and how staff were deployed in the home had improved. The homes quality assurance survey results for 2010 showed a continuing positive response to the way that concerns and complaints were managed.

Our judgement

People who live at Oak View benefit from the systems that are in place to monitor the quality of service they receive and make improvements where necessary. On the basis of the evidence provided and the views of people using the service we found the service to be compliant with this outcome.

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
A person who uses the service told us that a meeting with the manager is arranged to address any concerns or complaints, but that there are “hardly any occasions for grumbles”. Relatives said that they were aware of the homes' complaints procedure and were confident about the management dealing with any issues promptly and appropriately.

Other evidence
The Adult Service’s Quality Improvement Officer told us that the homes' manager communicated well and had developed good relationships with people who use the service and their relatives.

The manager told us that the home had not received any complaints. She showed us how, in order to check that the procedure would be effective, a practice exercise had taken place including the manager’s response and an action plan.

The provider told us that staff or management will support people who use the service to be heard by involving an advocate, or persons acting on their behalf, if the individual is unable to do this. The service has a policy which supports a culture of openness and ensures that any comments or complaints are listened to and can be

acted upon.

Our judgement

The home has systems in place to deal with comments and complaints and supports people to use these systems. On the basis of the evidence provided we found the service to be compliant with this outcome.

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
A person who uses the service told us that they had access to their personal records if they wished to see them.

Other evidence
The provider told us about the systems that are in place to ensure records are managed correctly and in line with current legislation and guidance. Staff are made aware of the relevant procedures as part of the induction process.

A member of staff we spoke to had a good understanding of the importance of maintaining confidentiality in relation to people’s personal information. The records we saw relating to people who use the service had been kept up to date and relevant to each person. These and other records such as staff personnel files, were stored securely and located promptly when required.

Our judgement
The home ensures that records relating to people who use the service are accurate, held securely and remain confidential. On the basis of the evidence provided we

found the service to be compliant with this outcome.

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 Adult 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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