

Review of compliance

Pendle Residential Care Limited
Pendle View

Region:	North West
Location address:	15/17 Chatham Street Nelson BB9 7UQ
Type of service:	Care home
Date the review was completed:	May 2011
Overview of the service:	<p>Pendle View provides accommodation and support for six female younger adults who have mental health problems.</p> <p>Pendle View is two mid-terrace houses located on the outskirts of Nelson, near to local shops. Town centre services are a short distance away and there are good transport links nearby. There is off-street parking at the front of the home.</p>

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

What we found overall

We found that Pendle View was meeting all the essential standards of quality and safety we reviewed but, to maintain this, we have suggested that some improvements are made.

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

What people told us

At the time of our visit there were two people living at Pendle View; we were able to get the views about the service from one person.

We were told that people who used the service were able to make decisions about their care and knew about their individual care plans.

They told us they were involved in the planning, shopping and preparing of meals and were given support and advice from staff about healthy eating.

We were told "it is a nice clean house" and that people who lived at Pendle View were responsible for "keeping our rooms tidy and clean".

They said "there are always enough staff around" and "I like the staff"; one person who worked at the home also thought there were enough staff to meet people's current needs.

They told us they were looked after and felt safe living at the home and would be able to speak out if anyone was not being looked after properly. People who lived at the home were able to discuss their care and raise any concerns about how the home was run; one person said they would talk to staff or a social worker if they had any concerns and said “staff listen”.

What we found about the standards we reviewed and how well Pendle 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

Our judgement is that the service is compliant with this outcome as people who use the service are able to make decisions and choices about the care and support they need and are involved in decisions about how their home is run.

- Overall, we found that Pendle 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

Our judgement is that the service is compliant with this outcome as people were involved in discussions and agreements about their care.

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

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

Our judgement is that the service is compliant with this outcome as the records gave a clear indication of the care and support that people needed and people were happy with the care and support they received.

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

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

Our judgement is that the service is not fully compliant with this outcome. We have a minor concern as whilst people were involved in budgeting, shopping, planning and meal preparation which would give them the skills they needed it was not clear whether they were provided with a varied and nutritious diet that met with their dietary requirements and personal choices.

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

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

Our judgement is that the service is compliant with this outcome as people who use the service benefit from clear working arrangements that are in place with other agencies.

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

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

Our judgement is that the service is compliant with this outcome as people who use services are protected by well trained staff and by clear policies and procedures.

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

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

Our judgement is that the service is compliant with this outcome as people experience good standards of cleanliness.

- Overall, we found that Pendle 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

Our judgement is that the service is not fully compliant with this outcome. We have a minor concern as some staff were administering medicines without appropriate training; however further training had been planned to ensure staff had the necessary skills and competencies.

- Overall, we found that Pendle View 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

Our judgement is that the service is compliant with this outcome as the facilities were safe, accessible and well maintained with plans for ongoing improvement.

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

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

Our judgement is that the service is compliant with this outcome as people who use the service are provided with safe equipment that maintains their comfort and independence and meets their needs.

- Overall, we found that Pendle 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

Our judgement is that the service is compliant with this outcome as safe recruitment processes help to protect people who use the service from being cared for by unsuitable staff.

- Overall, we found that Pendle 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

Our judgement is that the service is compliant with this outcome as people are happy with the staff team and their needs and wishes are being met in a timely and effective way.

- Overall, we found that Pendle 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

Our judgement is that the service is compliant with this outcome as the staff team are given the training and support they need to understand and meet people's needs.

- Overall, we found that Pendle 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

Our judgement is that the service is compliant with this outcome as people are able to express their views and opinions about the home and influence how the home is run.

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

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

Our judgement is that the service is compliant with this outcome as the service has systems in place to deal with comments and complaints.

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

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

Our judgement is that the service is compliant with this outcome as personal records of people living in the home and other records required to protect their safety and wellbeing are kept confidential, up to date and stored securely.

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

Action we have asked the service to take

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

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
One person told us she was able to make decisions about her care and about how she spent her day and was given staff support as needed.
Staff told us that the routines were flexible and that people were able to make choices and decisions about how they spent their day.

Other evidence
The service sent us a copy of their Provider Compliance Assessment (PCA) as part of the planned review; this helped us to understand what was in place to ensure the service was compliant.
We were told that people who use services were “encouraged to make as many independent decisions as possible”.
During a visit to the service we observed staff treating people in a friendly and respectful manner. Records showed that some staff had attended training to help them to understand how to treat people as individuals and with dignity and respect.
Throughout the visit we saw that routines were flexible and that people were

encouraged to be independent; records supported that people were able to decide how to spend their day and were supported by staff when needed.

The area manager told us that people were given clear and useful information about the services available at Pendle View which could be made available in other suitable formats.

We were told that before moving into the home each person would be involved in an assessment of their needs to make sure they could be supported in the right way. We saw a new 'resident' being shown around the home, introduced to staff and the other people who lived there; they were able to choose a suitable bedroom and ask questions about the home.

Each person had a plan of care which was based on their needs, choices and preferences; the records were kept up to date and showed that people were involved in decisions about their care.

We were told that it was not always appropriate to hold group 'resident' meetings but people were encouraged to express their views and opinions of the service through regular reviews and through informal discussions with staff and management.

Visitors to the home were able to give their views and opinions of the service by completing questionnaires; the information would be used to improve the service.

Our judgement

Our judgement is that the service is compliant with this outcome as people who use the service are able to make decisions and choices about the care and support they need and are involved in decisions about how their home is run.

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
One person told us they were able to discuss the care and support they needed with staff.

Other evidence
During the visit to the service we saw records to support that people had been involved in discussions and agreements about their care.
Some staff had received training to help them to understand their responsibilities when making decisions for people who were not always able to consent to care and treatment. Policies and procedures were also available to guide staff.
Records included information about people’s preferences and choices which would help staff to support people as individuals.
Records showed that people who used the service were able to make their own decisions and were supported to take risks.

Our judgement
Our judgement is that the service is compliant with this outcome as people were involved in discussions and agreements about their care.



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
One person who used the service told us she was involved in decisions about her care and knew about her care plan.

Other evidence
Records of care were maintained both on the computer and as paper records; care staff used paper records to record daily care and support and the area manager was updating the computerised records. We were told that training on the computerised system would be available for all staff.
The care plans included useful information about people’s likes and dislikes and indicated the care and support that they needed. It was clear that people were able to take everyday risks and encouraged to be as independent as possible with support from members of staff as needed.
From discussion with staff, review of records and from observation it was clear that staff were fully aware of people’s needs and what level of care and support they needed. We saw that people were involved in decisions about their care.
Staff maintained daily records of care and support which were written with respect and sensitivity and people had key workers to support them.
Health needs were monitored and records showed that additional support and advice had been accessed as needed.

There were opportunities to be involved in meaningful daily activities and to learn new skills that would help them to live independently.

Care records showed people were encouraged to be as independent as possible and take responsibility for their own lives with staff available to offer support as needed; their rights to privacy and dignity was acknowledged.

The content of care plans was monitored as part of the review visits done by the area manager; we were told that some computerised records could also be accessed by head office to assist with this process.

Our judgement

Our judgement is that the service is compliant with this as the records gave a clear indication of the care and support that people needed and people were happy with the care and support they received.

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

There are minor concerns with outcome 5: Meeting nutritional needs

Our findings

What people who use the service experienced and told us
One person told us she was responsible for the planning, shopping and preparing some of her meals. She told us she was given support and advice from staff about healthy eating.

Other evidence
We were told that people who lived at Pendle View were involved in budgeting, shopping, planning and meal preparation which would give them the skills they needed and help to prepare them for independent living; they prepared their own breakfast, suppers and snacks and were given an allowance to shop for and prepare their own lunches. The main evening meal would be agreed as a group and they would 'take turns' to assist in meal preparation.
The people who lived in the home were able to choose what they would like to eat; each person had a personal locked storage area for their own food.
Records showed the level of support needed and whether there were any nutritional risks; weights were monitored and appropriate advice and action taken as needed.
It was not clear from the daily records whether people were provided with a varied and nutritious diet that met with their dietary requirements and personal choices; we were told this would be monitored by staff.
Training records showed that staff had not received Food Hygiene or Nutrition training; we were told this would be arranged by September 2011.

Our judgement

Our judgement is that the service is not fully compliant with this outcome. We have a minor concern as whilst people were involved in budgeting, shopping, planning and meal preparation which would give them the skills they needed it was not clear whether they were provided with a varied and nutritious diet that met with their dietary requirements and personal choices.

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
One person told us she was able to visit her GP and attend appointments with some support from staff.

Other evidence
We saw that information was shared appropriately with other agencies to make sure people’s needs and wishes were known.
Staff had received training and had access to clear guidance to help them to maintain confidentiality.

Our judgement
Our judgement is that the service is compliant with this outcome as the people who use the service benefit from clear working arrangements that are in place with other agencies.

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
One person told us she was looked after and felt safe living at the home. She told us she would be able to speak out if she or anyone else was not being looked after properly.

Other evidence
We were told that there were clear procedures to support staff and to keep people safe from harm. Staff also had access to procedures to support them with reporting any poor practice.
The staff team had received training to help them to recognise and respond appropriately to any signs of abuse or neglect and further update training was planned.
We spoke to staff who were able to describe what action they would take to respond to any suspicions of abuse or neglect.
The area manager told us that people who lived at Pendle View were able to raise any concerns with staff during reviews or informal discussions.
From training records it was clear that staff had not received any training to help them to deal with any difficult situations or challenging behaviours; the area manager told us that this level of training was not required and that there were clear procedures available for staff guidance.

There were procedures and safe systems in place to manage people's money safely and the records were regularly checked to make sure they were accurate.

Our judgement

Our judgement is that the service is compliant with this outcome. People who use services are protected by well trained staff and by clear policies and procedures.

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
One person who lived in the home told us “it is a nice clean house”.
One person told us they were responsible for “keeping our rooms tidy and clean”.

Other evidence
The service sent us a copy of their Provider Compliance Assessment (PCA) as part of the planned review; this helped us to understand what was in place to ensure the service was compliant.
We were told that clear infection control policies and procedures were in place; we were told that they were being reviewed to ensure compliance with the Department of Health guidance and that one staff member had specific responsibilities for infection control and would report any concerns to the manager or area manager.
During the site visit we saw that the home was clean and free from unpleasant odours and regular checks were in place to ensure standards of cleanliness were maintained.
There had been no reported incidents of any outbreaks of infections.
We looked at personal care plans; these showed how people were supported to maintain good personal hygiene and indicated whether people were responsible for keeping areas of the home tidy and clean, such as their own bedrooms.
We looked at training records and found that staff had not attended infection control training although we were told that further training would take place by September 2011.

Our judgement

Our judgement is that the service is compliant with this outcome as people experience good standards of cleanliness.

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

There are minor concerns with outcome 9: Management of medicines

Our findings

What people who use the service experienced and told us
One person told us that she received her medication at the right time.

Other evidence
During the site visit we were told that clear procedures were in place to support staff with the safe management of medicines.
We found that some staff who administered medicines had not yet received appropriate training or had their competencies checked; we were told that training in this area would be completed by September 2011.
Records were clear and accurate and storage was secure.
People who lived at Pendle View had been assessed as unable to manage their own medicines and had delegated the responsibility to staff.
The management of medicines was audited each month and tablets were counted each day; the area manager told us that they were developing a more detailed audit tool which would help to identify any poor practice.

Our judgement
Our judgement is that the service is not fully compliant with this outcome. We have a minor concern as some staff were administering medicines without appropriate training; however further training had been planned to ensure staff had the

necessary skills and competencies.

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
One person said “it is a very nice house”.

Other evidence
The service sent us a copy of their Provider Compliance Assessment (PCA) as part of the planned review; this helped us to understand what was in place to ensure the service was compliant.

Pendle View is two adjoining terraced houses situated in a residential area, close to local amenities, in Nelson.

During a tour of the home we saw that all areas were well maintained, homely, bright and comfortably furnished.

Accommodation is provided on two floors with a bathroom, shower room and a toilet on the first floor. Communal space is provided in two living rooms, a dining room and two kitchen areas; the main lounge was being decorated at the time of the visit. The second lounge was used by ‘sleep-in’ staff at night; one person told us this did not affect the people who lived there.

We were told there was a programme of repairs and maintenance and we saw that the house had been redecorated and refurnished since our last visit.

People who live at the home had keys to their rooms and there were appropriate locks on bathroom and toilet doors.

The main kitchen and smaller kitchen had been refurbished; people who lived there

were able to make snacks and drinks and store any personal food items in individual locked cupboards.

There was a smoking shelter in the enclosed rear yard.

The standard of the environment was regularly checked by the area manager.

Regular health and safety checks were carried out and any hazards were risk assessed.

Our judgement

Our judgement is that the home is compliant with this outcome as the facilities were safe, accessible and well maintained with plans for ongoing improvement.

Outcome 11: Safety, availability and suitability of equipment

What the outcome says

This is what people should expect.

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

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

What we found

Our judgement

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

Our findings

What people who use the service experienced and told us
We were not able to get peoples' views directly from them about this outcome. However their experiences were captured through records and other information.

Other evidence
We were told that people would be provided with aids and equipment as needed. We saw handrails to help people to access the stairs safely.

Our judgement
Our judgement is that the service is compliant with this outcome. People who use the service are provided with safe equipment that maintains their comfort and independence and meets their needs.

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
We were not able to get peoples' views directly from them about this outcome. However their experiences were captured through records and other information. One staff member told us they had been given initial induction training and would receive further training.

Other evidence
We were told there were clear recruitment procedures.
We looked at one staff record and found that a safe and fair process had been followed.
New staff were issued a job description, a contract and a handbook so that they were aware of their role and responsibilities; they had been given appropriate induction training to ensure they had the skills and knowledge to identify and respond to peoples' changing needs and had been supervised until they were competent and safe
The people who lived at Pendle View were not involved in the recruitment and selection of new staff.

Our judgement
Our judgement is that the service is compliant with this outcome. Safe recruitment processes help to protect people who use the service from being cared for by

unsuitable staff.

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
One person who used the service told us “there are always enough staff around” and “I like the staff”.
One staff said there were sufficient staff to meet people’s current needs.

Other evidence
During the site visit we saw there were sufficient staff on duty at all times to make sure peoples’ needs were met by staff that knew them well.
Currently there were three of the staff team who were on leave however the service had staff they could call on to cover any absences which would help to ensure continuity of care and support.
We were told that the staffing levels were determined by the level of support that people needed and that this was kept under review.
Staff were knowledgeable about people’s needs although only two of the team had a recognised qualification in care.

Our judgement
Our judgement is that the service is compliant with this outcome. People are happy with the staff team and their needs and wishes are being met in a timely and effective way.

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
We were not able to get peoples' views directly from them about this outcome. However their experiences were captured through records and other information. Staff told us they were able to express their views and opinions and were confident they were listened to.

Other evidence
The service sent us a copy of their Provider Compliance Assessment (PCA) as part of the planned review; this helped us to understand what was in place to ensure the service was compliant.
We were told that staff received the training and support they needed to ensure they had the skills and knowledge to look after people properly.
We were provided with a training plan; it was clear that there were gaps in the provision of training, however we were assured that all mandatory training would be completed by September 2011.
Not all staff had an appropriate and recognised qualification in care.
Staff had access to a range of policies and procedures to help to support them with their work; staff were given a handbook that included key policies and procedures to guide them with their work.
Meetings were held regularly to keep staff up to date and to allow them to air their views.

Records of staff supervision were not seen at this visit.

As part of their conditions of registration with the Care Quality Commission the service need to register a suitable person to manage the home; the area manager told us that once changes to the organisation structure were completed they would then be able to forward an application to register a suitable manager.

The manager was able to meet regularly with other managers within the group and was supported by an area manager who visited the home at least monthly.

Our judgement

Our judgement is that the service is compliant with this outcome. The staff team are given the training and support they need to understand and meet people's needs.

Outcome 16: Assessing and monitoring the quality of service provision

What the outcome says

This is what people who use services should expect.

People who use services:

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

What we found

Our judgement

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

Our findings

What people who use the service experienced and told us
People who lived at the home were able to discuss their care and raise any concerns about how the home was run.

Other evidence
The service sent us a copy of their Provider Compliance Assessment (PCA) as part of the planned review; this helped us to understand what was in place to ensure the service was compliant.
Systems to obtain peoples' views and opinions about the service had been reviewed as previously there had been a poor response. Currently anyone who visited the home was asked to complete a confidential survey; the information from the survey was used to improve the way the home was run.
We saw that regular checks were done to make sure the home was safe and meeting people's needs and expectations; the results of these checks were also used to improve the home.
We were told that it was not always appropriate to hold regular meetings but people were encouraged to express their views and opinions of the service through reviews and informal discussions with staff and management.
People who lived at the home were able to discuss their care and raise any

concerns about how the home was run.

Our judgement

Our judgement is that the service is compliant with this outcome. People are able to express their views and opinions about the home and influence how the home is run.

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
One person who lived at Pendle View said she would talk to staff or her social worker if she had any concerns; she said “staff listen”.

Other evidence
There had been no complaints or concerns since the last visit and records were monitored each month by the area manager.
The area manager told us that the complaints procedure was included in the service user's guide and it had been given to family and friends and explained to people living in the home.
People who lived at the home and staff were able to discuss any concerns on an informal daily basis or at formal reviews.

Our judgement
Our judgement is that the service is compliant with this outcome. The service has systems in place to deal with comments and complaints.

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
We were not able to get peoples' views directly from them about this outcome. However their experiences were captured through records and other information.

Other evidence
During the visit we looked at the records kept in the home. They were organised, kept up to date and stored securely.
Records regarding people's care and support were updated when needed. We found all records relating to people living and working in the home were kept confidential.
Records about care and support were clear, factual and accurate and the way in which they were written did not compromise people's dignity or breach confidentiality.
Some of the records were stored and maintained on the computer with clear guidance about what could be accessed and by whom.

Our judgement
Our judgement is that the service is compliant with this outcome. Personal records

of people living in the home and other records required to protect their safety and wellbeing are kept confidential, up to date and stored securely.

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	14	Outcome 5: Meeting nutritional needs
	<p>Why we have concerns: Our judgement is that the service is not fully compliant with this outcome. We have a minor concern as whilst people were involved in budgeting, shopping, planning and meal preparation which would give them the skills they needed it was not clear whether they were provided with a varied and nutritious diet that met with their dietary requirements and personal choices.</p>	
Accommodation for persons who require nursing or personal care	13	Outcome 9: Management of medicines
	<p>Why we have concerns: Our judgement is that the service is not fully compliant with this outcome. We have a minor concern as some staff were administering medicines without appropriate training; however further training had been planned to ensure staff had the necessary skills and competencies.</p>	

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 within 14 days of this report being received.

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 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

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