

We are the regulator: Our job is to check whether hospitals, care homes and care services are meeting essential standards.

St Matthews Unit

29-31 St Matthews Parade, Kingsley,
Northampton, NN2 7HF

Tel: 01604711222

Date of Inspection: 25 October 2012

Date of Publication:
November 2012

We inspected the following standards as part of a routine inspection. This is what we found:

Care and welfare of people who use services	✘	Action needed
Safeguarding people who use services from abuse	✔	Met this standard
Safety, availability and suitability of equipment	✔	Met this standard
Supporting workers	✘	Action needed
Complaints	✔	Met this standard

Details about this location

Registered Provider	St Matthews Limited
Registered Manager	Mr. Jasbinder Singh Bhullar
Overview of the service	St Matthews Unit provides accommodation for up to 58 people who have mental health needs.
Type of services	Care home service with nursing Rehabilitation services
Regulated activities	Accommodation for persons who require nursing or personal care Assessment or medical treatment for persons detained under the Mental Health Act 1983 Treatment of disease, disorder or injury

Contents

When you read this report, you may find it useful to read the sections towards the back called 'About CQC inspections' and 'How we define our judgements'.

	Page
<hr/>	
Summary of this inspection:	
Why we carried out this inspection	4
How we carried out this inspection	4
What people told us and what we found	4
What we have told the provider to do	4
More information about the provider	4
<hr/>	
Our judgements for each standard inspected:	
Care and welfare of people who use services	6
Safeguarding people who use services from abuse	8
Safety, availability and suitability of equipment	9
Supporting workers	10
Complaints	11
<hr/>	
Information primarily for the provider:	
Action we have told the provider to take	12
<hr/>	
About CQC Inspections	14
<hr/>	
How we define our judgements	15
<hr/>	
Glossary of terms we use in this report	17
<hr/>	
Contact us	19

Summary of this inspection

Why we carried out this inspection

This was a routine inspection to check that essential standards of quality and safety referred to on the front page were being met. We sometimes describe this as a scheduled inspection.

This was an unannounced inspection.

How we carried out this inspection

We looked at the personal care or treatment records of people who use the service, carried out a visit on 25 October 2012, observed how people were being cared for and checked how people were cared for at each stage of their treatment and care. We sent a questionnaire to people who use the service, talked with people who use the service and talked with staff.

What people told us and what we found

We spoke with people that use the service and they gave us mixed reviews. Some people told us staff were friendly and helpful and others told us that staff spoke in different languages which they didn't like. People told us that they were regularly involved in different activities and that they could do whatever they wanted. We found concerns in relation to the care and welfare of people using the service, supporting of staff and record keeping.

You can see our judgements on the front page of this report.

What we have told the provider to do

We have asked the provider to send us a report by 14 December 2012, setting out the action they will take to meet the standards. We will check to make sure that this action is taken.

Where providers are not meeting essential standards, we have a range of enforcement powers we can use to protect the health, safety and welfare of people who use this service (and others, where appropriate). When we propose to take enforcement action, our decision is open to challenge by the provider through a variety of internal and external appeal processes. We will publish a further report on any action we take.

More information about the provider

Please see our website www.cqc.org.uk for more information, including our most recent judgements against the essential standards. You can contact us using the telephone number on the back of the report if you have additional questions.

There is a glossary at the back of this report which has definitions for words and phrases we use in the report.

Our judgements for each standard inspected

Care and welfare of people who use services

✘ Action needed

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

Our judgement

The provider was not meeting this standard.

People did not always experience care, treatment and support that met their needs and protected their rights.

We have judged that this has a moderate impact on people who use the service, and have told the provider to take action. Please see the 'Action' section within this report.

Reasons for our judgement

We spoke with people who use the service and received mixed reviews; some people told us that staff were helpful and that they were well cared for and other told us that staff spoke in languages they did not understand which made them feel uncomfortable.

We spoke with staff members who told us that a variety of languages were spoken within the home in the presence of people who use the service which made people anxious. We spoke with the manager of the home who explained they were aware of the issue around staff not always speaking English and that it was under constant review in staff meetings.

We observed people sitting in the lounge area which provided a relaxing environment. People were interacting with one another and watching television. We saw a notice board which displayed activities in which people could take part on a regular basis, such as cooking, arts and crafts and trips out into the community. The manager told us that people were encouraged to be independent and interact with the community. The manager also told us that people would bake for community events such as car boot sales.

People's needs were assessed and care and treatment was planned, however it was not always delivered in line with their individual care plan. We looked at five people's care plans and saw that assessments were carried out upon admission to establish people's needs. We saw that assessments were regularly reviewed and amended if people's needs changed. We observed staff interacting with people who presented challenging behaviour, they remained calm and spoke gently with people to assure them. We observed staff assisting people with mobility difficulties and they reassured people. We saw that people within the home who regularly demonstrated challenging behaviour were under close supervision although staff did not prevent them from moving around the home if they wished. This meant people were not discriminated against.

We observed one person who required regular turning as defined in their care plan. We

observed that person on numerous occasions during our inspection and found that they had remained in the same position throughout. We spoke to the manager and showed them that the person was still in the same position and the manager explained they would ask the duty nurse to investigate. We were told that the person was turned twice during our inspection, however the information provided demonstrated that the person was not turned in line with their care plan. We looked at care records of the person who required turning every two hours. The records were infrequent and indicated the person was not being turned as defined in their care plan. Staff told us that a new turn chart had not been put in place when the previous one was completed and that's why records were kept on a plain piece of paper. We looked at the food and fluid chart for that same person and found that the timings of breakfast being served differed in the food and fluid chart to the daily notes by up to two hours. Staff told us they did not know which record was accurate.

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

Our judgement

The provider was meeting this standard.

People who use the service were protected from the risk of abuse, because the provider had taken reasonable steps to identify the possibility of abuse and prevent abuse from happening.

Reasons for our judgement

People who use the service were protected from the risk of abuse, because the provider had taken reasonable steps to identify the possibility of abuse and prevent abuse from happening. We looked at documentation in relation to safeguarding and found that there was a robust policy in place which explained the different types of abuse and detailed each person's responsibility in reporting abuse. The provider may find it useful to note that the policy does not give contact details for the local authority safeguarding team or the relevant forms to be completed, however the manager displayed knowledge of who needed to be contacted and how to contact them.

We looked at safeguarding referrals made by the home which were recorded in either the safeguarding file or people's personal files. We saw notifications were raised in cases of suspected abuse and that investigations were conducted by the local authority or by the provider when requested to do so. The provider may find it useful to note that the outcome of safeguarding investigations were not always evident in the safeguarding files.

People should be safe from harm from unsafe or unsuitable equipment

Our judgement

The provider was meeting this standard.

People were protected from unsafe or unsuitable equipment.

Reasons for our judgement

There was enough equipment to promote the independence and comfort of people who use the service. We looked at furniture within the home and saw that there were plenty of seats for people to relax in within the lounge area. We spoke with some people in the home who showed us that they had their own sofas within their accommodation. We looked at hoists within the home which were available to move people safely. We saw each person requiring a hoist had one present in their accommodation with their own sling. Staff told us that the hoists were fully operable and the manager provided us with information in relation to the maintenance of the equipment within the home.

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

Our judgement

The provider was not meeting this standard.

People were cared for by staff who were not supported to deliver care and treatment safely and to an appropriate standard.

We have judged that this has a moderate impact on people who use the service, and have told the provider to take action. Please see the 'Action' section within this report.

Reasons for our judgement

We spoke with staff who informed us that the provider made courses available for them to go on and that they conducted training courses frequently. Staff also told us supervisions were infrequent.

Staff had not received appropriate professional development. We looked at staff files and found that new members of staff had received supervisions. We looked at the files of staff who had been working at the service for a longer period of time and found that one member of staff had not received a supervision in over twelve months. The manager told us that supervisions were a priority of the service and that they would be conducting more frequent supervisions in the future.

We looked at staff training records and found that training was available in a wide variety of subjects. We looked at the provider's record of mandatory training and found that of 83 members of staff recorded as working in the home, only 19 had completed safeguarding training within the last twelve months. We also found that only 33 members of staff had completed manual handling training within the last twelve months.

We looked at training records for new members of staff and saw that they had not completed mandatory training. The manager explained to us that new staff were provided with a workbook to complete as part of the induction phase. The manager explained to us that once the workbook was completed staff would commence their mandatory training.

People should have their complaints listened to and acted on properly

Our judgement

The provider was meeting this standard.

There was an effective complaints system available. Comments and complaints people made were responded to appropriately.

Reasons for our judgement

We spoke with people who used the service and they told us they were able to make complaints if they were unhappy with the service.

People were made aware of the complaints system. This was provided in a format that met their needs. We saw there was a notice board within the home that displayed a simplified version of the full complaints procedure. We looked at the full complaints policy and found there was a robust process for responding to people's complaints and how they were to be investigated.

We looked at records of complaints made and saw that they were responded to appropriately and that where necessary complaints were investigated. The provider may find it useful to note that outcomes of investigations were not always recorded.

This section is primarily information for the provider

✘ Action we have told the provider to take

Compliance actions

The table below shows the essential standards of quality and safety that **were not being met**. The provider must send CQC a report that says what action they are going to take to meet these essential standards.

Regulated activities	Regulation
Accommodation for persons who require nursing or personal care	Regulation 9 HSCA 2008 (Regulated Activities) Regulations 2010 Care and welfare of people who use services
Assessment or medical treatment for persons detained under the Mental Health Act 1983	How the regulation was not being met: The provider had not taken proper steps to ensure that each service user is protected against the risks of receiving care or treatment that is inappropriate or unsafe. (Regulation 9 HSCA 2008)
Treatment of disease, disorder or injury	
Regulated activities	Regulation
Accommodation for persons who require nursing or personal care	Regulation 23 HSCA 2008 (Regulated Activities) Regulations 2010 Supporting workers
Assessment or medical treatment for persons detained under the Mental Health Act 1983	How the regulation was not being met: Staff had not received appropriate training, professional development, supervision and appraisals. (Regulation 23 HSCA 2008)

This section is primarily information for the provider

Treatment of disease, disorder or injury	
--	--

This report is requested under regulation 10(3) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010.

The provider's report should be sent to us by 14 December 2012.

CQC should be informed when compliance actions are complete.

We will check to make sure that action has been taken to meet the standards and will report on our judgements.

About CQC inspections

We are the regulator of health and social care in England.

All providers of regulated health and social 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 essential standards are described in the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009. We regulate against these standards, which we sometimes describe as "government standards".

We carry out unannounced inspections of all care homes, acute hospitals and domiciliary care services in England at least once a year to judge whether or not the essential standards are being met. We carry out inspections of dentists and other services at least once every two years. All of our inspections are unannounced unless there is a good reason to let the provider know we are coming.

There are 16 essential standards that relate most directly to the quality and safety of care and these are grouped into five key areas. When we inspect we could check all or part of any of the 16 standards at any time depending on the individual circumstances of the service. Because of this we often check different standards at different times but we always inspect at least one standard from each of the five key areas every year. We may check fewer key areas in the case of dentists and some other services.

When we inspect, we always visit and we do things like observe how people are cared for, and we talk to people who use the service, to their carers and to staff. We also review information we have gathered about the provider, check the service's records and check whether the right systems and processes are in place.

We focus on whether or not the provider is meeting the standards and we are guided by whether people are experiencing the outcomes they should be able to expect when the standards are being met. By outcomes we mean the impact care has on the health, safety and welfare of people who use the service, and the experience they have whilst receiving it.

Our inspectors judge if any action is required by the provider of the service to improve the standard of care being provided. Where providers are non-compliant with the regulations, we take enforcement action against them. If we require a service to take action, or if we take enforcement action, we re-inspect it before its next routine inspection was due. This could mean we re-inspect a service several times in one year. We also might decide to re-inspect a service if new concerns emerge about it before the next routine inspection.

In between inspections we continually monitor information we have about providers. The information comes from the public, the provider, other organisations, and from care workers.

You can tell us about your experience of this provider on our website.

How we define our judgements

The following pages show our findings and regulatory judgement for each essential standard or part of the standard that we inspected. Our judgements are based on the ongoing review and analysis of the information gathered by CQC about this provider and the evidence collected during this inspection.

We reach one of the following judgements for each essential standard inspected.

✓ Met this standard This means that the standard was being met in that the provider was compliant with the regulation. If we find that standards were met, we take no regulatory action but we may make comments that may be useful to the provider and to the public about minor improvements that could be made.

✗ Action needed This means that the standard was not being met in that the provider was non-compliant with the regulation. We may have set a compliance action requiring the provider to produce a report setting out how and by when changes will be made to make sure they comply with the standard. We monitor the implementation of action plans in these reports and, if necessary, take further action. We may have identified a breach of a regulation which is more serious, and we will make sure action is taken. We will report on this when it is complete.

✗ Enforcement action taken If the breach of the regulation was more serious, or there have been several or continual breaches, we have a range of actions we take using the criminal and/or civil procedures in the Health and Social Care Act 2008 and relevant regulations. These enforcement powers include issuing a warning notice; restricting or suspending the services a provider can offer, or the number of people it can care for; issuing fines and formal cautions; in extreme cases, cancelling a provider or managers registration or prosecuting a manager or provider. These enforcement powers are set out in law and mean that we can take swift, targeted action where services are failing people.

How we define our judgements (continued)

Where we find non-compliance with a regulation (or part of a regulation), we state which part of the regulation has been breached. We make a judgement about the level of impact on people who use the service (and others, if appropriate to the regulation) from the breach. This could be a minor, moderate or major impact.

Minor impact – people who use the service experienced poor care that had an impact on their health, safety or welfare or there was a risk of this happening. The impact was not significant and the matter could be managed or resolved quickly.

Moderate impact – people who use the service experienced poor care that had a significant effect on their health, safety or welfare or there was a risk of this happening. The matter may need to be resolved quickly.

Major impact – people who use the service experienced poor care that had a serious current or long term impact on their health, safety and welfare, or there was a risk of this happening. The matter needs to be resolved quickly

We decide the most appropriate action to take to ensure that the necessary changes are made. We always follow up to check whether action has been taken to meet the standards.

Glossary of terms we use in this report

Essential standard

The essential standards of quality and safety are described in our *Guidance about compliance: Essential standards of quality and safety*. They consist of a significant number of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009. These regulations describe the essential standards of quality and safety that people who use health and adult social care services have a right to expect. A full list of the standards can be found within the *Guidance about compliance*. The 16 essential standards are:

Respecting and involving people who use services - Outcome 1 (Regulation 17)

Consent to care and treatment - Outcome 2 (Regulation 18)

Care and welfare of people who use services - Outcome 4 (Regulation 9)

Meeting Nutritional Needs - Outcome 5 (Regulation 14)

Cooperating with other providers - Outcome 6 (Regulation 24)

Safeguarding people who use services from abuse - Outcome 7 (Regulation 11)

Cleanliness and infection control - Outcome 8 (Regulation 12)

Management of medicines - Outcome 9 (Regulation 13)

Safety and suitability of premises - Outcome 10 (Regulation 15)

Safety, availability and suitability of equipment - Outcome 11 (Regulation 16)

Requirements relating to workers - Outcome 12 (Regulation 21)

Staffing - Outcome 13 (Regulation 22)

Supporting Staff - Outcome 14 (Regulation 23)

Assessing and monitoring the quality of service provision - Outcome 16 (Regulation 10)

Complaints - Outcome 17 (Regulation 19)

Records - Outcome 21 (Regulation 20)

Regulated activity

These are prescribed activities related to care and treatment that require registration with CQC. These are set out in legislation, and reflect the services provided.

Glossary of terms we use in this report (continued)

(Registered) Provider

There are several legal terms relating to the providers of services. These include registered person, service provider and registered manager. The term 'provider' means anyone with a legal responsibility for ensuring that the requirements of the law are carried out. On our website we often refer to providers as a 'service'.

Regulations

We regulate against the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009.

Responsive inspection

This is carried out at any time in relation to identified concerns.

Routine inspection

This is planned and could occur at any time. We sometimes describe this as a scheduled inspection.

Themed inspection

This is targeted to look at specific standards, sectors or types of care.

Contact us

Phone: 03000 616161

Email: enquiries@ccq.org.uk

Write to us
at: Care Quality Commission
Citygate
Gallowgate
Newcastle upon Tyne
NE1 4PA

Website: www.cqc.org.uk

Copyright Copyright © (2011) Care Quality Commission (CQC). This publication may be reproduced in whole or in part, free of charge, in any format or medium provided that it is not used for commercial gain. This consent is subject to the material being reproduced accurately and on proviso that it is not used in a derogatory manner or misleading context. The material should be acknowledged as CQC copyright, with the title and date of publication of the document specified.
