

Review of compliance

The Committee of Management for the Horder
Centre for Arthritis
The Horder Centre

Region:	South East
Location address:	St John's Road Crowborough East Sussex TN6 1XP
Type of service:	Acute services with overnight beds
Date of Publication:	February 2012
Overview of the service:	<p>The Horder Centre is registered as an acute hospital which mainly provides services for people suffering from rheumatoid arthritis and associated conditions.</p> <p>The hospital is situated on the edge of the Ashdown Forest in extensive grounds. Access to the hospital is by</p>

	<p>road only with ample parking available. Access for people with limited mobility is via the main entrance adjacent to a car park.</p> <p>In addition the hospital provides physiotherapy and occupational therapy.</p>
--	--

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

Our current overall judgement

The Horder Centre was meeting all the essential standards of quality and safety.

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

Why we carried out this review

We carried out this review 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.

What people told us

We spoke to people using the services and staff in each of the areas that we visited. People told us that their overall impression of the care they had received was very good.

Comments from patients about their experience included "The care is superb", and "We are very pleased, we came into the centre and have been seen by various nurses, everyone is brilliant". One person said "I was here three years ago and I will be back in two weeks time to have my other hip done. The care here is excellent and if you get the chance this is where to come".

People told us that their privacy and dignity was maintained at all times.

People told us that they had been given information about the operation they needed and the risks that were involved. They said they had signed to give their consent to their operation.

People told us that they were involved in the decisions about their treatment and their care. One person said "The consultant went through all the options and left it up to me to make a decision". Other comments received were "My wife was given all the information about what was going to happen, so that she could give her own consent" and "Everything was discussed at pre-assessment and then we were given a booklet about what was going to happen. Another person said "I have been given these patient's guides with post-operative information and exercises that I need to do when I get home".

People said that hand cleaning was carried out by staff in advance of any care being provided. Comments received were "Staff gel their hands every time they come into the room" and "Staff gel their hands all the time".

People told us that the level of cleanliness was very good and that the wards were swept and cleaned on a regular basis. People had seen that beds and equipment were cleaned between uses.

Comments from patients included "The room was cleaned this morning and I have seen cleaners outside in the corridor" and "Look at this bowl it has a sticker on it to say 'I have been cleaned 23/01/2012'".

What we found about the standards we reviewed and how well The Horder Centre was meeting them

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

People were involved in the decisions about the care provided. Care was based on their individual needs and preferences. People who used the service were treated with respect.

Overall, we found that The Horder Centre was meeting this essential standard.

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

People received care and support that met their needs.

Overall, we found that The Horder Centre was meeting this essential standard.

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

People felt safe using the service. Staff were trained and able to respond appropriately to any actual or suspected abuse that occurred.

Overall, we found that The Horder Centre was meeting this essential

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

People were being protected from the risk of infection. The Horder Centre had effective systems to assess the risk of and to prevent, detect and control the spread of infection. They could provide appropriate treatment for those affected by an infection and maintained appropriate standards of hygiene.

Overall, we found that The Horder Centre 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

People received care that met their assessed needs. Staff were sufficient in number and held the appropriate skills, qualifications and experience.

Overall, we found that The Horder Centre was meeting this essential standard.

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

The service had systems in place to ensure staff received the necessary training and support to care for people who use service. Staff had regular supervision and appraisals to support them in their role.

Overall, we found that The Horder Centre was meeting this essential standard.

Outcome 16: The service should have quality checking systems to manage risks and assure the health, welfare and safety of people who receive care

The provider has ensured that people who use the service were safe. The quality of care provision is monitored and improvements were made when concerns were raised.

Overall, we found that The Horder Centre was meeting this essential standard.

Other information

Please see previous reports for more information about previous reviews.

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

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

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

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

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

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

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

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

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

Outcome 01: Respecting and involving people who use services

What the outcome says

This is what people who use services should expect.

People who use services:

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

What we found

Our judgement

The provider is compliant with Outcome 01: Respecting and involving people who use services

Our findings

What people who use the service experienced and told us

People told us that they had been given information about the operation they needed and the risks that were involved. They said they had signed to give their consent to their operation.

People told us that they were involved in the decisions about their treatment and their care. One person said "The consultant went through all the options and left it up to me to make a decision". Other comments received were "My wife was given all the information about what was going to happen, so that she could give her own consent" and "Everything was discussed at pre-assessment and then we were given a booklet about what was going to happen. Another person said "I have been given these patient's guides with post-operative information and exercises that I need to do when I get home".

People told us that their privacy and dignity was maintained at all times.

Other evidence

During our visit we saw that patients were being spoken with and supported in a sensitive, respectful and professional manner.

We found that systems for consultation, interaction and communication were effective. Individuals had their privacy and dignity upheld.

We saw examples of comprehensive person centred support plans. Care plans had been developed for each individual. They documented people's wishes and preferences in relation to how their care was provided, how they liked to spend their time and how they preferred to be supported. We saw that people had signed their consent forms to confirm they were happy with them.

Our judgement

People were involved in the decisions about the care provided. Care was based on their individual needs and preferences. People who used the service were treated with respect.

Overall, we found that The Horder Centre was meeting this essential standard.

Outcome 04: Care and welfare of people who use services

What the outcome says

This is what people who use services should expect.

People who use services:

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

What we found

Our judgement

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

Our findings

What people who use the service experienced and told us

People told us that their overall impression of the care they had received was very good.

Comments from patients about their experience included "The care is superb", and "We are very pleased, we came into the centre and have been seen by various nurses, everyone is brilliant". One person said "I was here three years ago and I will be back in two weeks time to have my other hip done. The care here is excellent and if you get the chance this is where to come".

People told us that they were involved in the decisions about their treatment and their care. One person said "The consultant went through all the options and left it up to me to make a decision". Other comments received were "My wife was given all the information about what was going to happen, so that she could give her own consent" and "Everything was discussed at pre-assessment and then we were given a booklet about what was going to happen. Another person said "I have been given these patient's guides with post-operative information and exercises that I need to do when I get home".

Other evidence

We saw that notes containing patient's observations, symptoms and care pathways including discharge planning were kept in their rooms.

Staff told us that they used surgical care pathways on the ward and added extra care

plans as they needed them.

We looked at notes and saw a signed patient agreement to investigation or treatment, identifying serious or frequent risks. Records were looked at and assessments and care plans were seen to be in place together with any risk assessments such as moving and handling, risk of deep vein thrombosis and charts to monitor things such as blood pressure, temperature and fluid and food intake.

We saw that one patient had memory difficulties. We saw that that a special requirements form had been completed identifying that although the patient had a supportive husband, she may need additional support during their time on the ward.

We saw that another patient was diabetic and needed medication to control the symptoms. We saw that there was a diabetic chart and that daily monitoring of blood sugar had been completed. We looked at medication records and saw that medication had been given at the right time and the correct dosage.

Our judgement

People received care and support that met their needs.

Overall, we found that The Horder Centre was meeting this essential standard.

Outcome 07: Safeguarding people who use services from abuse

What the outcome says

This is what people who use services should expect.

People who use services:

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

What we found

Our judgement

The provider is compliant with Outcome 07: Safeguarding people who use services from abuse

Our findings

What people who use the service experienced and told us

People told us that they felt safe and were well cared for by staff.

Other evidence

The provider stated that safeguarding was taken seriously and people were treated with dignity and respect. We saw training records that confirmed that all staff had attended safeguarding of vulnerable adult training. This enabled staff to understand the aspects of safeguarding which were relevant to them.

Staff spoken with showed a good knowledge of safeguarding people from abuse. Staff knew how to recognise the signs of abuse and that they must report all cases of concern to the appropriate person.

We looked at the provider's safeguarding policy and procedure and found that it included the local authority multi-agency safeguarding procedures.

Our judgement

People felt safe using the service. Staff were trained and able to respond appropriately to any actual or suspected abuse that occurred.

Overall, we found that The Horder Centre was meeting this essential

Outcome 08: Cleanliness and infection control

What the outcome says

Providers of services comply with the requirements of regulation 12, with regard to the Code of Practice for health and adult social care on the prevention and control of infections and related guidance.

What we found

Our judgement

The provider is compliant with Outcome 08: Cleanliness and infection control

Our findings

What people who use the service experienced and told us

People told us that their room/the ward was cleaned regularly and they were happy that the hospital was kept clean.

Other evidence

When we walked around the hospital during our visit, we saw that it was clean and tidy with no unpleasant odours. There was antiseptic gel available and hand-washing facilities for staff and visitors were in place and well stocked. We saw that clinical waste was being collected and disposed of appropriately.

The hospital was using the Health and Social Care Act 2008 Code of Practice on infection control and other related guidance. The staff we spoke with understood their responsibilities in relation to this. An identified lead for infection control had been appointed and when we spoke to them, they understood their responsibilities.

Staff we spoke with told us they had been trained in infection control and the staff training records confirmed this. The notes from recent staff meetings demonstrated that infection control was a regular agenda item. There was information available to people using the service, and visitors, about the control of infection.

During our visit, we saw that there were a range of policies in place to prevent and control infections. We saw recent records of audits of cleaning and infection control standards in the hospital. There were recent risk assessments for potential infections and a clear plan for how these infections would be managed and how treatment would be provided. We saw that there was a plan for isolating people when there was an infection in the hospital.

Our judgement

People were being protected from the risk of infection. The Horder Centre had effective systems to assess the risk of and to prevent, detect and control the spread of infection. They could provide appropriate treatment for those affected by an infection and maintained appropriate standards of hygiene.

Overall, we found that The Horder Centre was meeting this essential standard.

Outcome 13: Staffing

What the outcome says

This is what people who use services should expect.

People who use services:

* Are safe and their health and welfare needs are met by sufficient numbers of appropriate staff.

What we found

Our judgement

The provider is compliant with Outcome 13: Staffing

Our findings

What people who use the service experienced and told us

People told us that they felt that there were sufficient staff in place and that staff were very caring and responsive.

Other evidence

The provider stated that there was an assessment of the needs of people who used the service. This was reflected in the skills, qualifications and experience that were needed for staff to provide care that was safe and effective, and which met those needs, protected people's rights and promoted independence. Generally there was sufficient staffing levels with an appropriate skill mix at all times. This included cover arrangements for planned and sudden staff absences.

Staff spoken with stated that there were sufficient staff in place to be able to give the care that people needed, to a good standard. We observed that call bells were being answered efficiently and that staff were able to spend time with and interact with people in a positive manner.

We looked at staffing rotas and noted that there was an appropriate level of core staffing in place.

Our judgement

People received care that met their assessed needs. Staff were sufficient in number and held the appropriate skills, qualifications and experience.

Overall, we found that The Horder Centre was meeting this essential standard.

Outcome 14: Supporting staff

What the outcome says

This is what people who use services should expect.

People who use services:

* Are safe and their health and welfare needs are met by competent staff.

What we found

Our judgement

The provider is compliant with Outcome 14: Supporting staff

Our findings

What people who use the service experienced and told us

People told us that staff were knowledgeable and helpful.

Other evidence

The service provided an induction programme for staff and new staff were allocated a mentor for the first month and worked under supervision.

Records showed that staff had attended the induction programme and staff told us they had attended the induction programme.

The service had a learning and development plan in place and staff training needs were identified through one to one supervision and the appraisal system. Some of the training, such as fire safety, risk management and safeguarding vulnerable adults was provided internally by an e-learning programme.

We saw records of training attended by staff and they were up to date and included reminders for refresher training. Staff we spoke with said they had attended all relevant training.

Staff told us they received regular ongoing supervision and the service supported them to attend training days.

Our judgement

The service had systems in place to ensure staff received the necessary training and support to care for people who use service. Staff had regular supervision and

appraisals to support them in their role.

Overall, we found that The Horder Centre was meeting this essential standard.

Outcome 16: Assessing and monitoring the quality of service provision

What the outcome says

This is what people who use services should expect.

People who use services:

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

What we found

Our judgement

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

Our findings

What people who use the service experienced and told us

People told us that they were asked their views about the service. Some people told us they had been asked to complete a survey about the service.

Other evidence

We saw that there was a record of identified risks and issues with action plans in place where needed. We were shown examples of audits about infection control, waste management and safe handling of sharps. We looked at minutes of staff and patient meetings and questionnaires completed by patients. These demonstrated that the quality of the service was monitored and concerns addressed appropriately.

Information about people's experiences had been gathered in such a way to allow for monitoring of risks and the quality of care delivery.

During our visit, we observed people being spoken with and supported in a sensitive, respectful and professional manner. This included assessment of their satisfaction and having their needs met.

We also saw a report that was presented by the manager to the board and issues arising from this had been addressed in a timely manner.

Complaints were logged and incidents were reported and both had been reviewed to identify trends. Lessons arising from these had been used to make changes to the service.

The management structure for decision making and accountability provided guidance for staff, to ensure that care and support needs were met consistently and safely. Staff were confident and aware of how to raise concerns.

Our judgement

The provider has ensured that people who use the service were safe. The quality of care provision is monitored and improvements were made when concerns were raised.

Overall, we found that The Horder Centre was meeting this essential standard.

What is a review of compliance?

By law, providers of certain adult social care and health care services have a legal responsibility to make sure they are meeting essential standards of quality and safety. These are the standards everyone should be able to expect when they receive care.

The Care Quality Commission (CQC) has written guidance about what people who use services should experience when providers are meeting essential standards, called *Guidance about compliance: Essential standards of quality and safety*.

CQC licenses services if they meet essential standards and will constantly monitor whether they continue to do so. We formally review services when we receive information that is of concern and as a result decide we need to check whether a service is still meeting one or more of the essential standards. We also formally review them at least every two years to check whether a service is meeting all of the essential standards in each of their locations. Our reviews include checking all available information and intelligence we hold about a provider. We may seek further information by contacting people who use services, public representative groups and organisations such as other regulators. We may also ask for further information from the provider and carry out a visit with direct observations of care.

When making our judgements about whether services are meeting essential standards, we decide whether we need to take further regulatory action. This might include discussions with the provider about how they could improve. We only use this approach where issues can be resolved quickly, easily and where there is no immediate risk of serious harm to people.

Where we have concerns that providers are not meeting essential standards, or where we judge that they are not going to keep meeting them, we may also set improvement actions or compliance actions, or take enforcement action:

Improvement actions: These are actions a provider should take so that they **maintain** continuous compliance with essential standards. Where a provider is complying with essential standards, but we are concerned that they will not be able to maintain this, we ask them to send us a report describing the improvements they will make to enable them to do so.

Compliance actions: These are actions a provider must take so that they **achieve** compliance with the essential standards. Where a provider is not meeting the essential standards but people are not at immediate risk of serious harm, we ask them to send us a report that says what they will do to make sure they comply. We monitor the implementation of action plans in these reports and, if necessary, take further action to make sure that essential standards are met.

Enforcement action: These are actions we take using the criminal and/or civil procedures in the Health and Social Care Act 2008 and relevant regulations. These enforcement powers are set out in the law and mean that we can take swift, targeted action where services are failing people.

Information for the reader

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

Care Quality Commission

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