

Review of compliance

Norfolk Hospice Tapping House Norfolk Hospice Tapping House	
Region:	East
Location address:	Common Road Snettisham King's Lynn Norfolk PE31 7PF
Type of service:	Hospice services
Date of Publication:	February 2012
Overview of the service:	The Norfolk Hospice Tapping House is an independent charity providing palliative day care on five days a week to people with life-limiting illness. It works in partnership with NHS, voluntary and statutory organisations.

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

Our current overall judgement

Norfolk Hospice Tapping House 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, carried out a visit on 26 January 2012, looked at records of people who use services, talked to staff and talked to people who use services.

What people told us

Throughout the day spent at this day service we received nothing but positive comments for the service provided, the staff and volunteers and the management team.

What we found about the standards we reviewed and how well Norfolk Hospice Tapping House 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

The provider is compliant in this outcome. People who use this day service are at the centre of all the support that is offered.

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

The provider is compliant in this outcome. People are supported in a way that meets their needs as safely as possible.

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

The provider is compliant in this outcome. People who use this service are safeguarded against the risk of abuse.

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

The provider is compliant in this outcome. People who use this service are supported by staff and volunteers who are trained and skilled to carry out the support required.

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 is compliant in this outcome. The service is evaluated by asking the people who use the service how the support offered to them affects them and if improvements can be made.

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

On the day of our visit 26 January 2012 it was clear, from discussions with people who use this day service, that they were put at the centre of all the work that took place at this hospice. The picture we were given of how the support was offered was very clear. We were told about how each person was greeted, how time was offered, one to one, what happened if the person was not having a good day and that nothing was too much trouble.

Three people we spoke with told us the support is focused on their interests and needs. "Nothing is too much trouble, not only am I seen as an individual but so is my carer who is just as involved as I am".

Other evidence

We were told that the people who use the day service at this hospice have very diverse needs. The delivery of the support to meet those needs comes from experienced and qualified staff and volunteers. On certain days of the week the services were more therapeutic with trained staff offering sessions such as physiotherapy and on other days more social support was offered.

During our visit we spoke to a person who had just received a therapeutic session and

who told us how beneficial they were. On the wall in the corridor there was a vast display of leaflets that would guide people to further services they may require. Within the service there was a family liaison officer who worked with the families to offer support and guide them to other support services that may help them. During this visit a family was having some quiet time with this officer to discuss and work on ways to support them best. During this visit we also spoke with the person standing in for the regular chaplain. The person was heard talking to two people, with reassuring, supportive conversations for the people receiving the support.

In one area of the building we observed an art session taking place where people were enjoying painting with support offered by a volunteer. In the lounge we noted one to one conversations from either trained staff or volunteers. People who had arrived to experience the service for the first time had arrived with their partner/carer. Time was being offered getting all their questions answered. We saw reassuring smiles and relaxed body language.

Just before lunch we noted drinks being offered. A variety of soft drinks along with sherry or gin and tonic was on offer. The midday meal was set up in the dining room with white cloths on the tables with flowers, napkins and glasses. Although the room was fairly small for the people who may have had large wheelchairs to manoeuvre, this did not deter people from enjoying the experience. One carer was spending the day at the hospice to ensure they could have the confidence to leave their loved one. The carer was welcomed and involved in everything, including the meal. Choices of food were offered and people were supported with dietary requirements. One person, we were told, required a gluten free diet so the chef prepared that meal first to ensure no unsuitable ingredients were used. We noted that one person was asked if the meal on the plate was OK or would they prefer something else and one person was offered help to manage their meal.

Although we did not observe the people who use the service in the afternoon we were told about the variety of social activities offered. We were also told about the regular newsletters that were given to all people involved in the service to keep them updated of what is planned for the future. The staff and people who used the service all told us how valuable the carer's cafe was and how well it was used. Everyone we spoke to told us about the future plans for the new building and the development of the services as a new hospice is built over the next two years.

Our judgement

The provider is compliant in this outcome. People who use this day service are at the centre of all the support that is offered.

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

The people who were receiving day support during our visit told us about the procedures used to gain a place in the hospice. We were told about the visit from staff to their home to complete an assessment, discuss their introduction to the service and the ongoing reviews of the support they needed.

Other evidence

We talked to nursing staff and looked at records to gather a picture of how the service assessed, completed and reviewed care plans. Each person has a care folder held in the locked nurses' office. These started with the assessment of need for each person. It set out the needs of that person and how they were to be met. We noted the risks were assessed. We noted for example, the support required by one person with walking aids to lessen the risk of falls. We saw this person being supported with their aid by a staff member to encourage mobility and yet lessen the risk of falling.

On talking to staff and people who use the service it was evident that these plans were reviewed and that the people using the service were involved. However, the plans and reviews had not been signed and dated by the person concerned.

As this is a day service many people arrived by transport provided by the hospice. We noted how involved the drivers were and how record sheets and handovers were very much part of the day-to-day procedures used to ensure that all staff were up to date with the support each person required.

Our judgement

The provider is compliant in this outcome. People are supported in a way that meets their needs as safely as possible.

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

We did not speak to people directly about how they were protected from abuse. However, people told us they felt safe at all times and that staff were respectful and treated them well.

Other evidence

During this visit we spent time talking to various staff members and volunteers about their understanding of safeguarding and what they would do if they had concerns about anything that may be seen as abusive. We were told that the manager had given all staff training in the protection of vulnerable adults and that they would have no concerns in talking to higher management if they had any concerns. Records confirmed this training had taken place so staff would know what to do.

We also talked to management team about the recruitment of new staff and the need for enhanced Criminal Records Bureau (CRB) checks to be carried out. We were told that all staff who have contact with people who use the service had this check carried out. (Not all staff employed by the hospice had contact with people who used the service as some worked in the charity shops or warehouse). Within staff records we noted the methods used to employ staff and volunteers which showed the necessary checks were made.

The service had not had any safeguarding concerns raised with them. We had not received any information that gave us concerns about this service.

Our judgement

The provider is compliant in this outcome. People who use this service are safeguarded against the risk of abuse.

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

The people we spoke with gave high praise for the staff. Although they did not know how they were supported to carry out their job they all said the staff knew what they were doing, they were a friendly team who all worked well together.

Other evidence

We spoke with a number of staff during our visit who all had different job roles. They told us about the various training courses provided, many of them taking place internally, and updates of training for the qualified staff. The service had a facility within the complex that enabled staff and volunteers to have their support and training without disturbing the main area of the service.

We discussed the support offered by line managers and the regular meetings held to keep all the team up to date with information. We were told how supportive the management team were and how staff felt very much included and informed about what was going on in the service. Staff told us that they had regular one to one sessions with their line manager and an appraisal annually but that anyone who had any issues could discuss them at the time and not wait for a formal meeting. We were also told about the counselling service available for all personnel if and when this was required. The management team told us that they valued the team they employed and supported them as much as they could.

We spent time looking at training records held both as paper copies and on the computer. Computer records included a spreadsheet of all the staff/volunteers trained or due their training. We talked about the induction for new staff and how those staff

members are supported through a comprehensive probationary period to enable them to carry out their job fully.

Our judgement

The provider is compliant in this outcome. People who use this service are supported by staff and volunteers who are trained and skilled to carry out the support required.

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

Throughout the day of this visit we received nothing but praise for the service provided at this hospice. We were told the staff, drivers, volunteers and management were all dedicated and supportive. "You cannot fault the help we get from therapy, counselling, nice food to good company". One aspect of the service that was mentioned on a number of occasions was the full support offered to the carers. We were told, "My carer is just as involved in the support as I am. There is always someone available for them to talk to".

Other evidence

This service had a number of different people visiting the service on different days. Each day was different according to the planned therapy sessions or social support. The quality of the service was monitored in different ways.

We were given a copy of the 'Back to Back' therapy evaluation report of 2011. There were numerous comments that told us how supportive the therapy sessions had been. Comments such as 'this is second to none', and, 'this is a lifeline' were just two of a large number of comments. Where people were asked if anything would improve the service, all ten people who had replied made only positive remarks with no suggestions offered for improvement.

A similar result was noted in the evaluation for complementary therapy completed in December 2012 with no comments, other than positive remarks, on how this service could be improved.

During our walk around the building we noted that the equipment used, such as hoists had been serviced in 2011 and that the fire service had recently checked all the fire fighting equipment.

The service had procedures in place to ensure staff were recruited, trained, supervised and appraised to provide the job tasks expected at a quality required.

Our judgement

The provider is compliant in this outcome. The service is evaluated by asking the people who use the service how the support offered to them affects them and if improvements can be made.

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

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Author	Care Quality Commission
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