

Review of compliance

Bupa Care Homes (ANS) Limited The Harefield Nursing Centre

Region:	London
Location address:	Hill End Road Harefield Middlesex UB9 6UX
Type of service:	Care home service with nursing
Date of Publication:	October 2012
Overview of the service:	The Harefield Nursing Centre provides nursing care for up to forty people. There are two units, one for general nursing care and one for dementia care.

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

Our current overall judgement

The Harefield Nursing Centre was meeting all the essential standards of quality and safety inspected.

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 12 September 2012, observed how people were being cared for, looked at records of people who use services, talked to staff and talked to people who use services.

We were supported on this review by an expert-by-experience who has personal experience of using or caring for someone who uses this type of care service.

What people told us

People told us what it was like to live at this home and described how they were treated by staff and their involvement in making choices about their care. They also told us about the quality and choice of food and drink available. This was because this inspection was part of a themed inspection programme to assess whether older people living in care homes are treated with dignity and respect and whether their nutritional needs are met.

The inspection team was led by a Care Quality Commission (CQC) inspector joined by an Expert by Experience who has personal experience of using or caring for someone who uses this type of service and a practising professional.

We used the Short Observational Framework for Inspection (SOFI). SOFI is a specific way of observing care to help us understand the experience of people who could not talk to us.

At the time of inspection there were 34 people using the service. We spoke with eight staff, eight people using the service and four visitors.

People told us they were offered choices, for example what food they wanted to eat and were involved in deciding what they wanted to do throughout the day. People could not always remember if they had been involved with their care plan but were clear that they were able to make choices about the care and support they received. Comments received included "I like my room, I love the view from my room and spend time alone there for peace and quiet at times." and "I think I am very lucky to live here." One visitor said "I feel

the care given to my relative is first rate". Visitors told us they were free to visit at any time.

People confirmed they liked the food and were offered choices each day. One person said "I enjoy my food and look forward to meal times with my friends."

What we found about the standards we reviewed and how well The Harefield Nursing 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

The provider was meeting this standard.

People's views and experiences were taken into account in the way the service was provided and delivered in relation to their care. People's privacy, dignity and independence were respected.

Outcome 05: Food and drink should meet people's individual dietary needs

The provider was meeting this standard.

People were protected from the risks of inadequate nutrition and dehydration.

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

The provider was meeting this standard.

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

Outcome 13: There should be enough members of staff to keep people safe and meet their health and welfare needs

The provider was meeting this standard.

There were enough qualified, skilled and experienced staff to meet people's needs.

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

The provider was meeting this standard.

People were protected from the risks of unsafe or inappropriate care and treatment.

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.

Where we judge that a provider is non-compliant with a standard, we make a judgement about whether the impact on people who use the service (or others) is minor, moderate or major:

A minor impact means that 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.

A moderate impact means that 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.

A major impact means that 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.

Where we identify compliance, no further action is taken. Where we have concerns, the most appropriate action is taken to ensure that the necessary changes are made.

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 they were offered choices, for example what food they wanted to eat and were involved in deciding what they wanted to do throughout the day. People could not always remember if they had been involved with their care plan but were clear that they were able to make choices about the care and support they received. Comments received included "I like my room, I love the view from my room and spend time alone there for peace and quiet at times." and "I think I am very lucky to live here." One visitor said "I feel the care given to my relative is first rate". Visitors told us they were free to visit at any time.

Other evidence

Is people's privacy & dignity respected?

We observed staff caring for people in a polite and professional manner, respecting people's privacy and dignity. We heard staff knocking on bedroom doors and they waited to be invited into the person's room before entering. Bedrooms viewed were homely and people had brought items from home to make their rooms more personalised, and people were dressed to reflect individuality. When staff needed to access people's bedrooms to carry out a task, for example repairs or cleaning, we heard staff engaging people in conversation in a friendly and courteous manner. On the

general nursing unit we saw several bedroom doors were open. The deputy manager explained that if people wished to have their doors closed this was respected but that most people enjoyed being able to see and hear the general hustle and bustle of the daily routine.

Are people involved in making choices & decisions about their care?

People expressed their views and were involved in making decisions about their care and treatment. The deputy manager told us that as part of the pre-admission assessment, people's wishes in respect of term of address, waking and bedtimes and right to make any decisions for themselves were discussed so that these could be recorded and respected by staff. She also said she found out about people's interests so that these could be planned for and incorporated into their daily routine. Staff demonstrated that they understood the importance of giving people choices and listening to what they said so they could act upon their wishes. Staff said they treated people in a respectful manner and used their preferred term of address, which we witnessed during our inspection. In the care records we viewed we saw that people's next of kin had been involved in the care plans and any discussions were recorded.

The activities coordinator said there was a variety of group and individual activities to meet people's interests and needs. She said people could choose if they wanted to join in or not and their choice was respected. During the inspection a bingo session took place and people were enjoying the activity and there was a good atmosphere. The home had input from local churches, with representatives from the Roman Catholic, Church of England and Baptist Churches visiting the home to meet people's religious needs.

Our judgement

The provider was meeting this standard.

People's views and experiences were taken into account in the way the service was provided and delivered in relation to their care. People's privacy, dignity and independence were respected.

Outcome 05: Meeting nutritional needs

What the outcome says

This is what people who use services should expect.

People who use services:

* Are supported to have adequate nutrition and hydration.

What we found

Our judgement

The provider is compliant with Outcome 05: Meeting nutritional needs

Our findings

What people who use the service experienced and told us

People confirmed they liked the food and were offered choices each day. One person said "I enjoy my food and look forward to meal times with my friends."

Other evidence

Are people given a choice of suitable food and drink to meet nutritional needs?

The menu was displayed outside the dining room and provided a variety of choices for each meal. Staff said the menu choice list was completed each day and if someone did not like the options available then an alternative to meet their preferences would be provided. During the lunchtime meal we saw staff using the choice list that had been completed to make sure people were given what they wanted to eat. If someone changed their mind about what they wanted, then this was also catered for. The chef manager said she met with each person and discussed their food likes, dislikes and particular preferences with them so these were known. Drinks were available and people were offered choices of drinks to go with their meal.

Are people's religious or cultural backgrounds respected?

At the time of inspection there were no people who required a diet to meet religious or cultural needs. The chef manager was aware that meals to meet some religious and cultural needs were available through the food suppliers. The deputy manager said the pre-admission assessments included identifying people's religious and cultural needs. Any areas around specific dietary requirements would be discussed prior to the person coming to live at the home to ensure their needs could be met.

Are people supported to eat and drink sufficient amounts to meet their needs?

People were supported to be able to eat and drink sufficient amounts to meet their needs. We observed the lunchtime meal on each unit. We heard staff offering people choices and listening to them so that they provided the food and portion size they wanted. Staff were available to provide help and support to people with their meals and took time to assist them at their own pace. If a person did not understand what the meal was then staff gently explained the meal to them so they knew what they were eating. Where people chose to have their meal in their room this was respected. Drinks were provided during the meal and at various times throughout our inspection. People were enjoying their meals and there was a social atmosphere during the mealtime, especially on the general nursing unit.

Where people had swallowing difficulties they had received input from the dietician and Speech and Language Therapist. Staff understood how to assist people with swallowing difficulties with their meals to minimise the risk of choking. Plate guards and special cutlery were available where needed to assist people with their meals.

Our judgement

The provider was meeting this standard.

People were protected from the risks of inadequate nutrition and dehydration.

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 spoke to people using the services but their feedback did not relate to this standard. Relatives we spoke with were confident to raise any concerns.

Other evidence

Are steps taken to prevent abuse?

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. Staff had received safeguarding training and updates and understood safeguarding and whistle blowing procedures. BUPA had set up an 'HR hotline' for anyone to report concerns and staff were aware of this and were confident they would use it if necessary.

Do people know how to raise concerns?

Staff were able to describe the different types of abuse and were clear to report any signs of abuse to the senior person on duty. They knew how to contact the local authority to report concerns should the need arise. Local authority advocacy information was displayed in the home along with the BUPA complaints procedure, so that any person could contact these services to raise concerns.

Are Deprivation of Liberty safeguards used appropriately?

At the time of inspection there were no Deprivation of Liberty safeguards (DoLS) in place. Staff had received training in the Mental Capacity Act 2005 and in DoLS and understood about maintaining people's safety. The deputy manager said where DoLS concerns about someone were identified the GP was informed and a referral made to the clinical psychologist so the person could then, if necessary, have a 'best interest' assessment and be monitored on an ongoing basis. The activities coordinator said they sought permission from people and their next of kin when arranging outings to make sure the trip was appropriate for each person attending.

Our judgement

The provider was meeting this standard.

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

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

We spoke to people using the services but their feedback did not relate to this standard. We observed that staff were caring and took time to speak with people, listened to them and responded to their needs.

Other evidence

Are there sufficient numbers of staff?

At the time of inspection there were enough qualified, skilled and experienced staff to meet people's needs. Staff said they felt there were enough staff on duty at all times. Staff were available to assist people with their meals and when call bells were rung these were answered promptly during the inspection. The deputy manager explained they required agency nursing staff quite often to cover vacant shifts and the home had one main agency it used, which supplied nurses who were familiar with the service and provided continuity of care.

Do staff have the appropriate skills knowledge and experience?

Staff told us they had received training in several topics including dignity and nutrition. The deputy manager was responsible for the majority of the staff training and said all staff had received 'Personal Best' training, which includes giving people choices and respecting their individuality. Staff also received training in eating problems such as swallowing difficulties and were able to describe how to assist people with their meals.

Our judgement

The provider was meeting this standard.

There were enough qualified, skilled and experienced staff to meet people's needs.

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 spoke to people using the services but their feedback did not relate to this standard.

Other evidence

People's personal records including their care plans were accurate and fit for purpose. We viewed six sets of care records and the information was comprehensive and provided a good picture of the individual, their needs and how these were to be met. The 'Bupa Quest Individual Assessment' document was used to record a variety of needs including nutritional status, hydration, personal preferences, eating and drinking skills, mouth care and swallowing. Information from this document had been used to formulate the care plans to address identified needs. Care records had been reviewed monthly to keep the information up to date.

Nutritional risk assessments had been completed when a person was admitted to the home and food and fluid monitoring was carried out and recorded for the first two weeks of their stay, regardless of their nutritional status, to provide staff with accurate information about their eating patterns. Diet and fluid intake charts were in place thereafter for people identified at nutritional risk. Staff understood the importance of maintaining an accurate record and reporting any concerns.

Are records stored securely?

People's records were stored in cabinets at the nurse's station for each unit. This provided easy access for staff the cabinets could all be locked when unattended to maintain security and confidentiality.

Our judgement

The provider was meeting this standard.

People were protected from the risks of unsafe or inappropriate care and treatment.

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.

Where we judge that providers are not meeting essential standards, we may set compliance actions or take enforcement action:

Compliance actions: These are actions a provider must take so that they **achieve** compliance with the essential standards. 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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