

Review of compliance

Bupa Care Homes (ANS) Limited Warrens Hall Nursing Centre

Region:	West Midlands
Location address:	218 Oakham Road Tividale West Midlands B69 1PY
Type of service:	Care home service with nursing
Date of Publication:	February 2012
Overview of the service:	Warrens Hall Nursing Centre is a nursing home for 40 people.

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

Our current overall judgement

Warrens Hall Nursing 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 and carried out a visit on 10 January 2012.

What people told us

We spoke with people who told us that they were involved in their care. We heard from a relative that the registered manager had gone through the care plan with them. We heard from people that staff "went through the care plan" and "staff sit down and talk to me". Another person told us that "someone will speak to me to see how I'm getting on".

One person told us that no-one had gone through their care plan but they told us they were not interested in discussing their care. The person told us that staff had chatted to them about their likes and dislikes.

People told us that they were able to have their own things in their rooms such as pictures or photographs. A person told us that it was "like home, love my room, its comfortable".

People told us that the meals were good and one person told us that "you have a choice of meals, 2 choices usually, but if you ask they will give you what you want".

People told us that they were given questionnaires to fill out and had been invited to residents' meetings.

People said the staff "are very good to me, consider it home" and that staff are "good are responding to needs".

People also told us that staff met their needs and one person told us that they were "given food to easily swallow".

We saw that people were well presented, clean and looked content at the time of our visit.

A relative told us that their relative living at the home was "clean and well looked after" and was "happy with the home". Another relative told us that they were "happy with the care given and made to feel welcome".

A person living at the home told us that the "staff are very good to me, I consider it home".

People told us that there were different activities available to them and that the activity co-ordinator would get them involved. We saw that people had made personalised Christmas cards with the activity co-ordinator.

People told us that they "had no concerns and felt safe" and "the manager is approachable". People also told us that if they did have any concerns then they felt comfortable to speak to the staff about them.

Relatives told us that they also had no concerns about their relatives and were confident that they were safe.

What we found about the standards we reviewed and how well Warrens Hall 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

People's involvement in their care and support is promoted by staff.

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

People are in receipt of effective, safe and appropriate care that meets their needs.

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

There are suitable arrangements in place to ensure that people are safeguarded against the risk of abuse. People living at the home feel safe, and are confident that the staff will protect them.

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

People are supported by a group of staff who receive regular training to keep their knowledge and skills up to date.

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

People receive a service that matches their expectations and choices, and are involved in developments through regular consultation.

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

We spoke with people who told us that they were involved in their care. We heard from a relative that the registered manager had gone through the care plan with them. We heard from people that staff "went through the care plan" and "staff sit down and talk to me". Another person told us that "someone will speak to me to see how I'm getting on".

One person told us that no-one had gone through their care plan and that person was not interested in discussing their care. The person told us that staff had chatted to them about their likes and dislikes.

People told us that they were able to have their own things in their rooms such as pictures or photographs. A person told us that it was "like home, love my room, its comfortable".

People told us that that the meals were good and one person told us that "you have a choice of meals, 2 choices usually, but if you ask they will give you what you want".

People told us that they were given questionnaires to fill out and had been invited to residents' meetings.

People told us that there were different activities available to them and that the activity co-ordinator would get them involved. We saw that people had made personalised Christmas cards with the activity co-ordinator.

Other evidence

We looked at people's individual care plans and where possible checked out the accuracy of these with people. We also spoke with a number of staff about their understanding of how people wanted to be supported, as detailed in their plans.

Based on these discussions and observations during the time we visited, we found these plans to reflect people's preferences and support needs.

The understanding of the staff matched what was written in people's individual care plans. We spoke to staff and they were able to tell us about different people's likes and dislikes.

Our judgement

People's involvement in their care and support is promoted by staff.

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

We spoke with people who told us that they were involved in their care. We heard from a relative that the registered manager had gone through the care plan with them. We heard from people that staff "went through the care plan" and "staff sit down and talk to me". Another person told us that "someone will speak to me to see how I'm getting on".

One person told us that no-one had gone through their care plan and that person was not interested in discussing their care. The person told us that staff had chatted to them about their likes and dislikes.

People told us that the staff "are very good to me, consider it home" and that staff are "good are responding to needs".

People also told us that staff met their needs and one person told us that they were "given food to easily swallow".

We saw that people were well presented, clean and looked content at the time of our visit.

A relative told us that their relative was "clean and well looked after" and was "happy with the home". Another relative told us that they were "happy with the care given and made to feel welcome".

A person living at the home told us that the "staff are very good to me, I consider it

home".

People told us that there were different activities available to them and that the activity co-ordinator would get them involved. We saw that people had made personalised Christmas cards with the activity co-ordinator.

Other evidence

We saw that assessments of people's needs and risk had been regularly updated. The care plans we looked at reflected people's current support needs and identified any risks that may be present.

We saw that the risk assessments had detailed information on them and we spoke to staff who understood the risks. We also saw that there was detailed information for the use of bedrails although consent had not been signed by the person living at the home. We spoke with the registered manager who gave us assurances that consent would be gained.

We saw that one person required feeding through a tube. This is known as a 'PEG' feed. We saw that staff recorded when the feeding tube had been used. We looked at the care plan and saw this detailed the support the staff needed to provide. For example we saw that the plan identified how to care for the equipment but there were no records to show that staff were doing this. We spoke with the registered manager who gave us assurances that this would be recorded.

We heard from relatives that they were invited to care plan reviews and we saw where possible family members were involved with the planning of people's care.

We saw from care plans that people were supported by the staff to attend health care appointments where necessary.

Staff told us how they would respond to behaviours by using a calm approach. They gave us examples of how they would support people. They told us they would use techniques to divert them from what was upsetting them and would talk to them about why they were upset.

Our judgement

People are in receipt of effective, safe and appropriate care that meets their needs.

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 "had no concerns and felt safe" and "the manager is approachable". People also told us that if they did have any concerns then they felt comfortable to speak to the staff about them.

Relatives told us that they also had no concerns about their relatives and were confident that they were safe.

Other evidence

We saw that complaints and safeguarding guidance was easily available to staff and residents.

We looked at people's behaviour plans and found them to be easily understood by explaining what triggers to look out for. We looked at records that staff used to record people's behaviour and saw that these identified how the person was supported. We spoke to staff who understood what was put in the care plans and how to deal with any challenging behaviour.

We spoke with staff about what they thought abuse was, and they showed us they had a good awareness of what should be reported. They understood their responsibilities for reporting any concerns to the management team. We heard from staff that they were confident that these concerns would be listened to and actioned.

Staff told us that they were aware of what whistle blowing was and told us they would

do so if needed to protect people living at the home.

Our judgement

There are suitable arrangements in place to ensure that people are safeguarded against the risk of abuse. People living at the home feel safe, and are confident that the staff will protect them.

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 the staff "are very good to me, consider it home" and that staff are "good at responding to needs".

We spoke with staff who told us that training needs were discussed during supervision sessions and training was designed to meet the needs of people.

Staff told us that they had completed refresher training and that they have had enough training to do their job well.

Staff told us that they were "supported well" and "if unsure about anything, will ask line manager and support is given".

Staff told us the management team were very approachable. The staff felt confident to raise any issues with the management team and one staff member told us the registered manager was "approachable, she is good like that".

Other evidence

We saw that the training matrix was up to date and that a variety of training had been provided. We also saw that a training log was recorded for when staff had completed any training and when the training was due to expire. We were told that this helped the management team to plan their training and keep it up to date.

We sampled some staff files and information within the staff files matched what we saw on the training log. We saw that staff had achieved a vocational qualification in care and a consistent approach was used for providing care towards people.

Our judgement

People are supported by a group of staff who receive regular training to keep their knowledge and skills up to date.

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 able to have their own things in their rooms such as pictures or photographs. A person told us that it was "like home, love my rooms, its comfortable".

People told us that they were given questionnaires to fill out and had been invited to resident's meetings.

We saw that compliments had been received by registered manager about the service recently. Relatives had said that the staff showed "kindness and care" and that the staff "all deserve medals and much more".

Other evidence

We saw that the manager used various audits to check they were meeting the law. We sampled a number of these including building audits, maintenance checklists and training records.

We looked at the monthly visit records that summarised details of the provider's findings. We saw these were based on people's views, with time spent looking at outcomes for people living at the home. We saw that the person undertaking the visit had not raised any areas of concern.

We saw that risk assessments were regularly updated and that action was taken as required.

We saw that a customer satisfaction survey had been implemented by the provider in 2011. The manager told us that they were still waiting for the results. We also saw that an internal survey had been completed to give feedback on the meals provided.

Our judgement

People receive a service that matches their expectations and choices, and are involved in developments through regular consultation.

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
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