

# Review of compliance

Anchor Trust Thornton Hill	
<b>Region:</b>	Yorkshire & Humberside
<b>Location address:</b>	Church Road Thornton In Craven Skipton North Yorkshire BD23 3TR
<b>Type of service:</b>	Care home service without nursing
<b>Date of Publication:</b>	March 2012
<b>Overview of the service:</b>	Thornton Hill is registered to provide accommodation and personal care for people. The home is a large converted manor house with a purpose built extension known as the Manor Wing. Thornton Hill is set in its own grounds and overlooks the valley. It is in the village of Thornton-in-Craven, which is approximately 8 miles from Skipton. A new business manager has been

	appointed in October 2011, who told us that she would be applying for registration.
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# Summary of our findings for the essential standards of quality and safety

## Our current overall judgement

**Thornton Hill was not meeting one or more essential standards. Improvements are needed.**

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 6 January 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.

### What people told us

People who lived at the home told us the home was comfortable and they had everything they needed in their own rooms. They also told us that they had been encouraged to furnish their rooms with their own memorabilia and personal possessions.

People also told us that they were involved in the planning of their care and that their care worker discussed their support options and treatments with them and their family. Matters of personal care and of overall wellbeing had been discussed with them.

People said that staff were kind and very responsive to their care needs. They told us staff upheld their dignity when delivering personal care and respected their rights to privacy. People confirmed that they felt that their privacy was respected; they could lock their door for complete privacy if they wished and they were also offered their own key.

People explained that they felt safe in the service and they knew whom to speak to if they felt uncomfortable with a situation. They told us they would speak with the staff or manager who would act on their behalf. They told us they had been provided with the service's service user's guide which contained information on keeping them safe, but they had never had to use it.

### What we found about the standards we reviewed and how well Thornton Hill was meeting them

**Outcome 02: Before people are given any examination, care, treatment or support, they should be asked if they agree to it**

Generally people were supported to understand and contribute to decisions made regarding their care. Overall, we found that Thornton Hill was meeting this essential standard.

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

People living at the home receive safe and good quality care that meets their needs. Overall, we found that Thornton Hill was meeting this essential standard.

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

People living in the home were protected and kept safe from abuse. Overall, we found that Thornton Hill was meeting this essential standard.

**Outcome 12: People should be cared for by staff who are properly qualified and able to do their job**

People living at the home were supported by a competent and dedicated staff team. Overall, we found that Thornton Hill 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**

There were good systems in place to monitor the quality of service that people receive. Overall, we found that Thornton Hill was meeting this essential standard.

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

People's care documents were not properly completed. The provider must make sure that all records are completed to protect people's rights and ensure their best interests are protected. Overall, we found improvements were needed for this essential standard.

**Actions we have asked the service to take**

We have asked the provider to send us a report within 14 days of them receiving this report, setting out the action they will take to improve. We will check to make sure that the improvements have been made.

Where we have concerns we have a range of enforcement powers we can use to protect the safety and welfare of people who use this service. When we propose to take enforcement action, our decision is open to challenge by a registered person through a variety of internal and external appeal processes. We will publish a further report on any action we have taken.

**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 02: Consent to care and treatment

### What the outcome says

This is what people who use services should expect.

People who use services:

- \* Where they are able, give valid consent to the examination, care, treatment and support they receive.
- \* Understand and know how to change any decisions about examination, care, treatment and support that has been previously agreed.
- \* Can be confident that their human rights are respected and taken into account.

### What we found

#### Our judgement

The provider is compliant with Outcome 02: Consent to care and treatment

#### Our findings

##### What people who use the service experienced and told us

We spoke to people who told us that they had consented to live at Thornton Hill. They explained that they or their families had visited the home before they moved in and had been given information about what the service could provide. They explained that they had been given other options of homes but had chosen this home.

People also told us that they were involved with their assessments and care planning and signed their care plans to acknowledge their consent to the support they received.

##### Other evidence

The staff explained to us how they supported people with their care needs and how they enabled people to make their own choices and decisions. Staff knew about people's personal likes and dislikes and told us how they preferred to be supported with their daily routines.

We observed the way people were supported and how they were able to choose and make their own decisions. Where they needed support this was given in a sensitive and dignified way.

We also looked at the care records and they confirmed that people were asked about how they wanted to be supported with their day-to-day care.

Those people who were able told us that they are able to give consent to their treatment and their rights and dignity are respected. However where people who were less able were supported with decision making it was not always reflected within their care records, we have dealt with this in more detail in Outcome 21 below.

**Our judgement**

Generally people were supported to understand and contribute to decisions made regarding their care. Overall, we found that Thornton Hill 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 the staff treat them with respect and supported them in a dignified way.

People also told us that there were plenty of activities on offer and that there were opportunities to pursue individual hobbies and interests. The activities included; bingo, games, poetry writing, library facilities, chair exercises and outings in the more clement weather. People also said that there were a variety of entertainers visiting the home and that church services were also regularly held.

##### Other evidence

We saw the care documents, these included assessments and care plans relating to individual needs. We saw that the care records included a pre-admission assessment. This was before any decision was made about people moving in. This was to make sure that individual needs could be fully met by this service.

The care documents we reviewed included a mix of care plans, daily records, risk assessments and evaluation of care. The majority of care plans we saw were individualised, detailed and contained all the information staff would need to make sure that people were supported to meet their needs in the way they preferred.

We saw that one care plan did not provide sufficient details of specific changes to medication. Tablets had to be crushed and given with food but the care plan provided no details of this process. Staff told us that this was with the GP's agreement. We

looked at the care plan but couldn't find any reference to this practice. We look at this in more detail in Outcome 21 below. We also found that some risk assessments and care plans required updating but the home's own audit had recognised this and management were monitoring their progress.

All other areas of the care records we saw were in place and had been completed clearly and accurately and information was easy to understand.

Throughout the day we observed good interaction between people living at the home and the staff. Those people who needed to be supported during the morning were helped in a sensitive and dignified manner.

**Our judgement**

People living at the home receive safe and good quality care that meets their needs. Overall, we found that Thornton Hill 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

All the people we spoke to felt able to talk to the staff and the manager if they had any concerns, they were also confident they would be responded to promptly.

##### Other evidence

We spoke to staff about the procedures in place for making sure that people who live at the home were safeguarded from abuse. The staff gave good examples of what they understood as abuse and their role in protecting people in the home.

The training records confirmed that all staff had completed training in safeguarding. This means that they were aware of their roles and responsibilities regarding the protection of vulnerable adults and the need to accurately record and report potential incidents of abuse.

We saw that people seemed comfortable and relaxed with staff and their surroundings and staff treat people with consideration and in a manner which protected their safety and comfort.

##### Our judgement

People living in the home were protected and kept safe from abuse. Overall, we found that Thornton Hill was meeting this essential standard.

## Outcome 12: Requirements relating to workers

### 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 staff who are fit, appropriately qualified and are physically and mentally able to do their job.

### What we found

#### Our judgement

The provider is compliant with Outcome 12: Requirements relating to workers

#### Our findings

##### What people who use the service experienced and told us

People did not comment on this outcome.

##### Other evidence

We talked to staff who told us that they had been interviewed for their present job at the home and that references and checks had been completed before they began work at the home. We looked at the staff files to see how they had been recruited to work at the home. The records confirmed that all the right checks had been completed before the staff member began working at the home. This is important to make sure that people were cared for by safe and competent staff.

The staff told us that had access to policies and procedures. They also told us that they had completed induction training. We saw the induction records and these were comprehensive covering all aspects of providing care at the home. The registered provider told us that each member of the staff team initially works alongside an experienced member of the staff team. This was important to make sure that people were consistently well cared for.

The manager sent us a copy of the staff training record which highlighted the staff training completed and the training that needed updating. The manager was aware of where the training gaps were and was organising the training required. The staff told us that the training at the home was very good and that they were continually encouraged to develop their skills. This was important to ensure that staff were safe to work at the home and people were consistently well cared for.

**Our judgement**

People living at the home were supported by a competent and dedicated staff team. Overall, we found that Thornton Hill 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 happy with the home and would speak to the manager if they had any concerns.

##### Other evidence

People told us that they were consulted about their care and their relatives also confirmed that they were asked if they were happy with the service.

We saw that the home sends out questionnaires to people who use the service, relatives and other stakeholders in order to gain information about how people view the service and what improvements they would like to see.

Staff confirmed that they had regular training and participated in team meetings in which they had an opportunity to discuss the performance of the home.

Staff told us they felt comfortable in raising any issues with the manager of the service and were also very clear about their own responsibilities.

We looked at the quality monitoring systems that the home has in place during our visit. The manager told us that they regularly audit all areas of the home, including care records, falls and accidents, medication and the health and safety of the home.

We looked at care, staff and health and safety records and found that they were completed and up to date.

**Our judgement**

There were good systems in place to monitor the quality of service that people receive. Overall, we found that Thornton Hill was meeting this essential standard.

## 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

There are minor concerns with Outcome 21: Records

#### Our findings

##### What people who use the service experienced and told us

People did not comment about this outcome.

##### Other evidence

When we looked at people's individual care records we saw that where people could make decisions their care records confirmed their agreement and consent. However, where people were not able to make their own decisions we found that there was limited evidence of how they were supported to give their consent or make decisions about their care and treatment. For instance one individual was not able to give their consent regarding the administration of medication. We found that there was no information about this person's capacity to make decisions within the care documents. The staff explained that this individual was not aware of the medication they were given. They said that they needed help with their medication and that some tablets had to be crushed and given within the food but the care documents provided no details of this. Staff confirmed that this was with the GP's agreement but no such agreement had been recorded. The care documents were therefore incomplete and failed to make sure this person's rights were upheld and that decisions were made in their best interests.

##### Our judgement

People's care documents were not properly completed. The provider must make sure that all records are completed to protect people's rights and ensure their best interests are protected. Overall, we found improvements were needed for this essential standard.

## Action we have asked the provider to take

### Compliance actions

The table below shows the essential standards of quality and safety that **are not being met**. Action must be taken to achieve compliance.

Regulated activity	Regulation	Outcome
Accommodation for persons who require nursing or personal care	Regulation 20 HSCA 2008 (Regulated Activities) Regulations 2010	Outcome 21: Records
	<p><b>How the regulation is not being met:</b> People's care documents were not properly completed. The provider must make sure that all records are completed to protect people's rights and ensure their best interests are protected.</p>	

The provider must send CQC a report that says what action they are going to take to achieve compliance with these essential standards.

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 within 14 days of the date that the final review of compliance report is sent to them.

Where a provider has already sent us a report about any of the above compliance actions, they do not need to include them in any new report sent to us after this review of compliance.

CQC should be informed in writing when these compliance actions are complete.

# 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

<b>Document purpose</b>	Review of compliance report
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## Care Quality Commission

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