

Review of compliance

<p>Barchester Healthcare Homes Ltd Brookfield</p>	
<p>Region:</p>	<p>North West</p>
<p>Location address:</p>	<p>18 Brookfield Road, Lymm, Warrington, Cheshire, WA13 0PZ</p>
<p>Type of service:</p>	<p>Care home service without nursing.</p>
<p>Date the review was completed:</p>	<p>24/05/2011</p>
<p>Overview of the service:</p>	<p>Brookfield is a three-storey care home standing in its own grounds; residents are accommodated on the ground and first floors only. Access between floors is via two shaft lifts, a stair lift or the stairs. The home is owned by Barchester Healthcare.</p> <p>Brookfield is located in a residential suburb of the village of Lymm, this provides good transport links with the nearby towns of Altrincham and</p>

Warrington.

The home is registered to provide personal care for thirty-one older people.

Accommodation is currently provided in 25 single bedrooms and three double bedrooms [these are usually used as single rooms]; all rooms have en-suite facilities. There are a variety of communal facilities available for residents; these include a large lounge/conservatory, library, garden room and a dining room.

Brookfield has an appropriate number of toilets and a variety of bathrooms available for residents.

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

What we found overall

We found that Brookfield was meeting all essential standards.

The summary below describes why we carried out the 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 24/5/11. During our visit we observed how people were cared for, talked to people who use services, talked to care workers, checked the providers records and looked at records of people who use services. Where possible we asked permission of the person or their relatives to look at their records.

What people told us

Many of the people who use the service could not tell us directly about their care due to a variety of reasons, however those who were able said that when a person is first referred to the service they are given information about the home and they were made to feel welcome and staff were kind. They said they were really made to feel at home.

People said that they were aware of their care plan and they had been asked to sign it as being in agreement with it.

People said that they have 'resident's meetings' where they can comment on the service provided. However people said that many of the people living in the home are unable to clearly express their views and opinions and said staff were able to ascertain the wishes of these people through direct discussion or with their relative or their representative.

We asked the people living in the home about the choice and control they have over their daily lives. People said that they choose their own daily routine as to when to get up, choice of meals throughout the day, support with personal care, and wherever possible are supported to manage their own affairs when possible. For example manage their own money or medication and have meals at a time of their choice. Care plans viewed confirmed that full details of people's choice of daily life were fully recorded.

Comments from people living in the home included:-

"Care is excellent, staff are lovely, our rooms and the whole of the building is "clean, clean, clean". Staff are kind and helpful and will do anything for you. I am pleased to call this my home.

One resident said that the home has provided garden swing seats to enable people to enjoy the gardens and the fresh air. Another resident commented on how the staff treat each person as an individual taking into account their wishes at all times.

People said that the home employed staff to carry out daily activity of their choice and people said this was a most enjoyable part of each day. They said that individual activities were arranged to meet the needs of everyone who lived in the home.

People living in the home said staff are respectful of their privacy and dignity and one person described staff as very diplomatic and caring when it comes to personal issues.

What we found about the standards we reviewed and how well Brookfield was meeting them

Outcome 1: People should be treated with respect, involved in discussions about their care and treatment and able to influence how the service is run. Systems are in place to ensure that people using the service are respected and involved.

- Overall, we found that Brookfield was meeting this essential standard...

Outcome 2: Before people are given any examination, care, treatment or support, they should be asked if they agree to it.

People using the service receive the care and support they agree to.

- Overall, we found that Brookfield was meeting this essential standard.

Outcome 4: People should get safe and appropriate care that meets their needs and supports their rights.

People using the service receive appropriate support in respect of their care and welfare

- Overall, we found that Brookfield was meeting this essential standard.

Outcome 5: Food and drink should meet people's individual dietary needs.

The nutritional needs of the people using the service are promoted

- Overall, we found that Brookfield was meeting this essential standard.

Outcome 6: People should get safe and coordinated care when they move between different services

The agency co-operates with other providers to ensure the people using the service have their needs appropriately met...

- Overall, we found that Brookfield was meeting this essential standard.

Outcome 7: People should be protected from abuse and staff should respect their human rights

People using the service are protected from abuse

- Overall, we found that Brookfield was meeting this essential standard.

Outcome 8: People should be cared for in a clean environment and protected from the risk of infection

The service ensures good standards of infection control and cleanliness are promoted.

- Overall, we found that Brookfield was meeting this essential standard.

Outcome 9: People should be given the medicines they need when they need them, and in a safe way

Medication is managed as appropriate to safeguard the people using the service.

- Overall, we found that Brookfield was meeting this essential standard.

Outcome 10: People should be cared for in safe and accessible surroundings that support their health and welfare

The premises are safe and suitable for purpose.

- Overall, we found that Brookfield was meeting this essential standard.

Outcome 11: People should be safe from harm from unsafe or unsuitable equipment

The equipment used by the service is suitable

- Overall, we found that Brookfield 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 who use the service are protected by appropriate staff recruitment processes.

- Overall, we found that Brookfield 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.

Sufficient staff are on duty to appropriately support the people using the service.

- Overall, we found that Brookfield was meeting this essential standard.

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

Staff receive training and support to ensure they promote the welfare of the people using the service.

- Overall, we found that Brookfield 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 are clear systems in place to monitor and assess the quality of the services provided.

- Overall, we found that Brookfield was meeting this essential standard.

Outcome 17: People should have their complaints listened to and acted on properly

Systems are in place to make sure people can make a complaint about the service and how staff must respond.

- Overall, we found that Brookfield was meeting this essential standard.

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

Records are appropriately maintained and are confidential and secure.

- Overall, we found that Brookfield was meeting this essential standard.

Action we have asked the service to take

None

Other information

None

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

The table below shows our judgement on each of the essential standard outcomes we reviewed.

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 1: 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 1: Respecting and involving people who use services.

Our findings

What people who use the service experienced and told us

During our visit we observed care staff being responsive to people's requests and addressed people by their preferred name. Care staff were familiar with individuals and their daily routines. Visiting relatives told us that they were treated well and were made to feel welcome when visiting the home. They thought staff treated both them and their relatives with dignity.

People we spoke with said they were always being asked their opinions about the way the service was managed and said if they had any problems they would talk to staff and problems would be quickly resolved

We spoke with people who said they could come and go around the home as they pleased. They told us that they could spend time in their bedrooms or the garden as well as the lounge areas

Other evidence

We read four care files of people living in the service. There was information written in the 'assessment of needs'. This is a tool used to identify what care needs the person has before they are admitted. The assessment looks at people's past history of health, current needs, family, cultural needs and information about other people and professionals involved in their care. The information recorded in the assessment of need fully reflected the person's preferences and daily routines or interests. There was evidence in the records that people moving in had been given the opportunity to participate and agree with the assessment of their needs. All documentation viewed contained vast information about the person's preferences, choices and capabilities and about how they wished to live their life.

Care staff told us that due to some people being less able to voice their opinions they did on occasions make decisions for them. They based these decisions on information provided within the care records, also on observations and verbal and non verbal communication. Care workers spoken with showed a clear understanding of individual needs of people. They were able to recognise changing behaviour and told us how they work together in supporting people.

Care staff said that peoples views are also sought through regular reviews of the service provided, on going discussion and monitoring of support given and through the use of surveys. All staff said that they are given sufficient and up to date information about the needs of the people they support.

Our judgement

There are systems in place to ensure the people using the service are respected and involved.

Outcome 2: 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 2: Consent to care and treatment.

Our findings

What people who use the service experienced and told us
Each of the people living at the home has a plan of care and people told us that they have taken part in its compilation and have agreed their plan of care

Other evidence
The records of 4 service users were reviewed and it was noted that most people living at the home had signed their plan of care.

Staff stated they have been provided with training in the Mental Capacity Act and have also received mental health awareness and dementia training. Staff demonstrated via discussion that they were clear about procedures about decision making for people who are unable to give, or choose to withhold, consent for each individual care and support activity. Observations of staff interacting with people living in the home identified that they were able to ensure through verbal and non verbal communication that individuals could make informed choices about their wellbeing.

During the visit to the service we asked the managers about deprivation of liberty safeguards (this is a means whereby restrictions placed upon an individual's liberty are agreed by a group of professional people). The manager informed us that there were no such restrictions on people living at the home. The managers have shown full awareness of deprivation of liberty and when it would be appropriate to instigate an assessment to restrict a person's liberty.

Our judgement

People who use the service are consulted with about their care and support and receive services that they agree to.

Outcome 4: 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 4: Care and welfare of people who use services.

Our findings

What people who use the service experienced and told us
People told us that they feel well supported living at the home. One person told us that 'they make sure you're well looked after'. Other comments included:-
Excellent home staff friendly, food fantastic.
Staff understand what I need. Staff are wonderful, home is very clean.
Staff wonderful and everywhere is "clean, clean, clean"
Kind caring staff that will do anything for you.
Staff have great understanding of our needs.
Staff never too busy to help and are always here when I need them.
Staff are very good and are always here for us.
Staff are kind and considerate and never let us down.
Staff are 'excellent' and 'very caring' and they are 'there straight away if something goes wrong'
I was quite poorly when I came here and did not really care what happened to me. Since I have been here I have started to live again and fully enjoy my life.
My family are delighted with the improvement to our mother since she has lived here.

Other evidence

During our visit to the home we looked at a sample of people's records and noted that people are only offered a place at the home when their needs have been assessed and when it has been established that the person's needs can be met. Trial periods are offered to every new resident and people's family and friends are welcomed to visit and stay for meals.

Each of the people living at the home has a plan of care which describes what their needs are and how to meet them. We looked at a small sample of care plans (with the consent of the person concerned) and found that these contained a sufficient level of information on a person's needs. The home has also commenced adding an updated information sheet to the care plan which contains much more information about people's past history and their future aspirations.

We looked at a number of records with regards to people's care and support with health. These showed us that people see a GP, nurse, dentist, optician at regular intervals and as required. This shows us that people are well supported with both their mental and physical health.

People are supported to take risks and plans are put in place to manage potential risks. During our visit to the home we saw that people are making lifestyle choices both about activities within the home and within the local community and risk assessments are carried out when people are involved in activities which may involve taking risks. We looked at a number of examples of risk assessments and we noted that the assessments were relevant and updated as and when required. For example one of the people living at the home had a risk assessment in relation to an aspect of mobility and other examples included activity, swallowing and slips and falls. In all cases the risk balanced the person's safety and effectiveness taking into account their right to make choices and take informed risks.

The manager and staff have been provided with training in equality and diversity and discussions with staff indicated that people's lifestyle choices are very much respected, people's privacy is respected and people are supported to take risks in line with their individual needs and choices.

Our judgement

Effective and appropriate care and support is provided to people living at the home. People are supported to take risks in line with promoting their rights to take informed risks

Outcome 5: 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 5: Meeting nutritional needs

Our findings

What people who use the service experienced and told us
People living at the home told us that they have a choice of food and meals and the quality of meals is good. People told us that they are asked what they would like to eat and their requests are accommodated. Comments included:
The food is wonderful I have never had a poor meal here yet and I have been here for a long time.
We are given lots of choice and the cook seems to know what we all like.
The food is always fine.
I like everything they provide.
We have a say in what is on the menu. We decide at the residents meetings what we like and dislike and the staff take notice.
The food is well presented, we are always given choices and the desert is served from a desert trolley which is brought to our tables.
This is a fine dining room with fine food. Better than most restaurants that charge an arm and a leg. My family have dined here and think it is splendid.

Other evidence
We viewed a menu and saw that alternatives to this are provided as required. Each person is asked just prior to the meal what they want and can be shown the meals if

they are unable to make their choice and meals are provided in line with this. A small number of people require a diabetic diet and this was reflected in their plan of care. Staff advised that they are aware of diabetic dietary requirements and have a separate menu for this as required.

People observed eating their lunch in the main dining room indicated that they were enjoying the various meals chosen off the menu. Other people living in the home who experienced some difficulty managing their meal were observed having discreet assistance from staff to enable each person to enjoy their meal.

The midday meal was nicely cooked and presented well and all people were noted to thoroughly enjoy their various meal choices. A desert trolley was brought to each table and deserts were ordered from it. Drinks of various kinds were also offered.

Care records viewed showed that people living at the home have their dietary needs assessed and their weight is monitored on a regular basis as part of ensuring their nutritional needs are being met.

Our judgement

People are provided with appropriate choice, nutrition, hydration and support with meals and food.

Outcome 6: Cooperating with other providers

What the outcome says

This is what people who use services should expect.

People who use services:

- Receive safe and coordinated care, treatment and support where more than one provider is involved, or they are moved between services.

What we found

Our judgement

The provider is compliant with outcome 6: Cooperating with other providers

Our findings

What people who use the service experienced and told us
People living at the home told us that they see relevant professionals such as GPs, district nursing staff. Comments included:-
I have a visit from a district nurse and the doctor will call when needed.
I have a visit from the district nurse to check me out.
As part of this review we contacted a Local Authority quality assurance team and they told us that there have been no concerns raised about the service.

Other evidence
We saw evidence that people living at the home are regularly included in reviews which include themselves, key staff from the home and other relevant professionals. The care plans show that support from health and social care professionals is sought as and when required. Risk assessments are discussed with each person who uses the service and the outcome recorded on file. Care plans and daily records show that referrals are made by staff of the service to other statutory agencies to ensure that each person using the service is provided with safe co-ordinated care and support.

We saw records to show that a General Practitioner and a district nurse had visited the home to carry out health care assessments. We noted during our visit that people received co-ordinated care and support from a variety of professional people involved in their care. Documentation also showed that all new residents are introduced to the local GP and all medical records are shared as appropriate.

The manager of the service reported good working relationships with relevant agencies and we have not received any information contrary to this from visiting or associated professionals.

Our judgement

People receive co-ordinated care and support from a variety of professional people involved in their care

Outcome 7: 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 7: Safeguarding people who use services from abuse

Our findings

What people who use the service experienced and told us
Several of the people living at the home told us that staff are ‘excellent’ and they are kind and caring.
One person said staff treated everyone with respect and ensured they could speak their mind.
Another person said that having experienced abuse in another setting it was a comfort that staff were always kind and treated everyone with respect.

People living at the home told us that they are aware of how to make a complaint but that they have not had reason to.

People living at the home described it as being very homely where staff protect everyone from harm and reported feeling safe there

Other evidence
The home’s own policy and procedure on safeguarding adults provides appropriately detailed guidance on how to respond to an allegation of abuse and what action to take.

We looked at staff training records for a sample of staff and we noted that staff had recently been provided with safeguarding training. We asked three members of care staff what they would do in the event of an allegation of abuse and they provided an appropriate response. We asked the manager the same question and the response included that she would report it to her head office, Local Authority safeguarding team, the police (as appropriate) CQC and the Independent Safeguarding Authority (if appropriate).

Staff training records also showed us that staff have been provided with training in the Mental Capacity Act, Equality and Diversity and understanding dementia, managing violence and aggression.

Staff told us that the home has a relaxed atmosphere. People's choices are respected and people are making their own decisions as to how to spend their day and any how they use the local community.

Observations revealed residents and staff were able to interact well.

Our judgement

Systems are in place to protect people from the risk of abuse and uphold their human rights.

Outcome 8: 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 8: Cleanliness and infection control

Our findings

What people who use the service experienced and told us
People told us that they feel the home is safe and clean and a pleasant environment in which to live.

Other evidence
During our visit to the home we noted that the home presented as clean and was free from unpleasant odours. We noted appropriate hand washing facilities. The kitchen was presented as clean and well organised. A recent environmental health report confirmed this to be the case. We looked at a sample of staff training records and noted that staff have been provided with training in food safety, infection control and health and safety.
Discussions with staff confirmed this.

Designated catering and domestic staff are employed at the home and cleaning rotas are in place to identify the throughput of work.

Our judgement
Staff ensure that practices are in place to provide a clean home environment and to reduce infection control risks

Outcome 9: Management of medicines

What the outcome says

This is what people who use services should expect.

People who use services:

- Will have their medicines at the times they need them, and in a safe way.
- Wherever possible will have information about the medicine being prescribed made available to them or others acting on their behalf.

What we found

Our judgement

The provider is compliant with outcome 9. Management of medicines

Our findings

What people who use the service experienced and told us
People living at the home told us that staff will act straight away if they are unwell and will check on medicines to make sure they are fit for purpose.
People said they were given their medication at the same time each day.

Other evidence
We looked at a sample of medication in order to determine how medication was being managed and whether or not the provider is complaint with this outcome. We found that medication was well managed, safely stored, well accounted for and audited on a regular basis. Medication is only administered by trained members of staff. Discussion with the deputy manager who holds overall responsibility for the management of medication revealed that she is most knowledgeable about all aspects of medication to include recording, storage and administration.
The manager also gave a detailed account of how the medication is managed to include the procedures used to administer and record all medication. She said that medication is audited on a very regular basis by both her self and senior care staff and all people living in the home are supported to have regular reviews of their medication.
People are assessed as to their capacity to manage their medication and if appropriate measures are put in place to monitor their continued ability to manage

their own medication safely.

As a national care provider Barchester Health care provides each home with a Medicines Policy which details the Safe Management and Handling of Medication.

All staff who administer medication are trained in the Safe Handling of Medication, and undergo a competency test at least yearly or when necessary to demonstrate their understanding and knowledge of the administration of medicines.

The home has a copy of the local pharmacy arrangements for obtaining and disposing of medication which was detailed and covered every eventuality.

Staff ensure that all medicines are checked against the FP10 (prescription) and a photocopy of the same is taken and kept on file in the home.

The manager advised that In certain circumstances the covert administration of medication may need to be considered to prevent a resident missing out on essential treatment. This will only be considered for residents who not only actively refuse medication but who are also considered not to have the capacity to understand the consequences of their refusal.

The decision to administer medication covertly is not considered routinely and is a contingency measure.

A best interest decision will, when necessary, be discussed with the resident present, relatives, GP, care manager and any members of the multi-disciplinary team directly involved in the care of the resident.

Where a resident wishes to self-medicate a full assessment is undertaken which takes into account the resident's mental health, any degree of dementia, state of physical health, degree of frailty, security and storage of medication. If it is concluded that the resident cannot self medicate this is recorded in the care plan identifying the reasons.

All medication brought into the home by a new resident is checked and documented in the care plan and then entered onto a MAR sheet and signed and verified by two senior staff..

Our judgement

Medication is managed safely and arrangements are in place to ensure the medicines prescribed to people are appropriate and safe.

Outcome 10: Safety and suitability of premises

What the outcome says

This is what people should expect.

People who use services and people who work in or visit the premises:

- Are in safe, accessible surroundings that promote their wellbeing.

What we found

Our judgement

The provider is compliant with outcome 10: Safety and suitability of premises

Our findings

What people who use the service experienced and told us
People living at the home told us that they thought the accommodation was excellent. We viewed a small number of bedrooms with the consent of people concerned and people told us that they were happy with their rooms

Other evidence
During our visit to the home we carried out a tour of the premises and viewed most communal areas as part of this.

The home is a large property near the centre of Lymm village. The home provides spacious accommodation to include spacious lounge and dining areas, conservatory, library and comfortable bedrooms.

We noted that the environment was being maintained to a good standard with any areas in need of addressing being quickly identified and dealt with.

Health and safety policies, procedures and practice are in place to safeguard the well being of people living at the home, staff and visitors.

The manager told us that regular checks are carried out on the home environment. We looked at a sample of health and safety checks, for example fire safety and these were up to date.

Our judgement

The home environment has been designed to provide safe and well maintained premises

Outcome 11: Safety, availability and suitability of equipment

What the outcome says

This is what people should expect.

- People who use services and people who work in or visit the premises:
- Are not at risk of harm from unsafe or unsuitable equipment (medical and non-medical equipment, furnishings or fittings).
 - Benefit from equipment that is comfortable and meets their needs.

What we found

Our judgement
The provider is compliant with outcome 11: Safety, availability and suitability of equipment

Our findings
<p>What people who use the service experienced and told us</p> <p>People said they are able to use equipment to assist them with their daily life- for example accessible bathing facilities, hoists, lifts, ramped access.</p> <p>People said they always felt safe when using any aids or adaptations as they felt that staff knew what they were doing and the equipment was always checked out.</p> <p>Other evidence</p> <p>People who have difficulties with their mobility can gain access to the home via ramped access and a lift is available for people to access the upper floors of the property. The lift is a maximum four person lift and staff and residents advised that it is the home policy that people needing to use the lift are accompanied by a staff member at all times.</p> <p>The home has accessible baths and shower for people who have difficulties with their mobility.</p> <p>Care plans viewed show that individual needs are identified assessed and risk reviewed to make sure all equipment used is suitable and safe.</p> <p>The manager advised that all equipment is regularly checked and maintained.</p>

Our judgement

The home provides appropriate and safe and suitable equipment to meet the individual needs of the people living in the home

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
During discussions with people living at the home one person said staff were very kind and helpful and they were well trained to carry out safe care. We were also told that staff are ‘excellent’, ‘very caring’ ‘they’re there straight away if something goes wrong” nothing is too much trouble” “they know what they are doing” “work together well” really care about people, are very nice and helpful”

Other evidence
We looked at records with regards to the recruitment of some of the newest members of staff. These showed us that all appropriate pre employment checks had been carried out.
The manager had sent a written response as to how the home met the compliance of this outcome which included some of the following information. Applications are dealt with in line with equal opportunities, employment references are required and are verified, criminal records bureau checks are attained, a full employment history is attained and applicants are assessed on their ability and interaction with people who use the service.
The manager advised that new starters complete an induction period and whilst undertaking induction and are only asked to carry out duties which they have covered during this period.

Staff said they are issued with a copy of The Codes of Practice published by The General Social Care Council and this is on the agenda for discussion during supervision sessions.

All new staff have to undertake and complete an in house induction and Barchesters induction programme. Staff said that they have access to regular training which is co ordinated by the homes home trainer who holds responsibility to ensure that all new staff are introduced to the training computer and complete the mandatory and legislative training required by the company.

Records show that each year a training budget is put in place for the use of training and development of staff, it is also used for external training in specialised courses. Records also show that all staff training is recorded on the Learning and Development page of the intranet .

The manager advised that annually the learning and development team produce an internal quality audit, summarising the homes training and development achievements, this is marked out of 100%.

Staff said they receive appraisal and supervision sessions, where they are able to discuss their training wishes and career development. The manager advised that the current suprvsion format does not enable her to fully record all asepects of one to one discussion.As a consequece she has implemented an updated format which enables her to discuss and record all the relevent informaiton.

All new staff are given a Barchester Healthcare handbook on commencing their post which provides information on the homes policies and procedures.

On commencing employment all new staff do an induction programme which reflects the department that they are to work in and their job role and responsibilities.

Barchester provide all the staff including Managers with training on the identifying, managing and reporting of Safeguarding, ensuring the safety of residents.

Our judgement

People living at the home are being supported by staff who have been appropriately recruited and whose practice is monitored

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 living at the home told us that staff are ‘excellent’, ‘hard working people’ and that they ‘are very caring’ about them.

A number of people said that they felt that the staffing levels were fine but staff worked very hard to make sure everyone living in the home was well looked after and all their needs were met.

Other evidence
The staff rota showed that staff were provided in adequate numbers and skill mix to meet the needs of the people living in the home.

The manager provided a needs led analysis to demonstrate how the staffing levels had been determined and the staffing rota showed the systems and human resource procedures followed to enable the effective maintenance of staffing levels

Our judgement
The service is being managed with sufficient resources to ensure the service is delivered to meet all of the essential standards of quality and safety and to maintain improvements. The staffing levels meet the level as assessed as required by the

provider.

Outcome 14: Supporting 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 competent staff.

What we found

Our judgement

The provider is compliant with outcome 14: Supporting workers

Our findings

What people who use the service experienced and told us
People using the service are supported by a well supported staff team.

Other evidence
During our visit to the home we looked at a sample of staff records to see what training staff have been provided with. These records showed us that staff have been provided with training in topics such as equality and diversity, dementia care, understanding mental health, introduction to care, safeguarding adults, diabetes, health and safety, food hygiene, fire safety, infection control. This level of training tells us that the staff team should be able to promote and safeguard the wellbeing of people living at the home.

Records show that all staff that have not attained a relevant qualification to date have been enrolled to undertake a qualification.

We looked at staff records to see if staff are being provided with regular supervision. The records showed us that staff are being provided with regular supervision. We also noted that staff team meetings are taking place on a regular basis. Staff appraisals also take place each year. Staff said that staff meetings give staff the opportunity to review their practice, share good practice, develop their skills and knowledge, develop as workers, contribute to decision making and shaping the

service and to share important information on the needs of the people they support and on the service in general.

Staff reported feeling well supported in their role. They said they understand their line management and know that someone is always on hand for help, support or advice when needed.

We asked the manager to tell us in writing how the service is compliant with this outcome and the response included the following detail;

She advised that staff are firstly introduced to the homes philosophy of care which includes treating everyone with respect and maintaining people's dignity whilst responding to and meeting people's individual needs. Staff receive ongoing training to ensure they are fully competent to carry out their various roles

Staff said their roles and lines of reporting and accountability are clear. This means that staff know their responsibilities and know when to refer to a senior person for advice or support.

Our judgement

Arrangements are in place to support staff in their roles and responsibilities and to enable them to deliver care and support to an appropriate 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 living in the home and their friends and family are regularly asked to complete a survey on the quality of the service. People living in the home said that they could not remember what they had recorded on these surveys but said it could only have been good things as they were all very happy in the home.
Resident's family and friends spoken with said they were most happy with the staff and services provided and had seen positive improvements in the health and well being of their loved ones since they had moved into Brookfield Home.

Other evidence
During our visit to the home we asked the manager to show us what systems are in place for monitoring the quality of the service. The systems which the manager showed us involves checking many of the processes in place at the home on a regular basis by a testing and recording process.
All care plans for service users are reviewed each month and amendments to the care plan are made where needed, also personal risk assessments are reviewed three monthly or sooner should a change in circumstances arise
The home actively seeks feedback from people who use the service or others acting

on their behalf by regularly asking people on an ad hoc basis and by an annual customer satisfaction survey from which an action plan is developed and actions identified and implemented.

The manager conducts monthly audits which are themed and cover all aspects within the home, such as nutrition, continence management, person centered care, social and recreational activity, completion of care documentation, infection control, administration of drugs and medicines etc. The audits are completed by heads of departments and the General Manager. They are entered onto the Barchester Clinical Governance database, where trends can be identified and addressed as appropriate. All audits are action planned where required for continual improvement and cascaded through the home.

Our judgement

The views of people using the service are regularly sought. A system is in place for monitoring the quality of the service which is in the process of update

Outcome 17: Complaints

What the outcome says

This is what people should expect.

People who use services or others acting on their behalf:

- Are sure that their comments and complaints are listened to and acted on effectively.
- Know that they will not be discriminated against for making a complaint.

What we found

Our judgement

The provider is compliant with outcome 17: Complaints

Our findings

What people who use the service experienced and told us
People living at the home told us that they know how to make a complaint but that they have not had reason to do so. People have ready access to information about how to make a complaint.

Other evidence
The home has a complaints procedure which is displayed in the foyer of the home and is provided to all residents when they commence their placement. We asked the manager about complaints and she informed us that there has been one complaint made within the past 12 months which was quickly resolved.
She advised that complaints are recorded and responded to, this can be by conversation in which an issue is identified and instantly responded to or a more formal complaint in writing, when a letter will be sent out to the complainant to acknowledge the complaint and that it is being investigated.

Complainants are kept informed of the investigation and will be told the outcome within a 28 day period as in accordance with Company policy.

All residents are encouraged to raise any concerns or complaints either privately or

at regular held Residents meetings. Complaints by residents can also be made by their representative if the resident is unable to do so for themselves.

Staff have training which is ongoing in how to deal with complaints.

We asked a member of staff what action they would take if one of the people living at the home made a complaint. They told us that they would report it but would also try to resolve any issues to the person's satisfaction so that their issues would not need to lead to a complaint.

We have not received any complaints or concerning information from any source with regards to the service

Our judgement

People know how to make a complaint about the service and feel that they would be listened to if they did raise an issue

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
The personal records for people using the service are held securely and confidentially. Records relating to the care and support of people using the service were up to date, relevant and maintained appropriately.
We asked people if they were familiar with the arrangements for supporting them with their money and the people who were able advised that they or their family managed their finances.

Other evidence
It was noted that all residents records are stored securely and access restricted to certain staff ensuring confidentiality at all times.

Staff spoken with are aware of confidentiality, they said this is discussed on induction and reiterated in the employee handbook which every member of staff has.

The manager advised that resident's money was managed by either themselves or their representatives and the home did not have any responsibility for the management of resident's finances.

Our judgement

People using the service are generally protected against the risks of unsafe or inappropriate care arising from a lack of information about them.

Action
we have asked the provider to take

None

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 Adult 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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