

We are the regulator: Our job is to check whether hospitals, care homes and care services are meeting essential standards.

The Limes

85 High Street, Henlow, SG16 6AB

Tel: 01462811028

Date of Inspection: 30 July 2013

Date of Publication: August 2013

We inspected the following standards as part of a routine inspection. This is what we found:

| | | |
|--|---|-------------------|
| Care and welfare of people who use services | ✓ | Met this standard |
| Meeting nutritional needs | ✓ | Met this standard |
| Requirements relating to workers | ✓ | Met this standard |
| Staffing | ✓ | Met this standard |
| Records | ✓ | Met this standard |

Details about this location

| | |
|-------------------------|--|
| Registered Provider | The Limes Care Home Limited |
| Registered Manager | Mrs. Joan Wilkinson |
| Overview of the service | The Limes is registered with the Care Quality Commission to provide care and support for up to 28 people with a range of physical and mental health needs. |
| Type of service | Care home service without nursing |
| Regulated activities | Accommodation for persons who require nursing or personal care Diagnostic and screening procedures |

Contents

When you read this report, you may find it useful to read the sections towards the back called 'About CQC inspections' and 'How we define our judgements'.

| | Page |
|--|------|
| <hr/> | |
| Summary of this inspection: | |
| Why we carried out this inspection | 4 |
| How we carried out this inspection | 4 |
| What people told us and what we found | 4 |
| More information about the provider | 4 |
| <hr/> | |
| Our judgements for each standard inspected: | |
| Care and welfare of people who use services | 6 |
| Meeting nutritional needs | 7 |
| Requirements relating to workers | 8 |
| Staffing | 9 |
| Records | 10 |
| <hr/> | |
| About CQC Inspections | 11 |
| <hr/> | |
| How we define our judgements | 12 |
| <hr/> | |
| Glossary of terms we use in this report | 14 |
| <hr/> | |
| Contact us | 16 |

Summary of this inspection

Why we carried out this inspection

This was a routine inspection to check that essential standards of quality and safety referred to on the front page were being met. We sometimes describe this as a scheduled inspection.

This was an unannounced inspection.

How we carried out this inspection

We looked at the personal care or treatment records of people who use the service, carried out a visit on 30 July 2013, observed how people were being cared for and talked with people who use the service. We talked with staff.

What people told us and what we found

When we inspected The Limes on 30 July 2013, we found people who used the service looked well cared for, and were satisfied with the care and support they received. They told us the staff were friendly and helped them when they needed assistance. One person said. "I'm looked after and feel very well."

There was a relaxed atmosphere in the home, and we observed that people were offered support at a level which encouraged independence and assured their individual needs were met. The staff were friendly and courteous in their approach to people and interacted confidently with them. One person said. "They're lovely, it's good fun living here."

We observed the midday meal service and found people were provided with a choice of nutritionally balanced meals. People were assisted at a level that suited them, and the meal time was an unhurried and enjoyable activity for those involved.

We found there were sufficient staff on duty, and those that we spoke with told us they felt well supported. Records we looked at showed us that staff attended a variety of training, which equipped them to understand the needs of the people they cared for and deliver appropriate care.

The provider had clear quality monitoring systems in place which were used effectively to identify any areas of concern, and drive improvements in this home.

You can see our judgements on the front page of this report.

More information about the provider

Please see our website www.cqc.org.uk for more information, including our most recent judgements against the essential standards. You can contact us using the telephone number on the back of the report if you have additional questions.

There is a glossary at the back of this report which has definitions for words and phrases we use in the report.

Our judgements for each standard inspected

Care and welfare of people who use services

✓ Met this standard

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

Our judgement

The provider was meeting this standard.

People experienced care, treatment and support that met their needs and protected their rights.

Reasons for our judgement

We found people's needs were assessed and care and treatment was planned and delivered in line with their individual care plan. We looked in detail at the care files of three people who lived at The Limes. Each file contained care plans that had been clearly written in a personalised way and referred to the individual's personal choices and preferences.

All aspects of people's care was also recorded in risk assessments, which identified hazards that people may face, and provided guidance on how staff should support people to manage the risk of harm. These were linked to their care plans. We saw that regular reviews were carried out to ensure that people's changing needs were managed appropriately. Care plan and review documents had been signed by people who used the service or their representative, to confirm their agreement and understanding of their care requirements.

We observed that care plans contained specific information regarding the level of support people wanted and required. This included information which related to the management of long term or reoccurring conditions which affected people's physical and mental health, well being and safety. We saw care being delivered in line with this information, and staff we spoke with were familiar with people's needs.

The care plans provided staff with clear guidance to follow when giving support and care, and in some cases identified trigger factors to help staff recognise early signs of deterioration in people's health. This meant that care was delivered with continuity and where necessary swift intervention from specialist health professionals could be sought to prevent further deterioration.

Food and drink should meet people's individual dietary needs

Our judgement

The provider was meeting this standard.

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

Reasons for our judgement

During our inspection on 30 July 2013, we observed the midday meal service. We saw that people were provided with a choice of suitable and nutritious food and drink, and were supported to be able to eat and drink sufficient amounts to meet their needs. The food looked appealing and was nicely presented.

This provider employed an external company to provide nutritionally balanced meals based on a four week menu plan. We looked at these and found they offered a wide variety of hot meal choices for each meal, and were appropriate to meet the dietary needs of a diverse community. In addition to the set menu, we observed that people were offered alternative 'lite meals' such as omelettes. These were freshly cooked and served to people on request.

We observed that although people were encouraged to dine together and socialise, if they preferred to have their meals more privately this was respected by staff. Where people needed assistance at meal times, this was done in a respectful way with conversation to encourage independence.

We noted from the care files that we looked at, that each person had a risk assessment completed in relation to their nutritional needs. People were weighed each month, and where a risk had been identified, specialist dietary advice had been sought and an appropriate care plan had been implemented.

Requirements relating to workers

✓ Met this standard

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

Our judgement

The provider was meeting this standard.

People were cared for, or supported by, suitably qualified, skilled and experienced staff.

Reasons for our judgement

People that we spoke with during this inspection told us they were happy with the staff that cared for them in this home. One person said, "I'm looked after very well here." We observed positive interactions between staff and people who used the service.

As part of this inspection we looked at the recruitment records for five of the 35 staff who worked at The Limes. We found that their personal files contained documentation which provided a clear audit trail and demonstrated that thorough recruitment processes were followed prior to staff appointments being offered. This meant that people were supported by staff who were suitable for this work.

We found all the required documents such as staff references and Criminal Record Bureau (CRB) checks, were present in each member of staffs' file. There was information recorded about staff skills and previous work experiences. However the provider might find it useful to note that where documents such as passports had been photocopied, these were not always clear and there was nothing to confirm that original documents had been checked.

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

Our judgement

The provider was meeting this standard.

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

Reasons for our judgement

People who lived at The Limes told us the staff were kind and helped them when they needed support and assistance. We observed staff interacting confidently with people, offering support and encouraging people to be independent. People looked clean and well cared for, and staff were confident and courteous in their approach to them.

We found there was enough appropriately qualified, skilled and experienced staff to meet the needs of the people who lived at this home at the time of this inspection. We looked at the staff rotas which showed that during the day there was a minimum of six care staff on duty to care for 28 people in the home. The care staff were supported by the manager, kitchen and domestic staff, and an administrator. At night there were three care staff on duty, with the support of an on-call system if they needed extra assistance or advice. We could see from the rotas that where extra staff were needed for 1:1 care duties or outings into the community, this was arranged in advance.

We spoke with two care staff during this inspection. We found they were knowledgeable about the people they supported and cared for, and were confident about their role in effectively meeting people's needs in a way that promoted independence.

The staff spoke with us about the training they had completed, and further training that was available to them. Training was provided by an on-line training programme and by face to face training from external trainers. In addition to the company's mandatory training, there were courses available which were specific to the needs of the people they supported, such as mental health, challenging behaviour and dementia awareness. Some staff had also either achieved, or were working towards National Vocation Qualification (NVQ) certificates at level two, three and five, and diploma qualifications.

We looked at the training records which confirmed staff were attending a wide range of training and had completed competency questionnaires to consolidate their knowledge. The manager told us that where staff had failed to attend their training within the target dates identified on the e learning system, they were prevented from working until this was done.

Records

✓ Met this standard

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

Our judgement

The provider was meeting this standard.

People were protected from the risks of unsafe or inappropriate care and treatment because accurate and appropriate records were maintained.

Reasons for our judgement

During our inspection on 30 July 2013, we found records were kept securely and could be located promptly when needed.

The care documentation was stored in a locked office. They were easily accessible to staff, and therefore enabled them to be used as effective working documents in the delivery of care. Staff completed people's daily progress records each shift to reflect the individuals well being and any extraordinary events that may have occurred. Visits from other health professionals were also clearly recorded.

Staff records, and other records relevant to the management of the services were accurate and fit for purpose. The home manager told us that regular audits were carried out, and records were maintained in relation to all aspects of health and safety in the home. We looked at some of these records including, staff training records, monthly infection control audit records, and fire safety and water temperature checks. These confirmed that monitoring systems were in place and where anomalies were identified these were addressed by the manager, and used to make service improvements.

About CQC inspections

We are the regulator of health and social care in England.

All providers of regulated health and social 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 essential standards are described in the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009. We regulate against these standards, which we sometimes describe as "government standards".

We carry out unannounced inspections of all care homes, acute hospitals and domiciliary care services in England at least once a year to judge whether or not the essential standards are being met. We carry out inspections of other services less often. All of our inspections are unannounced unless there is a good reason to let the provider know we are coming.

There are 16 essential standards that relate most directly to the quality and safety of care and these are grouped into five key areas. When we inspect we could check all or part of any of the 16 standards at any time depending on the individual circumstances of the service. Because of this we often check different standards at different times.

When we inspect, we always visit and we do things like observe how people are cared for, and we talk to people who use the service, to their carers and to staff. We also review information we have gathered about the provider, check the service's records and check whether the right systems and processes are in place.

We focus on whether or not the provider is meeting the standards and we are guided by whether people are experiencing the outcomes they should be able to expect when the standards are being met. By outcomes we mean the impact care has on the health, safety and welfare of people who use the service, and the experience they have whilst receiving it.

Our inspectors judge if any action is required by the provider of the service to improve the standard of care being provided. Where providers are non-compliant with the regulations, we take enforcement action against them. If we require a service to take action, or if we take enforcement action, we re-inspect it before its next routine inspection was due. This could mean we re-inspect a service several times in one year. We also might decide to re-inspect a service if new concerns emerge about it before the next routine inspection.

In between inspections we continually monitor information we have about providers. The information comes from the public, the provider, other organisations, and from care workers.

You can tell us about your experience of this provider on our website.

How we define our judgements

The following pages show our findings and regulatory judgement for each essential standard or part of the standard that we inspected. Our judgements are based on the ongoing review and analysis of the information gathered by CQC about this provider and the evidence collected during this inspection.

We reach one of the following judgements for each essential standard inspected.

✓ Met this standard This means that the standard was being met in that the provider was compliant with the regulation. If we find that standards were met, we take no regulatory action but we may make comments that may be useful to the provider and to the public about minor improvements that could be made.

✗ Action needed This means that the standard was not being met in that the provider was non-compliant with the regulation. We may have set a compliance action requiring the provider to produce a report setting out how and by when changes will be made to make sure they comply with the standard. We monitor the implementation of action plans in these reports and, if necessary, take further action. We may have identified a breach of a regulation which is more serious, and we will make sure action is taken. We will report on this when it is complete.

✗ Enforcement action taken If the breach of the regulation was more serious, or there have been several or continual breaches, we have a range of actions we take using the criminal and/or civil procedures in the Health and Social Care Act 2008 and relevant regulations. These enforcement powers include issuing a warning notice; restricting or suspending the services a provider can offer, or the number of people it can care for; issuing fines and formal cautions; in extreme cases, cancelling a provider or managers registration or prosecuting a manager or provider. These enforcement powers are set out in law and mean that we can take swift, targeted action where services are failing people.

How we define our judgements (continued)

Where we find non-compliance with a regulation (or part of a regulation), we state which part of the regulation has been breached. Only where there is non compliance with one or more of Regulations 9-24 of the Regulated Activity Regulations, will our report include a judgement about the level of impact on people who use the service (and others, if appropriate to the regulation). This could be a minor, moderate or major impact.

Minor impact - people who use the service experienced poor care that had an impact on their health, safety or welfare or there was a risk of this happening. The impact was not significant and the matter could be managed or resolved quickly.

Moderate impact - people who use the service experienced poor care that had a significant effect on their health, safety or welfare or there was a risk of this happening. The matter may need to be resolved quickly.

Major impact - people who use the service experienced poor care that had a serious current or long term impact on their health, safety and welfare, or there was a risk of this happening. The matter needs to be resolved quickly

We decide the most appropriate action to take to ensure that the necessary changes are made. We always follow up to check whether action has been taken to meet the standards.

Glossary of terms we use in this report

Essential standard

The essential standards of quality and safety are described in our *Guidance about compliance: Essential standards of quality and safety*. They consist of a significant number of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009. These regulations describe the essential standards of quality and safety that people who use health and adult social care services have a right to expect. A full list of the standards can be found within the *Guidance about compliance*. The 16 essential standards are:

Respecting and involving people who use services - Outcome 1 (Regulation 17)

Consent to care and treatment - Outcome 2 (Regulation 18)

Care and welfare of people who use services - Outcome 4 (Regulation 9)

Meeting Nutritional Needs - Outcome 5 (Regulation 14)

Cooperating with other providers - Outcome 6 (Regulation 24)

Safeguarding people who use services from abuse - Outcome 7 (Regulation 11)

Cleanliness and infection control - Outcome 8 (Regulation 12)

Management of medicines - Outcome 9 (Regulation 13)

Safety and suitability of premises - Outcome 10 (Regulation 15)

Safety, availability and suitability of equipment - Outcome 11 (Regulation 16)

Requirements relating to workers - Outcome 12 (Regulation 21)

Staffing - Outcome 13 (Regulation 22)

Supporting Staff - Outcome 14 (Regulation 23)

Assessing and monitoring the quality of service provision - Outcome 16 (Regulation 10)

Complaints - Outcome 17 (Regulation 19)

Records - Outcome 21 (Regulation 20)

Regulated activity

These are prescribed activities related to care and treatment that require registration with CQC. These are set out in legislation, and reflect the services provided.

Glossary of terms we use in this report (continued)

(Registered) Provider

There are several legal terms relating to the providers of services. These include registered person, service provider and registered manager. The term 'provider' means anyone with a legal responsibility for ensuring that the requirements of the law are carried out. On our website we often refer to providers as a 'service'.

Regulations

We regulate against the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009.

Responsive inspection

This is carried out at any time in relation to identified concerns.

Routine inspection

This is planned and could occur at any time. We sometimes describe this as a scheduled inspection.

Themed inspection

This is targeted to look at specific standards, sectors or types of care.

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