Review of compliance

Four Seasons (Bamford) Limited
Alexandra Care Home

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<th>Region:</th>
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| Location address:  | 46 Alexandra Road  
                    | Hemel Hempstead  
                    | Hertfordshire    
                    | HP2 5BP         |
| Type of service:   | Care home service with nursing |
| Date of Publication: | April 2012   |
| Overview of the service: | Alexandra Care Home is part of the Four Seasons Healthcare group of companies and provides care and accommodation, including nursing care, to 76 predominantly older people who may also live with dementia or a physical disability. |
Our current overall judgement

Alexandra Care Home was meeting all the essential standards of quality and safety.

The summary below describes why we carried out this review, what we found and any action required.

Why we carried out this review

We carried out this review to check whether Alexandra Care Home had made improvements in relation to:

Outcome 04 - Care and welfare of people who use services
Outcome 13 - Staffing

How we carried out this review

We reviewed all the information we hold about this provider, carried out a visit on 19 March 2012, observed how people were being cared for, talked to staff and talked to people who use services.

What people told us

Those people who live in Alexandra Care Home that we had conversations with during our visit on the 19 March 2012 told us that they were being well cared for. One person who had only recently moved into the home said that they were settling in well and were particularly positive about the quality of the food.

People living in the home told us that when they asked for help from care staff this was usually done in a reasonable time although they said that sometimes they had to wait if care staff were very busy.

They were all very supportive and appreciative of the care staff and said that they provided a good standard of care for them.

When we asked them if they felt safe they told us they did and none of the people we spoke to during our visit raised any concerns with us about the competence of care staff or the care they received from them.

What we found about the standards we reviewed and how well Alexandra Care Home was meeting them

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

The provider is compliant with this outcome because people who live in Alexandra Care Home experience appropriate care, treatment and support which is now provided in a consistent and timely way.

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

The provider is compliant with this outcome because there are now sufficient numbers of staff with the right knowledge, skills and experience to meet the needs of people who live in Alexandra Care Home at all times.

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 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
Those people who live in Alexandra Care Home that we had conversations with during our visit on the 19 March 2012 told us that they were being well cared for. One person who had only recently moved into the home said that they were settling in well and were particularly positive about the quality of the food.

Other evidence
When we observed interactions between care staff and people who live in Alexandra Care Home throughout our visit on the 19 March 2012 we saw that these were positive and respectful.

Those care staff we observed moving people in wheelchairs did so appropriately and safely and talked to the person concerned during the process asking them where they would like to go or explaining why and where they were moving them, for example into the dining room for their breakfast or to the lounge for activities. This meant that people being transferred by wheelchair were able to make a choice about what they did and where they went and that they were not anxious about being moved without knowing what for or where to.

When we spoke to a visiting health care professional during our visit they told us that there had been a significant improvement recently in the standard of care they had observed for the people in the home they were involved with. They said there was now more consistency of staff which improved continuity and communication, the standard of recording of blood sugar readings had improved and there was now more choice of
'puddings' being offered for people with diabetes.

In the period December 2011 to February 2012 concerns had been raised by relatives of people who live in Alexandra Care Home about the widespread use of agency care staff, the lack of staff at certain times and the poor response times and continuity of care experienced by people living in Alexandra Care Home as a result. These concerns were reflected in the CQC report published in February 2012 following a visit to the home in December 2011 and in relative's meeting minutes of a meeting held on the 29 February 2012.

On the 19 March 2012 when we spoke with the provider's area manager responsible for Alexandra Care Home and with the newly appointed home's manager and clinical lead nurse, they acknowledged that there had been significant concerns about the impact of staff shortages and increased use of agency staff on the care experience of people living in Alexandra Care Home in the period December 2011 to February 2012. They provided evidence to show that additional staff at all levels and in all care roles had been recruited recently. Some of these were already in post and others were in the process of undergoing the necessary recruitment checks required to ensure they were suitable for employment. Although these pre-employment checks were time consuming, they were necessary to protect people living in Alexandra Care Home from receiving care from people who were not appropriately qualified or suitable to do so.

We were told that reliance of agency staff had already been reduced and that a new activity co-coordinator was in post, together with the new clinical lead nurse. There was a newly appointed unit manager now in post, nine care staff had been recruited with five of these already having completed their pre-employment checks. This meant that although there were still a significant number of agency staff being used, the incidence of this had been and was reducing and we were told that recruitment was ongoing.

We spoke with a large number of care staff at all levels and from all units in the home, who confirmed that there were new staff in place.

During our visit to Alexandra Care Home on the 19 March 2012 we monitored response times to call bells on each unit and found that at that time there were not any unreasonably long delays experienced by people living in the home who had called for assistance.

In discussions with the area manager, the home's manager and clinical lead and with care and nursing staff and the home's chef manager it was confirmed that there had been and was ongoing a significant programme of renewal of equipment and facilities throughout the home. This had already benefited people who live and work in the home and included for example additional hoists, new wheelchair weighing scales and new fridges and other catering equipment.

**Our judgement**
The provider is compliant with this outcome because people who live in Alexandra Care Home experience appropriate care, treatment and support which is now provided in a consistent and timely way.
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
Those people who live in Alexandra Care Home that we had conversations with during our visit on the 19 March 2012 told us that when they asked for help from care staff this was usually done in a reasonable time although they told us that sometimes they had to wait if care staff were very busy.

They were all very supportive and appreciative of the care staff and said that they provided a good standard of care for them.

When we asked them if they felt safe they told us they did and none of the people we spoke to during our visit raised any concerns with us about the competence of care staff or the care they received from them.

Other evidence
During our visit on the 19 March 2012 we had a series of conversations with a wide range of members of the staff team, including the manager, deputy manager/clinical lead, nurses, care staff and the chef manager.

The care and nursing staff we talked with about staffing levels told us that they thought they were broadly adequate provided all shifts were fully staffed. One person told us they thought the reduction in staffing in the afternoon could sometimes put additional pressure on the staff team, however overall those people we spoke with accepted the current staffing enabled them to provide a good standard of care to people living in the home.
Staff we spoke with acknowledged that the use of agency staff was reducing although was still significant. When we asked the manager if any recent shifts had been staffed below expectation, they told us that they had not, as agency staff had been used to make up any shortfalls of permanent staff that occurred.

The recent changes in management were welcomed and the staff we spoke with were in particular very appreciative of the support and guidance they received through supervision and in day to day contact with the deputy manager/clinical lead nurse.

Some of those care staff we spoke with had seen significant changes in management of the home during the period of their employment; in one case for example they told us that there had been eight managers in eleven years and they were concerned about how permanent the staffing changes would prove to be.

When we asked about the training and supervision provided to ensure people living in Alexandra Care Home receive care and support from staff with the right competencies, knowledge, qualifications, skills and experience to meet their needs at all times, we were told that regular supervision takes place and we were shown records of supervision sessions that have taken place and forward plans for supervision sessions throughout 2012.

Staff we spoke with were able to give details of various courses and training sessions they had attended in the past year. They all mentioned that since Four Seasons had taken over the home, e-learning had been introduced in a number of specific topic areas and this had proved flexible and effective in most people’s view, with the proviso in a number of cases that it was accompanied by practical, 'hands-on' sessions in subjects such as moving and handling for example.

We saw records of training already undertaken by staff and planning details for training to be provided and undertaken by all staff throughout 2012. We were told that there were strict time-scales for induction training and basic training for all staff to complete as appropriate to them.

In discussion with the area manager for Four Seasons Healthcare we were told that, in conjunction with the home's manager, staffing levels were kept under review and would be revised in the light of occupancy numbers and dependency levels. For example concerns identified by relatives of people living in the home and the new manager about the level and spread of activities had resulted in the appointment of an additional activities organiser to address this.

Our judgement
The provider is compliant with this outcome because there are now sufficient numbers of staff with the right knowledge, skills and experience to meet the needs of people who live in Alexandra Care Home at all times.
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

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