

Review of compliance

Doulton Court Limited Aspen Lodge

Region:	East Midlands
Location address:	Aspen Lodge Yarborough Road Skegness Lincolnshire PE25 2NX
Type of service:	Care home
Publication date:	7 June 2011
Overview of the service:	Aspen Lodge is a residential care home registered to provide the regulated activities "Accommodation for persons who require nursing or personal care" and "Treatment of disease, disorder or injury" and "Diagnostic or screening procedures" for up to 52 people who use the service.

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

What we found overall

We found that Aspen Lodge was not meeting one or more essential standards. Improvements were needed.

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 because concerns were identified in relation to:

- Care and welfare of people who use services
- Cooperating with other providers
- Records

How we carried out this review

We reviewed all the information we hold about this provider, carried out a visit on 30 March 2011, observed how people were being cared for, talked with people who use services, talked with staff, checked the provider's records, and looked at records of people who use services.

What people told us

We did not receive any comments from people who use the service during our review.

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

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

The treatment and support does did meet people's needs and protect their human rights.

Overall, we found that improvements were needed for this essential standard.

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

People did not have access to other health and social care services or support relevant to their care, treatment and support needs.

Overall, we found that improvements were needed for this essential standard.

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

Records detailing the care and support people require were not being properly maintained and did not provide accurate information.

Overall, we found that improvements were needed for this essential standard.

Action we have asked the service to take

We have asked the provider to send us a report by 13 May 2011 setting out the action they will take to improve. We will check to make sure that the improvements have been made.

Other information

This is the first review of compliance following the transition of registration under the Health and Social Care Act 2008.

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 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

There are major concerns
with outcome 4: Care and welfare of people who use services

Our findings

What people who use the service experienced and told us
We are not able to publish the evidence that supports the judgment in order to maintain confidentiality of a person who uses the service.

Other evidence

Our judgement
The treatment and support does not meet people’s needs and protect their human rights.

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

There are major concerns
with outcome 6: Cooperating with other providers

Our findings

What people who use the service experienced and told us
We are not able to publish the evidence that supports the judgment in order to maintain confidentiality of a person who uses the service.

Other evidence

Our judgement
People did not have access to other health and social care services or support relevant to their care, treatment and support needs.

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 major concerns
with outcome 21: Records

Our findings

What people who use the service experienced and told us
We are not able to publish the evidence that supports the judgment in order to maintain confidentiality of a person who uses the service.

Other evidence

Our judgement
Records detailing the care and support people require were not being properly maintained and did not provide accurate information.

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” “ Treatment of disease, disorder or injury” "Diagnostic or screening procedures”	9	Outcome 4: Care and welfare of people who use services
	How the regulation is not being met: The treatment and support did not meet people’s needs and protect their human rights.	
Accommodation for persons who require nursing or personal care” “ Treatment of disease, disorder or injury” "Diagnostic or screening procedures”	24	Outcome 6: Cooperating with other providers
	How the regulation is not being met: People did not have access to other health and social care services or support relevant to their care, treatment and support needs.	
Accommodation for persons who require nursing or personal care” “ Treatment of disease, disorder or injury” "Diagnostic or screening procedures”	20	Outcome 21: Records
	How the regulation is not being met: Records detailing the care and support people require were not being properly maintained and did not provide accurate information.	

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 by 13 May 2011.

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

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