

Review of compliance

Bupa Care Homes (CFC Homes) Limited Parkside House Nursing Home

Region:	South East
Location address:	Parkside Road Reading Berkshire RG30 2DP
Type of service:	Care home service with nursing
Date of Publication:	August 2011
Overview of the service:	Parkside House Nursing Home caters for the needs of 75 older people who require nursing care. The home is situated close to Reading town centre.

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

Our current overall judgement

Parkside House Nursing 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 because concerns were identified in relation to:

- Outcome 04 - Care and welfare of people who use services
- Outcome 07 - Safeguarding people who use services from abuse
- Outcome 12 - Requirements relating to workers
- Outcome 14 - Supporting staff

How we carried out this review

We reviewed all the information we hold about this provider, carried out a visit on 20 May 2011, observed how people were being cared for, looked at records of people who use services, talked to staff, reviewed information from stakeholders and talked to people who use services.

What people told us

We spoke to eight people that were living at the home and three relatives. Generally people were satisfied with the quality of care provided at the home. We received comments such as "very caring staff", "they do everything I ask of them" and "it's not my own home but it's the nearest thing". One person said that they felt "rushed by staff" another said "there is never enough staff in places like this, but they do their best". One relative told us they had looked at several homes before choosing Parkside House for their mother. They told us "this home seemed lovely and clean and staff were very welcoming, I knew it was going to be the right one for mum" the relative also said "Mum likes it here, she has settled well". Generally people told us that the food was "good" and "well cooked". The home was "maintained well" and was always "clean and fresh".

What we found about the standards we reviewed and how well Parkside House Nursing Home was meeting them

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

People living in the home were provided with safe and appropriate care and support. The

care plans had been reviewed and updated regularly to ensure that the care provided continued to meet their needs.

Overall, we found that Parkside House Nursing Home was meeting this essential standard.

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

The home had systems in place to identify and respond to, any actual or potential, incidents of abuse. Staff had an understanding of their roles and responsibilities and were trained and knowledgeable about working with vulnerable adults.

Overall, we found that Parkside House Nursing Home was meeting this essential standard.

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

The service had appropriate recruitment processes in place which included ensuring that all relevant checks were carried out before a person started to work for the organisation.

Overall, we found that Parkside House Nursing Home was meeting this essential standard.

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

People living at the home had their needs met by appropriately trained staff. All staff had received an induction, which covered their basic training needs. Staff attended regular supervision meetings and had annual appraisals of their performance.

Overall, we found that Parkside House Nursing Home was meeting this essential standard.

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

We spoke to eight people that lived at the home and three relatives. They told us that they were happy with the care provided at the home. One person told us that staff "tried their best". One person told us that they did not know what was in their care plan but felt that staff "knew what they were doing". Relatives confirmed that they knew what was in the care plans and told us that they were kept informed if there was a change in people's health and well being.

Other evidence

We looked at the care files for seven people that lived at the home. The files provided staff with detailed information about the needs of people in the home and how they would be met. The files contained information about all areas of the person's life including their healthcare, personal and social care needs. They detailed people's choices and preferences about how they wished to receive their care. The care plans were easy to follow and were signed by the person using the service or an advocate or relative. They had been reviewed at regular intervals or when necessary and were up-to-date. The daily records reflected what was written in the care plans. The home practiced person-centred care, which was a process that was focused on the person's life from their view point. Any risks to the individual had been fully assessed and quantified. We spoke to staff that told us that people are supported to make decisions about their lives and to be as independent as possible. Where there was a need for limitation on choices or freedom these had been agreed with the person using services or their relatives. Records of best interest meetings and Mental Capacity Act assessments were on file.

We observed how staff were providing care to people at the home. In one case the staff member knelt down and spoke quietly and clearly to the person having gained their full attention. We were later told that the person had hearing and sight difficulties and found it difficult to hear or communicate. Staff were observed to knock before entering people's rooms. They called out their name and asked the occupant if they could enter. We observed that staff were mindful of the need to ensure that people's dignity and privacy were respected at all times whilst providing personal care.

We spoke to five staff. They told us that they were key workers or key nurses to a number of people. They were knowledgeable about the people for whom they were a key worker and had built a relationship with them. Staff were aware of changes in people's health and well being and fully understood the need to record information in the persons file and to notify the senior person on duty if they had noticed changes.

Our judgement

People living in the home were provided with safe and appropriate care and support. The care plans had been reviewed and updated regularly to ensure that the care provided continued to meet their needs.

Overall, we found that Parkside House Nursing Home was meeting this essential standard.

Outcome 07: Safeguarding people who use services from abuse

What the outcome says

This is what people who use services should expect.

People who use services:

* Are protected from abuse, or the risk of abuse, and their human rights are respected and upheld.

What we found

Our judgement

The provider is compliant with Outcome 07: Safeguarding people who use services from abuse

Our findings

What people who use the service experienced and told us

People that live at the home told us that they felt safe and well cared for. One relative told us that they had received a good response to a concern they had raised. They told us that the nurses and the manager would always take time to speak to them and keep them informed about their relative's progress.

Other evidence

We spoke to five staff who told us that the home had policies and procedures in place for them to follow about safeguarding adults. They told us that training had been provided as part of their induction and that they received regular refresher training and updates. They told us that the training enabled them to understand different types of abuse and how to recognise the signs. They understood that they needed to report any concerns to management in order to protect people living at the home from abuse or exploitation. The staff told us that the service had a whistle-blowing policy and they were aware of the process to report any concerns.

We looked at staff training records which confirmed that training in safeguarding adults had been undertaken by staff at regular intervals. There were certificates on file that confirmed this.

We spoke to members of the Local Authority safeguarding team. They told us that the home was quick to respond to safeguarding concerns. They told us that the home reported any incidents or concern to them as soon as they happened in order that people were safeguarded.

Our judgement

The home had systems in place to identify and respond to, any actual or potential, incidents of abuse. Staff had an understanding of their roles and responsibilities and were trained and knowledgeable about working with vulnerable adults.

Overall, we found that Parkside House Nursing Home was meeting this essential standard.

Outcome 12: Requirements relating to workers

What the outcome says

This is what people who use services should expect.

People who use services:

* Are safe and their health and welfare needs are met by staff who are fit, appropriately qualified and are physically and mentally able to do their job.

What we found

Our judgement

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

Our findings

What people who use the service experienced and told us

We did not speak to people that lived at the home about this standard.

Other evidence

During our inspection of the home we looked at seven staff files. Each file contained a completed application form, two written references, a full employment history and proof of the person's identity. There was a photograph of each member of staff on file. Staff had provided the home with proof of their eligibility to work in the United Kingdom. A criminal records check and Independent Safeguarding Authority check had been undertaken and the details were recorded. Staff had completed a medical questionnaire to ensure that they were physically and mentally fit to do the job. There were records of formal interviews which had been carried out by two people. There were copies of job descriptions and contracts of employment on file.

We spoke to five staff who confirmed that they had been effectively recruited. They said that the recruitment practices at the home had been robust and fair. They told us that they had only been able to commence their duties after the vetting procedures had been carried out, which had taken between three and six weeks. One nurse told us that they had been required to provide proof that they were a qualified professional and that essential checks with their professional body had been carried out by the home before they could start work.

Our judgement

The service had appropriate recruitment processes in place which included ensuring

that all relevant checks were carried out before a person started to work for the organisation.

Overall, we found that Parkside House Nursing Home was meeting this essential standard.

Outcome 14: Supporting staff

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 staff

Our findings

What people who use the service experienced and told us

People living at the home said that the staff were approachable and kind. One person told us that they felt that "staff know what they are doing" another said "the carers do a good job".

Other evidence

We looked at the training matrix for the home and the staff training records for four staff members. From the files we could see that staff had completed an induction that was linked to the Skills for Care induction programme. This is a recognised national programme of training for care staff which is completed within their first 12 weeks of employment. All new staff had worked along side more experienced staff members and nursing staff before they were able to work unsupervised with people that use the service. During the induction period staff had also undertaken training in the aims and objectives of the service, fire awareness, health & safety, person-centred care, customer care, manual handling, food hygiene, safeguarding, diversity, infection control and the basics of first aid. The majority of the care staff were qualified to a minimum of a national vocational qualification level 2.

The qualified nurses told us that they had opportunities to enhance their knowledge and skills. One nurse told us they had trained in tissue viability and received training in the Mental Capacity Act and Deprivation of liberty safeguards.

We spoke to four staff. They told us they were provided with opportunities to discuss issues and voice their opinions in staff meetings. Additionally they attended regular meetings with their supervisor on an individual basis. During these meetings staff told

us they talked about their roles as key workers to people living at the home, their individual training needs and discussed their future development. Staff told us that they received an appraisal of their performance on a yearly basis and records were on file to confirm this.

Our judgement

People living at the home had their needs met by appropriately trained staff. All staff had received an induction, which covered their basic training needs. Staff attended regular supervision meetings and had annual appraisals of their performance. Overall, we found that Parkside House Nursing Home was meeting this essential standard.

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

Document purpose	Review of compliance report
Author	Care Quality Commission
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