

Review of compliance

Shaw Healthcare Limited Rotherlea	
Region:	South East
Location address:	Dawtry Road Petworth West Sussex GU28 0EA
Type of service:	Care home service without nursing
Date of Publication:	August 2012
Overview of the service:	Rotherlea in a purpose built care home registered for the regulated activity accommodation for people requiring nursing or personal care. It is registered to provide personal care and accommodation for up to 70 people who may be frail and/or suffer from dementia. It does not offer nursing care

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

Our current overall judgement

Rotherlea was meeting all the essential standards of quality and safety inspected.

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 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, carried out a visit on 17 July 2012, carried out a visit on 19 July 2012, observed how people were being cared for, talked to staff, reviewed information from stakeholders and talked to people who use services.

What people told us

We spoke with five people who lived in the home. They told us that they enjoyed life in the home and that they had choices in daily activities of living. One person told us, "I love it here." Another told us, "I like to get up around nine."

We were told that there were plenty of activities such as music, singers and trips out. One person told us, "I love the trips out."

We looked at completed surveys from people and relatives and they also expressed satisfaction with the activities but some people pointed out that there was not much on offer for people who did not like groups or could not go out on trips.

People told us they were happy with the care they received and that they were treated with respect.

We spoke with one relative who was happy with the care in the home and who confirmed that the meals were very good.

We spoke with professionals from West Sussex County Council, with the district nursing team and with the Primary Care Trust Mental Health team who were, in the main, happy with the care in the home. We were told that the home learned from any incident or investigation, that staff were caring but that "sometimes staff are very thin on the ground" We were told that the majority of staff were enthusiastic about some recent dementia workshops.

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

Outcome 01: People should be treated with respect, involved in discussions about their care and treatment and able to influence how the service is run

People's privacy, dignity and independence were respected.

People's views and experiences were taken into account in the way the service was provided and delivered in relation to their care.

The provider was meeting this standard.

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

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

The provider was meeting this standard.

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

People who use the service were protected from the risk of abuse, because the provider had taken reasonable steps to identify the possibility of abuse and prevent abuse from happening.

The provider was meeting this standard.

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

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

The provider was meeting this standard.

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

People were cared for by staff who were supported to deliver care and treatment safely and to an appropriate standard.

The provider was meeting this 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

The provider had an effective system to regularly assess and monitor the quality of service that people receive.

The provider was meeting this standard.

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

People were protected from the risks of unsafe or inappropriate care and treatment.

The provider was meeting this 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.

Where we judge that a provider is non-compliant with a standard, we make a judgement about whether the impact on people who use the service (or others) is minor, moderate or major:

A minor impact means that 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.

A moderate impact means that 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.

A major impact means that 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.

Where we identify compliance, no further action is taken. Where we have concerns, the most appropriate action is taken to ensure that the necessary changes are made.

More information about each of the outcomes can be found in the *Guidance about compliance: Essential standards of quality and safety*

Outcome 01: 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 01: Respecting and involving people who use services

Our findings

What people who use the service experienced and told us

People spoken with confirmed that there was choice in daily activities and daily routines. They told us they were treated with respect and dignity.

One person said " I really enjoy the trips out, there are lots of singers and music." Another told us " There is very good food." And another person told us, "We get on all right here, we don't fall out."

Other evidence

People who use the service understood the care and treatment choices available to them. They expressed their views and were involved in making decisions about their care and treatment.

We spoke with five people living in the home and they told us they were happy with the care they received in the home. They confirmed that there was choice in daily activities and daily routines.

People we spoke with told us their needs were assessed prior to admission to the home. We were told care needs were discussed with people and their families.

We were told there was good choice of food and that they were asked daily what they wanted to eat. We were also told that if they changed their mind they were always offered something else.

We were told that call bells were answered quickly and that staff were respectful.

People told us they knew how to complain. We spoke with one relative, who was mostly satisfied with the care in the home other than the decision to hoist her relative, which she said had not been discussed with her. The manager told us that they were trying different methods before presenting the one they felt was best. The relative requested that rather than hoisting, a chair which can be raised to aid standing up could be used and this was supplied by the home.

From our observations we saw that people were treated with respect, we saw and heard staff offering choices to people in relation to food, drinks and where they wanted to sit.

Our judgement

People's privacy, dignity and independence were respected.

People's views and experiences were taken into account in the way the service was provided and delivered in relation to their care.

The provider was meeting this standard.

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

People spoken with told us that their care was delivered as assessed and as they wished. People told us they were happy with the activities programme.

Other evidence

People's needs were assessed and care and treatment was planned and delivered in line with their individual care plan.

We looked at care records for five people and we saw that individualised care plans were in place for people. These included personal details and next of kin details.

People's diagnosis was recorded as were the health professionals involved.

Needs were assessed in relation to personal care, eating and drinking, mobility, continence, sleep and communication. Some records contained an oral care needs assessment. Ongoing records of people receiving oral care were not available.

Food and fluid charts were in place for some people and these were up to date.

People were weighed and nutritional screening had been undertaken. Skin assessments were in place. Pressure relieving equipment was in use for those people assessed as needing this.

Risk assessments were in place for behaviour, call bell use, use of keys, falls,

medication, moving and handling, choking /ability to swallow and the use of bedrails.

Incidents were recorded and monitored.

Professional visits such as district nurse (DN), social services reviews and general practitioner were recorded.

We spoke to the health and social care professionals who told us they visited the home regularly. They told us that in general communication from the home has improved over time. The DN visit twice weekly unless urgent. We were told they were called in frequently for skin tears but that the home managed pressure wounds well, calling in the DN for early intervention.

We saw notices around the home about activities and outings, also some photo displays of these events. We looked at completed surveys from people and relatives and they also expressed satisfaction with the activities but some people pointed out that there was not much on offer for people who did not like groups or could not go out on trips. The manager told us that as a result of this they are working on a programme of one to one activities that can be offered to people. A summer fete was planned for the weekend.

We saw personal evacuation plans in peoples care records.

Our judgement

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

The provider was meeting this 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 told us they feel safe in the home.

Other evidence

People who use the service were protected from the risk of abuse, because the provider had taken reasonable steps to identify the possibility of abuse and prevent abuse from happening.

We saw evidence that safeguarding adults' training was in place. Staff received training in recognising and responding to abuse. Staff spoken with demonstrated a clear knowledge of recognising and reporting any alleged abuse or poor practice. They told us they could go to the manager with any concern. They also confirmed that they had received safeguarding adults training.

We saw that there were policies and procedures in place for safeguarding adults. These were available in the managers office, care offices and staff room.

A record was kept of all safeguarding referrals and investigations.

A social care professional told us the home had learned from previous investigations and altered practice as a result.

Our judgement

People who use the service were protected from the risk of abuse, because the

provider had taken reasonable steps to identify the possibility of abuse and prevent abuse from happening.

The provider was meeting this standard.

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 told us that there were enough staff to attend to their needs.

Other evidence

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

One professional told us that sometimes, "Staff were thin on the ground."

We were provided with the latest dependency audit which looked at staffing levels. The home was found to on average, have staffing levels similar to other homes in the organisation. It was acknowledged that an extra support worker at night would improve outcomes for people. We saw a rota that showed this had been implemented.

Staff were observed on the day to be attending to peoples needs in a calm and pleasant manner. However when asked why one persons personal care needs chart had not been signed at 11:45 we were told that, "She has not been done yet." The manager confirmed that this person would have had full care from the night staff at the end of their shift., which was 08:00

Our judgement

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

The provider was meeting this standard.

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 told us they were looked after by a caring staff.

Other evidence

Staff received appropriate professional development.

We saw evidence that staff received relevant training and that this training was up to date. There was a training matrix on the computer system which highlighted any training due and dates were in place to complete this.

The staff had recently attended workshops on dementia delivered by the primary care trust mental health team. We were told that most of the staff engaged with this process and that their practice changed as a result. For example staff would question why a person was behaving in a specific way and what could be done to help the situation.

A manual handling package of training was in place as was training for accidents and sudden illness, catheter care, care planning and end of life care.

Our judgement

People were cared for by staff who were supported to deliver care and treatment safely and to an appropriate standard.

The provider was meeting this 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 told us that they were asked their opinions by questionnaire and in meetings.

Other evidence

People who use the service, their representatives and staff were asked for their views about their care and treatment and they were acted on.

There were residents and relatives meetings in place. Minutes of these meetings were available.

Relatives and residents questionnaires had been completed regularly and the home was acting on comments such as the provision of more one to one activities for people who do not enjoy the group activities or trips out.

There was evidence that learning from incidents / investigations took place and appropriate changes were implemented such as the introduction of handover tools, so that key information is communicated..

We were told the regional manager visited monthly and that a report was completed. We saw these reports and saw that staff and people were spoken with and that complaints were monitored.

There was a complaints procedure in place which people confirmed they knew about.

There was ongoing audit of care records, infection control, environment and

medication.

Our judgement

The provider had an effective system to regularly assess and monitor the quality of service that people receive.

The provider was meeting this standard.

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

People we spoke with could not comment on this so we looked at records to establish if accurate records were held for people.

Other evidence

Records were kept securely and could be located promptly when needed.

Records were kept for the appropriate period of time and then destroyed securely.

Staff records and other records relevant to the management of the service were accurate and fit for purpose.

People's personal records including medical records were mostly accurate and fit for purpose. We saw in care records that not all peoples had an oral health needs assessment. For those that did we did not see any ongoing recording of oral care. The manager explained that this may be due to new documentation which care workers were not filling out correctly. The provider may wish to note that people must be protected from unsafe or inappropriate treatment by the maintenance of accurate records.

Our judgement

People were protected from the risks of unsafe or inappropriate care and treatment.

The provider was meeting this 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.

Where we judge that providers are not meeting essential standards, we may set compliance actions or take enforcement action:

Compliance actions: These are actions a provider must take so that they **achieve** compliance with the essential standards. 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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