

# Review of compliance

## Cheshire West and Chester Council Leftwich Community Support Centre

<b>Region:</b>	North West
<b>Location address:</b>	Old Hall Road Leftwich Green Northwich Cheshire CW9 8BE
<b>Type of service:</b>	Care home service without nursing
<b>Date of Publication:</b>	January 2013
<b>Overview of the service:</b>	Leftwich Community Support Centre is a short stay and respite service, where people stay for a short period of time and are not permanent residents there. There is also a day centre attached to this service and some of the people who come to stay there also have regular day care there as well. The home is situated in its own ground in a residential area of Leftwich,

	close to Northwich town centre.
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# Summary of our findings for the essential standards of quality and safety

## Our current overall judgement

**Leftwich Community Support Centre 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 20 December 2012, observed how people were being cared for, looked at records of people who use services, talked to staff and talked to people who use services.

### What people told us

We spoke with eight people living in the home. People told us they felt very comfortable and cared for. They said they knew all about the home before they came to stay for respite. Comments included "I was given lots of information about the home before I came to stay", "I was given a brochure about the home and details of how I would be looked after."; "staff asked me what name I liked to be called so I told them I liked to be called by my shortened name. Everyone calls me that now."; "I was told about this home before I came here. I was given details of the care provided and it turned out to be better than I expected, it's great here."

The people using the service said that they were happy staying in the home. Comments included; "I am fine, I am very happy here", "I have been back here many times for a short break", "they provide excellent care and comfort", " staff are kind and I love it here." "Good food, good staff, good company." Relatives of people living in the home told us that they felt staff treated people with respect and made sure people got the social, health care and reassurance they needed. Comments included, " Staff treat people with respect and provide good care and stimulation."

People told us the staff were kind and helpful and were able to provide a good level of care and support. Comments included, "The staff are good", " staff are kind and helpful", " staff assist me when I need help". We sometimes have to wait a while for staff to assist us, as they are very busy. However they do their very best."

People told us they had monthly newsletters to let them know what was happening in the home. They said they also had meetings where they could make decisions about menus, activities and any other issues that may arise.

### What we found about the standards we reviewed and how well Leftwich

## **Community Support Centre 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**

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

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

The provider was meeting this standard. People experienced care, treatment and support that met their needs and protected their rights.

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

The provider was meeting this standard. 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.

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

The provider was meeting this standard. People were cared for by staff who were supported to deliver care and treatment safely and to an appropriate 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 was meeting this standard. The provider had an effective system in place to regularly assess and monitor the quality of service that people receive.

## **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

We spoke with eight people living in the home. People told us they felt very comfortable and cared for. They said they knew all about the home before they came to stay for respite. Comments included "I was given lots of information about the home before I came to stay", "I was given a brochure about the home and details of how I would be looked after.;" "staff asked me what name I liked to be called so I told them I liked to be called by my shortened name. Everyone calls me that now.;" "I was told about this home before I came here. I was given details of the care provided and it turned out to be better than I expected, it's great here."

#### Other evidence

We spoke with four care staff and the manager about how they promoted privacy and dignity for people who used the service. The manager said that all staff had received training on maintaining privacy and dignity as part of their induction. Staff told us that they were trained and supported to understand the needs of the people in their care. Staff gave examples of how they had been trained to respect people as individuals. This included respecting confidentiality, moving and handling, use of language, body language and personal care procedures.

People told us that the staff always treated them with respect. Staff gave us examples

of how they ensured that people's privacy was protected, for example, when undertaking personal care they would ensure that the room door was closed and nobody would be able to see into the room to protect the person's privacy. Staff further demonstrated their understanding of good practice in this area by explaining about not invading people's personal space unnecessarily, especially whilst offering personal care to people.

Staff said that details of people's choices, capabilities and wishes for the future were recorded during the assessment process before admission and transferred to a care plan.

Staff told us that they read the care plan and speak with the service user who needed support to find out how they wanted the care and support to be carried out and would be guided by them.

**Our judgement**

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

## 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

The people using the service said that they were happy staying in the home. Comments included; "I am fine", "I am very happy here" , "I have been back here many times for a short break", "they provide excellent care and comfort", " staff are kind and I love it here." "Good food, good staff, good company." Relatives of people living in the home told us that they felt staff treated people with respect and made sure people got the social, health care and reassurance they needed. Comments included, " Staff treat people with respect and provide good care and stimulation."

##### Other evidence

People who were in need of short term respite care would receive a pre-admission assessment to ascertain whether their needs could be met. This would be done wherever the person was; this could include their own home or another care setting such as a respite centre or a hospital. As part of this process the home would also get the person's family, social worker or other professionals to add to the assessment if it was necessary. We looked at some of the pre-admission paperwork that had been completed for people who had recently moved into the home and could see that assessments had been completed and included information about personal preferences and choices such as what the person preferred to be called. A relative of a person living in the home told us that they had been fully involved in the pre admission assessment and staff had taken full details of past and present needs before they offered a placement in the home. Staff said they needed to carry out this process to make sure they had the staff, skills and equipment to meet all assessed needs.

Each person using the service had a care plan that was written from the information gathered during the assessment. The plans provided the details of the individual's needs, any risks identified and the care that they required.

We looked at some of these to see what support people needed and how this was recorded. We saw that each plan was personalised and reflected the needs of the individual. We also saw that the plans were written in a style that would enable the person reading it to have a reasonable idea of what help and assistance someone needed at a particular time. The plans were up to date and held full information about peoples past lifestyle and wishes for the future.

Daily contact sheets were completed by the staff when tasks had been undertaken. All the documents seen contained good accounts of these tasks and were well written

Visits from other health care professionals, such as district nurses and GPs were recorded so staff members would know when these visits had taken place and why. The manager and staff tried to ensure that the person understood the arrangements made for their care and support by way of discussion with them or their family and knew about the choices and opportunities open to them.

We could see that the home's staff members were working closely with the person and, where appropriate, their representatives.

The staff members we spoke to could show that they had a good understanding of the people they were supporting and they were able to meet their various needs. We saw that they were interacting well with people in order to ensure that they received the care and support they needed.

### **Our judgement**

The provider was meeting this standard. People experienced care, treatment and support that met their needs and protected their rights.

## 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

We did not receive any direct comments about this outcome area.

##### Other evidence

The home had an adult protection procedure [now called safeguarding] that complied with all of the relevant legislation and good practice guidelines. This is designed to ensure that any possible problems that arise are dealt with openly and people are protected from possible harm.

The manager told us that any safeguarding issues would be reported to both the local authority and CQC.

Staff members received training in recognising abuse and how to report an incident of abuse or a suspicion of abuse. This was confirmed in discussion with the staff members on duty during our inspection and from the training records that we were shown whilst in the home.

##### Our judgement

The provider was meeting this standard. 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.

## 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 the staff were kind and helpful and were able to provide a good level of care and support. The people we spoke to told us that their needs were being met by the staff members and that they did not have any concerns. Comments included, "The staff are good", "staff are kind and helpful", "staff assist me when I need help". We sometimes have to wait a while for staff to assist us, as they are very busy. However they do their very best."

##### Other evidence

All new staff members had completed an induction training programme so they had the skills they needed to do their jobs effectively and competently. This induction also included an introduction to the job they would be doing and as part of it they shadowed existing staff members and were not allowed to work unsupervised, [shadowing is where a new staff member works alongside either a senior or experienced staff member].

The manager and administrative staff showed us staff training records. We looked at the records which showed us that staff had received mandatory training in areas such as safeguarding and moving and handling.

Staff told us they were very busy and on occasions the staffing levels were just about adequate to enable them to carry out their varied tasks within the home. However they said they received training and support to make sure they could meet all the assessed needs of the people living in the home. One staff member told us that staff were supported by the organisation to develop their skills by encouraging them to gain NVQ

qualifications. Staff briefing meetings, senior care meetings and monthly staff meetings were held on a regular basis to update staff as to any changes that may have occurred within the home.

The staff members had supervision meetings [these are regular meetings between an employee and their line manager to discuss any issues that may affect the staff member; this would include a discussion of ongoing training needs]. Supervision records viewed identified that all staff had received regular structured supervision sessions as an ongoing process. Records also showed that staff meetings were held regularly.

**Our judgement**

The provider was meeting this standard. People were cared for by staff who were supported to deliver care and treatment safely and to an appropriate 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 they had monthly newsletters to let them know what was happening in the home. They said they also had meetings where they could make decisions about menus, activities and any other issues that may arise.

##### Other evidence

Leftwich community support centre had a variety of quality assurance systems available to assess the quality of the service it was providing to people. This included 'service users' forums And quarterly visits from senior managers from Cheshire local authority. The unit manager provided documentation that identified she also carried out monthly audits to include staffing, cleaning rotas, menus, care plans and activities.

The manager and senior staff told us they spoke to the people living in the home on a daily basis to ensure they had their say.

Complaints forms were available in the foyer of the premises as was the compliments or concerns book. Examination of this evidenced that the book held many compliments and thank you cards which held the staff and services provided in high regard.

Comments included" Thanks you from the bottom of my heart for all your care support and help", "Knowing my Nan was surrounded by such caring people was a huge comfort to myself", " All your hard work will never be forgotten."

##### Our judgement

The provider was meeting this standard. The provider had an effective system in place

to regularly assess and monitor the quality of service that people receive.

# 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

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