

Review of compliance

Camellia Care (Chandlers Ford) Limited Valley Lodge Care Home	
Region:	South East
Location address:	3 & 5 Valley Road Chandlers Ford Eastleigh Hampshire SO53 1GQ
Type of service:	Care home service without nursing
Date of Publication:	January 2012
Overview of the service:	<p>Valley Lodge is privately owned and managed registered care home offering care and support for up to thirty residents some of whom may have dementia.</p> <p>The home is situated in a quiet residential area in Chandlers Ford, not far from shops and local public facilities.</p>

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

Our current overall judgement

Valley Lodge 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 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 4 January 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

People told us they are happy living at the home. They receive the care and support they need in a way they prefer because staff listen to their wishes and involve them in care planning processes. They told us there was always sufficient staff available to provide them with the care and support they need. They commented that the home arranges for them to see health care professionals such as General Practitioners (GP's) and Community Nurses when they need to.

People confirmed that they are able to influence the running of the home in a variety of methods that include formal meetings with staff, general discussions and care plan reviews.

They told us they enjoy the meals provided at the home. There was always sufficient food and a drink available to meet their requirements.

People told us the home is always clean and tidy. The home is kept warm at all times and provides a homely environment for them to live in.

People told us that if they have any problems or concerns they can talk to staff about it and the problem will always be resolved. Relatives of people using the service also told us that any concerns raised with the home would be resolved promptly.

What we found about the standards we reviewed and how well Valley Lodge Care Home 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 views of people using the service are respected, with their choices about daily life being acknowledged. Care practices and the environment the home means the privacy and dignity of people is upheld. Overall, we found that Valley Lodge Care Home was meeting this essential standard.

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

People using the service have their care provided in the way they prefer because they are involved in the care planning processes. Arrangements are in place to ensure their health needs are monitored and where appropriate referrals to health care professionals are made. Overall, we found that Valley Lodge Care Home was meeting this essential standard.

Outcome 08: People should be cared for in a clean environment and protected from the risk of infection

People lived in a clean and hygienic home. Practices at the home ensured the risks of ill health due to infections at the home were minimised. Overall, we found that Valley Lodge Care Home was meeting this essential standard.

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

The home had a range of staff in sufficient numbers to meet the needs of people using the service. Overall, we found that Valley Lodge Care Home was meeting this essential 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 quality of care provision was monitored and improvements were made when concerns had been identified. Monitoring the quality of the service included obtaining the views of people using the service and their relatives using a range of methods. Overall, we found that Valley Lodge Care 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 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 told us they were able to make choices about their daily routines. This included what time they got up and went to bed and what they wished to eat at meal times.

We were told by people using the service that care and support was given in the way they liked because staff discussed this with them and listened to their views and wishes.

During our visit people were observed being spoken with and supported in a sensitive, respectful and professional manner. People were addressed by their preferred name, this was confirmed in conversations we had with people who use the service.

Other evidence

Care plans documented people's wishes and preferences in relation to how their care was provided, how they liked to spend their time and how they preferred to be supported. People and their representatives chose how often to be involved with the review of their plans. Relatives confirmed they regularly met with staff at the home to review the care plan with their family member.

Staff we spoke with told us that it was people's own choice when they got up and when

they wanted assistance with personal care. Relatives told us that staff at the home allowed their family members to make their own decisions that included rising and retiring times, how to occupy their time, whether joining in with activities, spending time on their own in their private rooms or socialising with other people living at the home.

Care was only provided in the privacy of people's bedrooms or in bathrooms, ensuring the privacy and dignity of people was upheld. Most bedrooms were single occupancy, which assists with ensuring people have their privacy and dignity maintained whilst receiving care. Bedrooms that were not single occupancy had screening to promote privacy. At the time of our inspection shared bedrooms were used by married couples.

During our visit we saw that people were spoken with and supported in a sensitive, respectful and professional manner.

Our judgement

The views of people using the service are respected, with their choices about daily life being acknowledged. Care practices and the environment the home means the privacy and dignity of people is upheld. Overall, we found that Valley Lodge Care Home was meeting this essential 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

We were told by people using the service that staff at the home helped and supported them to meet their personal and healthcare needs in the manner they preferred. People told us that if they were feeling unwell staff at the home contacted the relevant health care professional to attend to them; this could be a community nurse or General Practitioner (GP).

We observed that people were engaged in social interaction whilst sitting and chatting with each other in the lounge areas. Some people told us about their individual hobbies that they are able to continue with, such as sewing and listening to their choice of music.

People told us that they felt well cared for, with the home always being warm and comfortable and food provision always met their likes and dislikes.

Other evidence

We looked at the care plans and care records for three people using the service. They contained assessments of their needs, and clear guidance for staff about how these needs should be met. Monthly risk assessments using professionally recognised tools were completed for tissue viability, nutrition, moving and handling and falls. Where risks had been identified, a care plan detailed the actions to be taken to reduce the impact of any risk to the person.

There were clear guidelines about the action staff should take to meet people's

emotional and mental health needs; this included the action to support someone when they were experiencing periods of distress or challenging behaviour. During observations of staff interactions with people using the service it was evident they had a good understanding about how to manage each person's mental health needs so as not to cause them any distress.

Some people had specific medical conditions that if not managed in a safe manner would cause them significant ill health. There were clear guidelines in the care plans about the monitoring and management of that condition. This included clear details about when medical support would need to be requested. Records indicated that these guidelines were being followed.

The manager told us that following some concerns with people's skin integrity the home had revised their policy for seeking assistance from the community nursing team. This had meant that assistance and request for pressure relieving equipment is now sought when people are identified as at risk of skin breakdown rather than waiting till visual signs such as red skin are identified. Care plans detailed the pressure relieving equipment each person needed. It was observed this equipment was available and being used for the individual it was provided for.

There were assessments of people's nutritional needs including their likes and dislikes. There were guidelines about any support people needed with eating and drinking. When we spoke with relatives they told us that their family member always enjoyed the meals provided at the home and that there was always sufficient food and drinks available. Care plans were reviewed monthly by staff at the home and reviewed regularly with the person and their relative to ensure their involvement.

We had discussions with staff members about the care plans. They described how the care plans and records informed them about the care they needed to provide and changes in people's conditions so they could monitor and assess if they needed medical attention. They told us that relevant health care professionals are contacted if people are unwell. Relatives we spoke with confirmed that health care professionals such as GP's and community nurse are contacted if their family member is unwell.

Activities and social stimulation is usually arranged by an activity coordinator. However at the time of our inspection they did not have an activity coordinator. A new coordinator was due to commence employment during January 2012. Staff told us that whilst there had been no activity coordinator they had been facilitating activities such as exercises and games. Relatives told us that for people who did not like to join group activities staff always ensured the person had social stimulation on a one to one basis. This included discussions about the person's areas of interests, providing them with television programmes, DVD's and music that met their interests.

Our judgement

People using the service have their care provided in the way they prefer because they are involved in the care planning processes. Arrangements are in place to ensure their health needs are monitored and where appropriate referrals to health care professionals are made. Overall, we found that Valley Lodge Care Home was meeting this essential standard.

Outcome 08: Cleanliness and infection control

What the outcome says

Providers of services comply with the requirements of regulation 12, with regard to the Code of Practice for health and adult social care on the prevention and control of infections and related guidance.

What we found

Our judgement

The provider is compliant with Outcome 08: Cleanliness and infection control

Our findings

What people who use the service experienced and told us

People told us that their room was cleaned regularly and they were happy that the home was kept clean.

Other evidence

When we walked around the home during our visit, we saw that it was clean and tidy. There was antiseptic gel available and hand-washing facilities for staff and visitors were in place and well stocked. We saw that waste was being collected and disposed of appropriately.

Gloves and aprons were easily available in all areas of the home for the use of staff members. There was sufficient hand cleaning facilities throughout the home. Bathrooms and toilets had soap dispensers and paper towels.

Staff told us they had completed training about the control and prevention of infection. Records identified that training is provided annually to ensure staff are kept up to date about infection control practices.

The manager was using the Health and Social Care Act 2008 Code of Practice on infection control and other related guidance. Monthly audits of the service had been completed that included cleanliness and infection control. Action was taken to address any shortfalls with following audits identifying whether action had been completed.

Relatives told us the home was always clean and tidy.

Our judgement

People lived in a clean and hygienic home. Practices at the home ensured the risks of ill health due to infections at the home were minimised. Overall, we found that Valley Lodge Care Home was meeting this essential 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 there were enough staff at the home to help them when they needed it. They told us that if they asked for help they did not have to wait long for a staff member to respond.

Other evidence

We looked at the staff rota for the month of December 2011. The rota detailed the time staff were working and in what capacity. We looked at the rota's for the past month. They indicated there was always four care staff in the morning, three care staff in the afternoon and two care staff on duty at night. Both the deputy manager and manager were on duty during the daytime five days a week to provide support and assistance. An on call system meant that for times when they were not at the home, staff were always able to contact one of them for support and assistance. To ensure people had their needs met the home had arranged that a member of the afternoon staff always remained on duty until late evening.

There was always a cook on duty during the day time and a cleaner six days a week. Prior to the previous activity coordinator leaving, there had been an activity coordinator on duty five days a week. We were told this would be the same once the new activity coordinator commenced employment. It was noted that staffing numbers remained consistent over the Christmas holiday and bank holiday periods. This ensured that people's needs were met over the festive periods.

During conversations with staff they told us they felt there was enough staff on duty at

any one time. Visitors also told us they felt there was sufficient staff around when they visited their relatives at the home. We observed that call bells were being answered efficiently and that staff were able to spend time to interact with people in a positive manner.

Our judgement

The home had a range of staff in sufficient numbers to meet the needs of people using the service. Overall, we found that Valley Lodge Care Home was meeting this essential 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 for their views about the service. They said staff listened to them and tried to respond to any views or comments they made.

Relatives we spoke with confirmed that they were asked to complete a satisfaction survey annually. They also told us that they were able to speak with the manager about any concerns or views they have about the running of the service which she responded to promptly.

Other evidence

Processes were in place for monitoring the quality of the service provided at Valley Lodge Care Home. Satisfaction survey's for people using the service, their relatives, health care professionals and staff members are completed annually. Results from these surveys were available at the home and on the home's website for people to view. The last survey had been completed in spring 2011. This indicated that generally people were satisfied with the service provided by the home. Further opportunities were available for people to express their views about the service provided during their care plan reviews.

The manager told us that information from incident reports and complaints were also utilised to instigate improvements in care practices and service provision. An example included the action taken to reduce the risk of people wandering into other peoples bedrooms at night. Pressure pads were placed outside these people's rooms so staff could identify when the person had left their bedroom. This meant they could guide that

person back to their bedroom where they were able to wander around independently if they wished to.

Monthly audits of the service were completed by the registered provider and a three monthly in depth audits of the care provision were completed by the provider's Head of Care.

The manager told us that resident meetings are held, but these are not very frequent. People's views and opinions are obtained by general one to one discussions and during care plan reviews.

Our judgement

The quality of care provision was monitored and improvements were made when concerns had been identified. Monitoring the quality of the service included obtaining the views of people using the service and their relatives using a range of methods. Overall, we found that Valley Lodge Care 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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