

# Review of compliance

## Four Seasons 2000 Limited Rosedale Manor Care Home

<b>Region:</b>	North West
<b>Location address:</b>	Sherbourne Road Crewe Cheshire CW1 4LB
<b>Type of service:</b>	Care home service with nursing
<b>Date of Publication:</b>	July 2012
<b>Overview of the service:</b>	Rosedale Manor is a two-storey purpose-built care home set in its own grounds. The home is in a residential area close to Crewe town centre, local shops and other facilities. On the ground floor, Willows unit provides accommodation for ten people with severe and enduring mental health needs and Woodlands unit provides accommodation and nursing care for 24 people with dementia. The first floor of

	the home provides nursing and personal care for 46 older people.
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# Summary of our findings for the essential standards of quality and safety

## Our current overall judgement

**Rosedale Manor Care Home 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 because concerns were identified in relation to:

- Outcome 01 - Respecting and involving people who use services
- Outcome 04 - Care and welfare of people who use services
- Outcome 07 - Safeguarding people who use services from abuse
- Outcome 14 - Supporting staff
- Outcome 16 - Assessing and monitoring the quality of service provision

### How we carried out this review

We reviewed all the information we hold about this provider, carried out a visit on 23 May 2012, 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

During our visit to the home we spoke with five people who live there. They told us they were looked after well and treated in a caring way with dignity and respect. For example, one person said; "The staff are very good and treat me well". Another said; "Staff here are friendly and they treat me with respect", and another; "Staff are always nice and show respect".

The people we spoke with all said they were happy living at the home. They spoke highly of the staff, saying they were kind and caring, worked hard, looked after them well and helped them when necessary. They also told us there were enough staff to meet their care and support needs. For example, one person said; "I enjoy being here. If you say you want something staff will get it for you". Another said; "If I need help I ask and staff will do anything I ask. When I ring my bell they come". Another said; "I am happy here. It is nice and comfortable and the company is good".

One area people were less happy about was the availability of things to do to keep them occupied. Four people raised this as an issue. One person said; "There is very little to do. We just sit and watch TV mostly". Another said; "I watch TV, socialise with others and go for walks. There are not many things put on by the home though".

## **What we found about the standards we reviewed and how well Rosedale Manor 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**

People's privacy and dignity were respected and their views were taken into account in the way the service was provided.

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

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

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

The provider responded appropriately to allegations of abuse and had taken reasonable steps to identify the possibility of abuse or prevent abuse from happening again.

### **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.

### **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.

## **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

During our visit to the home we spoke with five people who live there. They told us they were looked after well and treated in a caring way with dignity and respect. For example, one person said; "The staff are very good and treat me well". Another said; "Staff here are friendly and they treat me with respect", and another; "Staff are always nice and show respect".

#### Other evidence

The observations we made during our visit were consistent with the feedback we received from people living at the home. At all times we saw people were being treated well and with respect. Staff were listening to them and responding to them in a way that was sensitive to their needs. For example, during breakfast staff were asking people what they wanted to eat and when they had eaten if they wanted any more. We also saw one carer fetch a persons slippers and put them on in a caring and attentive way,

We looked at the care plans of four people who live in the home during our visit. All four included documentation showing each person had an initial assessment of their needs that involved them and/ or their families. We saw that information from initial assessments and further assessments on admission was used to help plan the care and support given so that it met each individual's expressed needs and preferences.

**Our judgement**

People's privacy and dignity were respected and their views were taken into account in the way the service was provided.

## 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 five people we spoke with said they were happy living at the home. They spoke highly of the staff, saying they were kind and caring, looked after them well and helped them when necessary. For example, one person said; "I enjoy being here. If you say you want something staff will get it for you". Another said; "If I need help I ask and staff will do anything I ask. When I ring my bell they come". Another said; "I am happy here. It is nice and comfortable and the company is good".

One area people were less happy about was the availability of things to do to keep them occupied. Four people raised this as an issue. One person said; "There is very little to do. We just sit and watch TV mostly". Another said; "I watch TV, socialise with others and go for walks. There are not many things put on by the home though".

##### Other evidence

All the people we saw during our visit looked well cared for. We saw staff responding to them as they needed and supporting them in a caring and safe manner. For example, people that needed help with moving were assisted in a way that kept them safe. People were also relaxed in the company of staff and we saw staff interacting with them in a caring and personalised manner, explaining things in a clear and friendly way.

During our visit we looked at the care plans of four people living at the home. All had appropriate risk assessments in place with documentation to demonstrate that measures to minimise the risks were being followed. For example, falls, pain, malnutrition, pressure sore and moving and handling risk assessments. Daily records

were complete. Where appropriate, documentation had been updated when an individual's needs had changed. Two of the people whose care plans we looked at had diabetes and one had a pressure sore. The provider may find it useful to note that although all three had these needs reflected in their documentation with measures identified to address them, none had specific care plans drawn up to meet these needs.

At the time of our visit the provider had introduced a new document called "My journal". Each person living in the home had one and it was intended to show interactions and contacts they had and made. It was kept in people's rooms. We looked at the journals of two people at the home. We saw these appeared to be more like progress reports with references to aspects of people's personal and intimate care. We were concerned about the use of the journals in this way and also who could be accessing this information and whether people had given consent to this. We discussed this with the home manager during our visit and he acknowledged that the journals were not being used as intended and that consent issues needed to be followed-up.

During our visit we spoke with the activities co-ordinator about activities available for people at the home. She said the hours available for this role had been reduced from 54 to 20. To cover this gap she said carers had been told they now had to do activities as part of their daily tasks. She said this was proving difficult to achieve due to the other demands placed on them and that often she had to help out to provide support to the carers herself. For example, in the week prior to our visit she said most of her time had been spent as a carer rather than providing activities. She told us she did do her best to facilitate some activities in the time she has available. For example, there was a church service once a month, bingo once a month, pets as therapy dogs visited every two weeks and children from the local school came to talk to people every week. However, she was concerned some people were bored and lacked stimulation. The provider may find it useful to note that though there was no evidence the lack of stimulation was causing any risk to people, it was not fully promoting their well being.

### **Our judgement**

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

## 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

All the people we spoke to who live at the home said they felt safe living there and they had no worries or concerns about their care.

##### Other evidence

At all times during our visit we observed people being looked after in a safe and caring manner.

Since the beginning of 2012 there have been five safe guarding concerns at the home. The home manager has notified CQC and social services appropriately of these concerns and given details of actions taken as a result. One incident was serious and following investigation by the provider was substantiated as neglect. The provider produced an action plan in response to this incident and progress on this was discussed at meetings held between the provider, health and social care professionals and CQC. Following the last meeting in March 2012 neither social services or the CQC had received updates on progress with these actions. We therefore checked on this as part of our May 2012 visit. We saw that the majority of actions had been completed or were in the process of being completed. We judged that good progress had been made which now needed to be sustained. Following our visit a full update was received from the provider.

As part of our visit we spoke with seven staff who work at the home. We asked them if they had safeguarding training and they told us they had and they were aware what to do if they suspected abuse or the risk of abuse.

The home manager told us that references and criminal records bureau (CRB) checks are required for all new staff. We checked the CRBs for the two most recently recruited staff and saw these had been appropriately completed.

**Our judgement**

The provider responded appropriately to allegations of abuse and had taken reasonable steps to identify the possibility of abuse or prevent abuse from happening again.

## 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

The people we spoke with told us staff looked after them well, worked hard and were kind and caring. They told us there were enough staff to meet their care and welfare needs. For example one person said; "Staff are good and look after me well. If I need help I ask and they will do anything I ask. When I ring my bell they come". Another said; "There is enough staff and there is a good team spirit".

##### Other evidence

During our visit we spoke with seven members of staff who work at the home. They all said they enjoyed working at the home, staff worked well together, supported each other and were supported appropriately by the home manager. All felt there were enough staff to meet people's needs. They told us how they worked together as a team if staff were off sick at short notice to ensure all people's needs were still met. One said; "We are a team that pulls together. We help each other out". This feedback is consistent with what we saw during our visit. We also staff working well together and a friendly and calm atmosphere at the home.

The staff we spoke with told us they had had a significant amount of hands on training during the three months prior to our visit. This included areas identified by health and social care professionals and the provider as being required. For example, pressure care, wound management, nutrition, safeguarding and falls prevention. The provider also required staff to complete some aspects of mandatory training via e-learning. Most of the staff said they found it difficult to find time to access this and were behind in completing updates. We spoke with the home manager about this and he acknowledged that a focus was needed on completing outstanding e-learning modules.

At the time of the visit we judged that staff training needs had been met but that this needed to be sustained with delivery of required e-learning training updates and continued hands on training as required.

Prior to our visit health and social care professionals had raised concerns about the lack of formal staff supervision and performance management at the home. The provider told us that this had been addressed and we checked this during our visit. All the staff we spoke with had had recent supervisions. We checked the provider's records and saw there were appropriately documented. We also saw nursing staff had had reflective learning sessions and where outcomes had yet to be achieved these were clearly documented with additional training and competency assessments planned. The home manager assured us that regular supervisions would continue to be planned for all staff. He also said that he had formal supervisions with his regional manager on a monthly basis.

**Our judgement**

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

## 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

We did not speak to people about this outcome area.

##### Other evidence

The home manager told us about the processes in place to assess and monitor the quality of service provided. The provider had a number of audit processes including a full quality audit every six months and monthly audits covering areas such as care plans and medication. We saw evidence these had taken place as required.

In the three months prior to our visit there had been a focus on ensuring care plans were appropriately completed at the home. At the time of our visit a manager from another home was undertaking full audits of all care plans. We saw evidence that these had been undertaken in two of the four care plans we looked at. We were told all audits would be completed within two weeks of our visit. We were told as part of this process learning had been shared with staff and they had been provided with refresher training so they could undertake future audits themselves. To assist the process an audit memoir and record tool had been put in place. We also saw documentation completed by the regional manager showing that a full audit of the management of a person with a pressure sore had recently been completed.

##### Our judgement

The provider had an effective system 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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