

Review of compliance

Stoneleigh Care Homes Limited
Copperdown Residential Care Home

Region:	West Midlands
Location address:	30 Church Street Rugeley Staffordshire WS15 2AH
Type of service:	Care home service without nursing
Date of Publication:	March 2012
Overview of the service:	Copperdown provides accommodation with personal care to 29 older people.

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

Our current overall judgement

Copperdown Residential 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 to check whether Copperdown Residential Care Home had made improvements in relation to:

Outcome 07 - Safeguarding people who use services from abuse
Outcome 21 - Records

How we carried out this review

We reviewed all the information we hold about this provider, carried out a visit on 22 February 2012 and talked to staff.

What people told us

We visited Copperdown to look for improvements in the areas where we had concerns at a previous visit.

At the previous visit people had told us that they liked living at the home. They said they liked the staff and that staff were always there to provide them with any support they needed.

Non compliance had been identified in Outcome 7 with regard to the reporting of safeguarding and the completion and review of some risk assessments. Staff training and knowledge of safeguarding was also found to be in need of update. Non compliance had also been identified in Outcome 21 with regards to care records being incomplete, assessments not being recorded and monitored and accident reporting not following the legal procedures.

At this follow up visit compliance had been achieved in both outcomes.

The service had provided us with an action plan following the previous visit to demonstrate improvements and compliance.

What we found about the standards we reviewed and how well

Copperdown Residential Care Home was meeting them

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

People who use the service are protected from abuse, or the risk of abuse, and their human rights are respected and upheld.

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

People who use this service can be confident that their records are well maintained, stored correctly and remain confidential.

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 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

On this occasion we did not discuss this outcome with people using the service.

Other evidence

Previously we saw that each person had a plan of care but these were very limited and did not include all areas of need and did not show how people liked their care providing. Records were not in place to show that people's needs and any risks were being assessed or monitored.

At this visit we saw that care plans had been reorganised and each individual had been reassessed to demonstrate that the individuals care was personalised and of their choice. Care records clearly stated people's need and where risks had been identified risk assessments had been put in place, for example falls and mobility.

Previously training records had shown that staff safeguarding training was overdue and some staff were not clear over safeguarding issues although were clear of their responsibility to make sure people were kept safe. The manager was also not fully aware of the safeguarding referral process and did not have a copy of the interagency safeguarding procedures. Staff had also not been aware of the home's whistle blowing procedures.

At this visit we were informed that all staff had received their safeguarding update training on 6 December 2012 and staff confirmed this with us. When we spoke with staff they were confident about safeguarding reporting and the use of the whistle

blowing procedure. The manager showed us that she had received a copy of the interagency safeguarding procedures and was now fully aware of the referral process.

Our judgement

People who use the service are protected from abuse, or the risk of abuse, and their human rights are respected and upheld.

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

On this occasion we did not discuss this outcome with people using the service.

Other evidence

Previously there were no records of risk assessments or ongoing evaluations of such areas as nutrition, continence and moving people safely. There were also no written records of assessments and plans to manage the risks to people.

At this visit we saw that people had individual risk assessments for falls, mobility, nutrition and continence. Their personalised care plan identified any issues of concern which then alerted the staff to commence a risk assessment which was evaluated monthly. There was evidence that this had been effective in two care plans that were looked at.

The home maintained a record of accidents including falls and since the previous visit they were now completing the legally required accident forms appropriately.

Previously the home was not completing notifications required by the commission but this had since changed and the manager was fully aware of the process. To assist this process the provider had agreed to install the internet in to the home.

Our judgement

People who use this service can be confident that their records are well maintained, stored correctly and remain confidential.

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

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