

Review of compliance

Norse Care (Services) Limited Burman House	
Region:	East
Location address:	Mill Road Terrington St John Wisbech Norfolk PE14 7SF
Type of service:	Care home service without nursing
Date of Publication:	June 2012
Overview of the service:	Burman House is registered for the regulated activity of 'Accommodation for persons requiring nursing or personal care' for up to 32 people. The service is registered not to provide nursing care.

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

Our current overall judgement

Burman House 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 6 June 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

All people that we spoke with said that their support and care needs were safely and appropriately met by respectful staff who were skilled and knowledgeable to do their job.

People said they were satisfied with the standard of their support and care. One person summarised this by saying, "Everything is lovely here, (including) the staff and the food. What more can you ask for?"

People also told us that they were given opportunities to make choices about how they spent their day, including the time they chose to get up and when they wanted to go to bed.

People we spoke with said they liked their room and said they felt "Safe". They told us that this was due to both the security of the premises and because how they were treated by the staff.

We used a number of different methods to help us understand the experiences of people using the service, because the people using the service had complex needs which meant they were not able to tell us their experiences. Before our visit on 06 June 2012, we spoke with a member of the local authority, who told us that they had no concerns about the standards of care and service provided at Burman House.

During our visit, we spoke with a visiting health care professional who told us that people who used the service had experienced a good standard of care and treatment.

What we found about the standards we reviewed and how well Burman House 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 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.

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 used the service were protected from the risk of abuse, because the provider had taken reasonable steps to prevent abuse from happening.

Outcome 10: People should be cared for in safe and accessible surroundings that support their health and welfare

The provider was meeting this standard. People who used the service, staff and visitors were protected against the risks of unsafe or unsuitable premises.

Outcome 12: People should be cared for by staff who are properly qualified and able to do their job

The provider was meeting this standard. People were cared for, or supported by, suitably qualified, skilled and experienced staff.

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 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

People who used the service understood their support and care choices available to them.

People we spoke with said that they were actively involved in making a choice of when they liked to get up and when to go to bed. They also told us that they were given a choice of when they wanted staff to support them with their personal care.

People also told us that they were aware of their risks of falls, especially when walking about. One person said that staff would remind them to use their walking aid, to reduce this risk.

All of the people we spoke with said that staff treated them in a kind and respectful way, including being called by their preferred name of address.

We did not speak with all of the people who used the service. However, we noted that staff interacted with people in a kind, attentive and respectful way.

Other evidence

People expressed their views and were involved in making decisions about their care

and treatment.

A review of three out of twenty-four sets of people's care records indicated that people had been involved in the decision-making process about how they chose to have their support and care needs met. Where the person was assessed to be unable to make a valid decision, due to their difficulties with understanding the information, their representative was actively involved with the process.

Mental capacity assessments were carried out and where the person was deemed not to have capacity to make a decision about their support, care and treatment, these were carried out in the 'best interest' of the person.

A visiting health care professional told us that there was a good standard of communication between the home and visiting health care professionals. They said that, in their view, this had enabled people to have the right amount of health information to make a valid decision about their care and treatment.

During lunch time, we observed how people were supported with taking their prescribed medication, including having information about the reason for it. The provider might find it useful to note that people were not given information about their medication. Although there was no evidence of risk, it meant that this did not allow people to make an informed decision to continue with their ongoing treatments.

Our judgement

The provider was meeting this standard. 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.

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

All of the people that we had spoken with told us that they were satisfied with the standard of their support and care. One person said, "It's lovely being treated here. People are lovely. That's the whole thing, isn't it?"

Other evidence

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

Through speaking with staff and a review of three out of twenty-four sets of people's care records, we found that there was work in progress to improve the standard of people's care records. Staff told us that these improvements had provided them with clearer guidance in how to support people with their care needs.

However, the provider may find it useful to note that there was inadequate guidance to inform staff how to 'monitor and review' a person's food and drink intake. We also found that, although end of life care plans noted people's funeral wishes, there was inadequate information about the person's choice of support, care and treatment during the terminal stage of their life. This meant that, although there was no identified safety risk, there was a risk posed to the quality of people's nutritional health and end of life care.

Risk assessments were carried out and care plans indicated measures were in place to manage these risks, including those associated with risks of falls, malnutrition and risks associated with people's medical conditions.

Although people we spoke with said they were unable to recall seeing their care plans, we noted that their personal information, including life histories and their choices in how they liked to spend their day, was recorded in their care records. The manager advised us that people were actively involved in drawing up and agreeing to their care plans.

To promote people's wellbeing, they were provided with opportunities to engage in social activities, including in-house games of 'Bingo' and joining in 'Sing-along' sessions. We also noted that, to celebrate the Queen's Diamond Jubilee, people had attended a village garden fete and had attended an in-house party.

Through speaking with staff, combined with a review of the minutes of the residents' meeting, held on 11 May 2012, we noted that arrangements were in place to improve the range of social activities, based on people's suggestions and social interests.

From speaking with people who used the service, a visiting health care professional and a review of people's care records, we noted that people were supported in accessing health care professionals.

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

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

People we spoke with said that they felt, "Safe" from the risk of harm. This was because the premises were secure and staff had treated them well.

Other evidence

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

Through speaking with staff we noted that they were aware of the behaviours that constituted abuse. They were also knowledgeable about their roles and responsibilities regarding safeguarding vulnerable adults from abuse (SOVA).

Examination of staff training records indicated that there was a system in place to ensure that staff attended refresher training in SOVA.

A SOVA policy was available for staff to follow the correct SOVA reporting procedures.

Our judgement

The provider was meeting this standard. People who used the service were protected from the risk of abuse, because the provider had taken reasonable steps to prevent abuse from happening.

Outcome 10: Safety and suitability of premises

What the outcome says

This is what people should expect.

People who use services and people who work in or visit the premises:

* Are in safe, accessible surroundings that promote their wellbeing.

What we found

Our judgement

The provider is compliant with Outcome 10: Safety and suitability of premises

Our findings

What people who use the service experienced and told us

The provider had taken steps to provide care in an environment that was suitably designed and adequately maintained.

All of the people we spoke with said they liked their room.

People had choices of where they would like to eat their meals. We also noted that people had a choice of where they would like to sit, including their room or communal lounges and other seating areas.

Other evidence

The provider had taken steps to provide care in an environment that was suitably designed and adequately maintained.

Examination of three out of twenty-four daily care records noted that evening security checks of people's bedroom windows were carried out to ensure that they were kept safe from the risk of intruders.

To promote people's privacy and dignity, all bedrooms were for single use only and were provided with a hand wash basin. Communal toilets and bathing facilities were provided with lockable doors.

All of the areas of the home, which were accessed by people who used the service, were safely located on the ground floor of the home.

Reviwed maintenance records indicated that remedial action was taken to ensure that people had access to safe water. Records were also maintained for fire safety tests and checks on temperatures of hot water accessed by people who used the service.

Through speaking with the manager, based on people's views and suggestions made during the residents' meeting held on 11 May 2012, arrangements were in place to improve the presentation of the under used garden areas. This was so that the improved garden areas would encourage people and their guests to visit.

Our judgement

The provider was meeting this standard. People who used the service, staff and visitors were protected against the risks of unsafe or unsuitable premises.

Outcome 12: Requirements relating to 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 staff who are fit, appropriately qualified and are physically and mentally able to do their job.

What we found

Our judgement

The provider is compliant with Outcome 12: Requirements relating to workers

Our findings

What people who use the service experienced and told us

Appropriate checks were undertaken before staff began work.

People we spoke with said that their support and care needs were safely met by staff who were skilled and knowledgeable to look after them.

One person said that the staff knew their needs and difficulties with remembering certain things. "They often have to remind me to take my walking frame. They know what I am like and they know they need to remind me." Another person said, "The staff are good. I get the treatment that I need (from them)."

Other evidence

Appropriate checks were undertaken before staff began work.

The manager told us that the recruitment and selection of staff was a 'shared' process between the home and the provider's human resources (HR) department. This included obtaining clear criminal record bureau checks and satisfactory health declarations.

Examination of recruitment files of two most recently recruited staff, indicated that some but not all of the required information was kept at the home for inspection purposes. However, we noted that the manager was given email assurances, by the provider's HR department, which recorded that all satisfactory information, about the member of staff, was obtained. The manager advised us that, once they had received these assurances, the member of staff was allowed to commence their employment to work with

vulnerable people.

Through speaking with the manager and staff there were no concerns about the suitability of current staff working at the home.

Staff told us that they felt they had the support and training to be skilled and knowledgeable to meet people's support and care needs in a safe and appropriate way.

From a review of people's care records and observations of how people were supported by staff, we noted that staff were both skilled and knowledgeable in meeting people's individual support and care needs.

Our judgement

The provider was meeting this standard. People were cared for, or supported by, suitably qualified, skilled and experienced staff.

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 who used the service, their representatives and staff were asked for their views about their support and care and they were acted on.

There were forums for people to feed back their experiences about how the service was run. This meant that people routinely had their views taken into account in the way the service was provided. In 2011, the provider carried out a questionnaire survey and asked people and their relatives for their views about their experiences of Burman House. Respondents of the survey considered that the service had performed well.

Well-attended residents' meetings were also held during which people were given the opportunity to express their views and make suggestions about the running of the service.

Other evidence

People who used the service, their representatives and staff were asked for their views about their support and care and they were acted on. There was evidence that learning from incidents / investigations took place and appropriate changes were implemented.

There was an accident/incident reporting system in place for the provider to analyse information received from the home and to take remedial action to prevent or reduce the risk of similar occurrences. However, through speaking with the manager and examination of records for accidents/incidents, including those for falls, there was a low number (less than three per person) of these occurring to currently warrant an analysis

of trends.

Audits were carried out for medication records to ensure people were in receipt of safe usage of medication.

As part of the home's internal quality assurance system, work was in progress to ensure that people received safe and appropriate care, supported by an improved standard of care records.

Our judgement

The provider was meeting this standard. 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

Document purpose	Review of compliance report
Author	Care Quality Commission
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