

Review of compliance

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Morpress Properties
The Thorns Retirement Home

Region:	North West
Location address:	1 Coastal Road Hest Bank Lancaster LA2 6DW
Type of service:	Care home service without nursing
Date of Publication:	January 2012
Overview of the service:	The Thorns is situated in Hest Bank near Lancaster, close to the Lancaster canal. The home provides accommodation and personal care for a maximum of fifteen older people. All bedrooms have en suite facilities and for most this includes a bath or shower, as well as a toilet and washbasin. There is a large lounge, a dining room and a

	<p>conservatory/entrance porch, with seating. There are lovely views from most windows and there is an attractive garden with a pond, at the front of the home.</p>
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Summary of our findings for the essential standards of quality and safety

Our current overall judgement

The Thorns Retirement 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 12 December 2011, observed how people were being cared for, talked to staff and talked to people who use services.

What people told us

On the day of our visit there were twelve people resident at the home.

People living at the home, told us that staff are always polite, helpful and kind and that they are encouraged and supported to make decisions and to maintain some independence. People were clearly very happy with the support and care provided. Comments included; "I couldn't be in a better place" and "I am happy with everything" and "Nothing is too much trouble."

Health care needs are addressed. One person told us that they had recently had a fall, that staff had been very concerned and had taken her to hospital for X rays and that although there was no serious injury, staff had remained very attentive since this accident. Another person told us that they had been very well looked after when they had a nasty virus and that staff had asked the GP to come.

The relatives we spoke to were also extremely happy with the quality of care provided. We were told that relatives are kept informed of any problems or health concerns, that they are always made welcome and that the staff and manager are very approachable.

We observed care staff carrying out their duties. The team appeared organised and there were sufficient numbers of staff on duty to meet the needs of residents.

What we found about the standards we reviewed and how well The Thorns Retirement 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 who used the service were able to make decisions about their care and support. Their privacy, dignity and independence were promoted.

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

People who used the service experienced safe and appropriate care and support that met their identified needs.

Outcome 09: People should be given the medicines they need when they need them, and in a safe way

People's medicines are safely managed by competent staff, which helps ensure their health, safety and wellbeing.

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

People living at the home were supported by staff who have been properly recruited.

Outcome 16: The service should have quality checking systems to manage risks and assure the health, welfare and safety of people who receive care

People living at The Thorns benefited from a well managed service, with systems in place to monitor the quality of service provided.

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 living at the home, told us that staff are always polite, helpful and kind. Two people told us that although hairdressers visit the home, they chose to visit a local hairdresser and to keep links with the village and that staff provided support with this. We saw that staff gave people choices regarding what they had to eat and drink, where they spent their time and what they did. Residents told us that they don't have to have the main meal and that they are asked what they would prefer and that there was plenty of choice.

Several people and their relatives talked about how they had first visited the home before making a decision about residency and that the home had a good reputation in the local community.

Other evidence

There is written information about the home available for prospective residents and people are encouraged to visit, meet the staff and look around the home.

Individual privacy and dignity is promoted. We saw that care plans describing the support required with personal care, include the importance of maintaining the privacy and dignity of the person. All bedrooms have an ensuite toilet and washbasin, with all

but three having a private bathroom with their own bath or shower. People are encouraged and supported to maintain their independence and to do as much as possible for themselves.

Most of the residents have links with the area or know someone who has lived at the home. Community links are supported. The local vicar visits to conduct communion and there are occasional coffee mornings, with people from the local community being invited. Visitors may know several people at the home, which makes for a family type atmosphere where everyone is included.

We saw that people have their clothes nicely laundered; their hair and nails attended to and can have their own furniture and personal items in their room. Each bedroom has a name plate, with the name of a tree or shrub instead of a number on the door and furnishings are of a very good quality. The dining room tables have linen cloths and napkins, table decorations and cruet sets. This attention to detail enhances the personal dignity of residents, with staff clearly being aware of the impact these things have on an individuals' feelings of self worth.

Files contain a personal profile and a completed lifestyles form for each person. These include information regarding family, hobbies, interests, communication and preferences. This information means that care and support are individualised to the person concerned and take into account their personality and preferences.

Our judgement

People who used the service were able to make decisions about their care and support. Their privacy, dignity and independence were promoted.

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 residents we spoke to were clearly very happy with the support and care provided at the home. We were told that some activities are provided, such as an entertainer who plays the banjo, someone who comes to do an exercise session, a knitting circle, visits by the mobile library and personal newspapers are delivered. Comments included; "I couldn't be in a better place" and "I am happy with everything."

Health care needs as well as social needs are addressed. One person told us that they had recently had a fall, that staff had been very concerned and had taken her to hospital for X rays and that although there was no serious injury, staff had remained very attentive since this accident. Another person told us that they had been very well looked after when they had a nasty virus and that staff had asked the GP to come.

The relatives we spoke to were also extremely happy with the quality of care provided. We were told that relatives are kept informed of any problems or health concerns, that they are always made welcome and that the staff and manager are very approachable. One relative, who lives a long way away, described how staff had followed up and sorted out some medical issues and that they were confident that any health concern would always be addressed.

Other evidence

Records show that assessments of need, risk assessments and care plans are in place. These address a wide range of areas including, diet, falls, health, hygiene, sleep and communication. We saw that risk assessments and care plans are altered as needs

change, such as for one person who now used a walking frame as opposed to a walking stick.

We saw records of contact with health professionals such as the GP or district nurse and that records of weight are maintained. Records such as these help staff to track any health concerns and monitor the outcome of any intervention such as a change in medication. We also saw evidence of staff seeking advice from health professionals.

Where possible the individual concerned or their relative or representative sign to confirm agreement of assessments and care plans.

Our judgement

People who used the service experienced safe and appropriate care and support that met their identified needs.

Outcome 09: Management of medicines

What the outcome says

This is what people who use services should expect.

People who use services:

- * Will have their medicines at the times they need them, and in a safe way.
- * Wherever possible will have information about the medicine being prescribed made available to them or others acting on their behalf.

What we found

Our judgement

The provider is compliant with Outcome 09: Management of medicines

Our findings

What people who use the service experienced and told us

We spoke to one person who looks after and administers their own medication. This person told us that they wanted to do this as they liked to be independent and only wanted staff to help them with certain aspects of care.

Other evidence

People are encouraged and supported to maintain their independence. We saw that there was a record of the risk assessment which had been undertaken regarding the person who managed their own medication, which had been signed by the individual. We also saw the mental capacity assessment for this person, confirming that they were able to make decisions about their care and welfare. The medication system and dispensing pharmacy had recently changed. A pharmacy assistant visited the home and spoke with this resident about the new system.

Another person at the home administers their own insulin. Staff prepare the correct dosage and observe the person as they inject their insulin, which provides a safety net of support, whilst supporting independence.

Medication is safely stored in a locked cabinet and is only administered by staff who have received appropriate training. We saw the record of staff who have received training and are able to administer medication. The medication administration records we looked had been completed correctly.

Our judgement

People's medicines are safely managed by competent staff, which helps ensure their health, safety and wellbeing.

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

We asked people living at the home if they felt that staff were capable and had the right abilities for their job. Without exception everyone we spoke to confirmed that staff know what they are doing and work in ways that meet the needs and preferences of those living at the home. We received much positive feedback about the staff team including; "They are very good" and "Nothing is too much trouble."

We observed care staff carrying out their duties. The team appeared organised and there were sufficient numbers of staff on duty to meet the needs of residents. Domestic, gardening and kitchen staff are also employed.

Other evidence

We looked at records for a new member of staff and saw that good checks take place before staff are employed at the home. These include references, a criminal records bureau disclosure, confirmation of previous training with copies of certificates and a check against the national list of people who have been deemed not fit to work with vulnerable people. These checks help to ensure that only suitable staff are employed at The Thorns.

The manager and the deputy manager work alongside care staff and are able to monitor and guide staff who are new to the team.

Our judgement

People living at the home were supported by staff who have been properly recruited.

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

The people living at the home told us that the manager and staff are approachable and that they feel confident that any concern or suggestion would be responded to. We spoke to two relatives who both told us that they have full confidence in the way the home is run.

Other evidence

This is a small care home, where the manager and the deputy manager work alongside care staff and have opportunity to speak to each resident on a daily basis. This means that any minor issues are dealt with as part of daily life at the home. As well as speaking with people individually, feedback surveys are also used to gain the views of residents and their relatives.

The manager and the deputy manager have a monthly meeting with one of the business partners who own the home. We saw records of these meetings, which look at all aspects of the service, including activities, staffing and the maintenance of the building.

There is a system of staff supervision in place and staff meetings also take place, giving good opportunities to share ideas for improvement or to discuss issues of concern.

We were told that people living at the home are involved in making decisions about improvements; having chosen the new slate for around the pond, the new garden benches, the new lounge chairs and the colour of paint in the hallway.

Risk assessments are in place and are reviewed. We saw records of the lift, fire equipment, electrical system, gas boiler, fire alarm and electrical equipment being checked and serviced. These regular checks help to ensure the safety of people living or working at the home.

The Food Standards Agency rated food hygiene at the home as '5 very good', this being the highest rating.

Our judgement

People living at The Thorns benefited from a well managed service, with systems in place to monitor the quality of service provided.

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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