

Review of compliance

Oakley Lodge Care Home Limited
Oakley Lodge Nursing Home

Region:	East
Location address:	55 Oakley Road Luton Bedfordshire LU4 9PX
Type of service:	Care home service with nursing
Date of Publication:	January 2012
Overview of the service:	<p>Oakley Lodge Nursing Home is a care home service with nursing.</p> <p>The home provides personal and nursing care for up to 6 people who have a learning disability, and who may also have dementia care needs.</p>

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

Our current overall judgement

Oakley Lodge Nursing 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 9 December 2011, checked the provider's records, 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

Some of the people that we met during our visit on 09 December 2011 did not use words to communicate; so we spent some time observing the support being provided to them.

At lunch time, we observed staff sitting alongside people, whilst they helped them with their meals. Assistance was provided at a relaxed pace, and people's dignity was maintained.

We noted that staff were patient and kind and understood the needs of the people that they were supporting.

People told us that they were happy and that they liked the staff.

The atmosphere in the home during our visit was quiet, calm and relaxed.

What we found about the standards we reviewed and how well Oakley Lodge Nursing 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 provider is compliant with this outcome. People using the service are respected and involved in making decisions about their care and support, as far as they are able to do so.

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

The provider is compliant with this outcome. People using the service experience safe and appropriate care and support.

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

The provider is compliant with this outcome. People using the service are protected from abuse, or the risk of abuse.

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

The provider is compliant with this outcome. The provider has systems in place to ensure there are sufficient numbers of staff with the right knowledge, to support people living at the home.

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 is compliant with this outcome. Systems are in place for assessing and monitoring the quality of service provision.

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

Some of the people that we met during our visit on 09 December 2011 did not use words to communicate; so we spent some time observing the support being provided to them.

At lunch time, we observed staff sitting alongside people, whilst they helped them with their meals. Assistance was provided at a relaxed pace, and people's dignity was maintained.

We noted that staff were patient and kind and understood the needs of the people that they were supporting.

The atmosphere in the home during our visit was quiet, calm and relaxed.

Other evidence

Some useful information about the home and about the support offered to people using the service, had been developed. A service user brochure included photographs to make it easier to understand for someone who might not understand written text.

Most of the people that we met during our visit used a limited amount of words to

express themselves; using facial expressions, sounds and gestures instead. We spent some time observing the support being provided to them over lunch time; to help us determine what it is like for people using the service. We took into account the outcomes for people using the service, people's levels of engagement and staff interactions. We observed some positive engagement between staff and people using the service. Staff demonstrated a good understanding of the needs of the people they were supporting, and communicated in a friendly but respectful manner.

Staff were seen to respect decisions made by people. For example, one person indicated that they had had enough of their lunch, and their plate was taken away. And one person who preferred to stay in their bedroom, was supported to eat their lunch in their bedroom, rather than in the communal dining area.

Everyone working in health and social care who may have to make decisions for people who lack capacity, has a duty to know about Mental Capacity Act 2005 deprivation of liberty safeguards. Records showed that some staff had received this training and further training for other staff had been booked.

Decisions that had been made on behalf of people who had been assessed as lacking capacity, had been clearly recorded; including the reason for the decision needing to be made. Records showed that input had been sought from people outside of the service, such as family members.

People using the service were being supported to maintain photograph albums containing photographs from social outings and special occasions. Photographs showed people enjoying themselves whilst participating in a variety of activities. The manager said that she planned to develop these albums to include more information about the person's past and social history.

Written records included information about people's preferences, for example in relation to food and making choices about what they like to do. Corresponding nursing care plans had been written in a person centred way, and placed an emphasis on a positive approach - recognising people's abilities and focusing on what they were able to do; rather than the things they could no longer do.

Our judgement

The provider is compliant with this outcome. People using the service are respected and involved in making decisions about their care and support, as far as they are able to do so.

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 did not request information from anyone using the service about this outcome during our visit on 09 December 2011.

Other evidence

We looked at records for two people using the service and found some useful information about their needs and preferences. There were references to corresponding risk assessments and separate health care records. Associated risks had been identified, such as the risk of falling, developing pressure ulcers and poor nutrition, and these were being regularly monitored.

A number of staff were seen prompting someone identified at nutritional risk to eat and drink, when they became preoccupied with another activity. And records that we looked at showed that the home had individual plans in place to prevent and manage pressure ulcers.

Updates had been included following a change of need, or to report on the outcome of a meeting with a health care professional. Care plans had been regularly reviewed to ensure they were still relevant.

The lunch prepared during our visit looked appetising and wholesome, and people using the service were seen to enjoy it. We noted that where soft food was required by someone using the service, that each component of the meal was blended separately; to enhance the presentation of the meal as far as possible. Care plans supported this

approach, and identified where people were at risk of choking.

People using the service are supported to attend external day care activities if they wish to do so. In addition, activities are offered both in house and within the community. The lounge walls were covered with artwork completed by people using the service, and during our visit people were supported to play games, do painting, colouring and threading wooden shapes together. One person went out to a Christmas party.

Contact with friends and families is encouraged and supported by various means. Plans had been made for one person to spend Christmas day with their family.

Our judgement

The provider is compliant with this outcome. People using the service experience safe and appropriate care and support.

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

We did not request information from anyone using the service about this outcome during our visit on 09 December 2011.

Other evidence

Appropriate systems, policies and procedures were in place to ensure people living in the home are protected from abuse, or the risk of abuse.

Records showed that the home works collaboratively with other services, teams and agencies in relation to safeguarding matters and arrangements were in place to look after people's monies and valuables; to safeguard them from potential financial abuse.

Training records showed that staff working at the home had received recent training regarding the safeguarding of vulnerable adults.

We observed staff treating people with respect throughout our visit.

Our judgement

The provider is compliant with this outcome. People using the service are protected from abuse, or the risk of abuse.

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 that they were happy and that they liked the staff.

We observed a positive rapport between staff and people living at the home. Staff were kind and provided appropriate comfort to people when they needed it.

Other evidence

We saw staff treating people with respect; speaking directly to them and explaining to them what they were doing as they provided assistance and support.

During our visit we observed there to be sufficient staff to meet the needs of the people living at the home. On the day of our visit there were five people living at the home and four members of staff; carrying out various roles including personal and nursing care, catering and administration. During the visit, the manager arrived to take one person out to a party; increasing the number of staff on duty to five.

A member of staff had been employed to work five days a week to do the catering and support people using the service with activities. This support enabled the nursing and care staff to spend more individual time with people using the service.

Staff were able to demonstrate that they understood the needs of the people they were providing support to. Training records showed that the staff had been trained in a number of important areas required to meet the needs of the people using the service. This included fire safety, moving and handling, safeguarding of vulnerable adults and

dementia awareness.

The Manager said she had experienced some difficulty in securing training in particular areas such as learning disability awareness, managing epilepsy, infection control and managing violence and aggression; but confirmed she was actively trying to source this for staff.

A training matrix showed that the provider had a system in place for identifying any gaps in training or when refresher training is due.

Our judgement

The provider is compliant with this outcome. The provider has systems in place to ensure there are sufficient numbers of staff with the right knowledge, to support people living at the home.

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 request information from anyone using the service about this outcome during our visit on 09 December 2011.

Other evidence

The manager had developed some feedback surveys to give people's families and other stakeholders the opportunity to feedback on the service provided. Comments that we read included:

"I love visiting my sister here at Oakley, she has settled in so well and the house is so homely and comfortable"; "I think the home is excellent" and "When we visit staff are usually carrying out activities with service users. Always attentive to individual needs....get the impression that staff really care about the service users and go the extra mile".

Because some of the people using the service did not use many words to communicate; the manager stated that feedback was generally obtained by observing people's behaviours and moods. The manager said that she intended to explore further methods to measure and record the satisfaction and contentment of people living at the home. People that we observed during our visit were provided with genuine affection and stimulation from the staff supporting them. People responded in ways that indicated that they were happy and enjoyed the company of the staff.

The manager advised that she had several monitoring tools in place to ensure the

health, welfare and safety of people using the service. These included staff supervision, medication audits and environmental checks.

No complaints had been received by the service in the last 12 months.

Our judgement

The provider is compliant with this outcome. Systems are in place for assessing and monitoring the quality of service provision.

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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