

Review of compliance

Countrywide Care Homes Limited Manor Park Care Home	
Region:	Yorkshire & Humberside
Location address:	Leeds Road Cutsyke Castleford West Yorkshire WF10 5HA
Type of service:	Care home service with nursing
Date of Publication:	September 2012
Overview of the service:	Manor Park is a care home that provides both residential and nursing care. There are three separate units within the home that are divided into nursing care residents, residential care residents and accommodation for people with dementia.

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

Our current overall judgement

Manor Park 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 to check whether Manor Park Care Home had taken action in relation to:

Outcome 04 - Care and welfare of people who use services

How we carried out this review

We reviewed all the information we hold about this provider.

What people told us

We undertook this visit to follow up a specific concern identified at a previous inspection relating to fluid balance charts. We did not obtain the information from people who use the service on this occasion.

What we found about the standards we reviewed and how well Manor Park Care Home was meeting them

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

People experienced care, treatment and support that met their needs and protected their rights. The provider was meeting this standard.

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 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 undertook this visit to follow up a specific concern identified at a previous inspection relating to fluid balance charts. We did not obtain the information from people who use the service on this occasion.

Other evidence

We undertook this visit to follow up a specific concern identified at a previous inspection relating to fluid balance charts. At this inspection we found that there was only one person at the care home who was currently assessed by a medical professional as needed additional monitoring of their fluid intake due to health concerns. We spoke to a nurse and to a member of care staff and both were able to identify the person who was receiving additional monitoring for fluid intake. We reviewed the care records of this person and found that due to concerns about their nutrition and hydration the home had involved other agencies. A respiratory nurse had carried out an assessment and specified a care regime in relation to the persons fluid intake which restricted the amount of fluid to be taken each day. This decision was clearly documented in daily records and also appeared as an update to the nutrition and hydration care plan. We review the fluid balance charts for this person and found that for each day since the decision was taken to restrict fluid intake a detailed record of fluids offered and taken had been recorded. We found that a running total of the fluid taken was also calculated and recorded and at the end of each day the sum total showed that the fluid being taken by the person was in line with that defined by the respiratory nurse.

Our judgement

People experienced care, treatment and support that met their needs and protected their rights. The provider was meeting this standard.

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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