

# Review of compliance

<p>HC-One Limited Blenheim Court</p>	
<p><b>Region:</b></p>	<p>Yorkshire &amp; Humberside</p>
<p><b>Location address:</b></p>	<p>Elm Lane Lane Top Sheffield South Yorkshire S5 7TW</p>
<p><b>Type of service:</b></p>	<p>Care home service with nursing</p>
<p><b>Date of Publication:</b></p>	<p>December 2011</p>
<p><b>Overview of the service:</b></p>	<p>Blenheim Court is registered to provide accommodation for 44 people who require nursing or personal care. The home is a two-storey building with lift access to the upper level. The home has both single and double room accommodation. The home is split into two wings consisting of the original building and an extension. The homes gardens are accessible to</p>

	<p>wheelchair users and there is a patio with seating area. The home is a short distance to local amenities such as shops, pubs and churches.</p>
--	-------------------------------------------------------------------------------------------------------------------------------------------------------

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

## Our current overall judgement

**Blenheim Court 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 28 November 2011, observed how people were being cared for, looked at records of people who use services, talked to staff, reviewed information from stakeholders and talked to people who use services.

### What people told us

Some people who live at Blenheim Court have some conditions that mean we had difficulty talking with them. Other people were able to express their views clearly. Due to people's communication needs we used informal methods of observation during the site visit. We sat with people in the lounges, observed care practices, and saw how staff and people interacted with each other.

People told us that they were generally happy living at the home and that they were satisfied with the care they received. People said, "I am well looked after here." "It's a marvellous place." "The staff are so nice."

We spoke with 5 relatives who were visiting the home and they confirmed that they were satisfied with the care provided. One told us "The staff are great, they think so much about the residents." And another confirmed that "The care is excellent, I have no worries and I sleep at night knowing 'Y' is being looked after."

We spoke with Sheffield Local Authority, Contracting and Commissioning Department and they told us that they had no concerns regarding contract compliance.

An authorised representative from Sheffield Local Involvement network (LINK's) visited the service this year. They reported on good practice especially around the standards of care and daily activities and felt people were well looked after.

### What we found about the standards we reviewed and how well Blenheim

## **Court 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**

There are systems in place to gain and review consent from people. People's privacy, dignity and confidentiality is recognised and care, treatment and support is offered.

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

We found people who use services experience effective, safe and appropriate care, treatment and support that meets their needs and protects their rights.

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

We found systems and processes in place to help ensure people who use services are protected from abuse, or the risk of abuse, and their human rights upheld.

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

There are sufficient staffing levels to meet people's health and welfare needs. People's health needs are met by trained competent 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**

We found good systems were in place to assess and monitor the quality of service provision so that people who use services will benefit from safe, quality care, treatment and support.

## **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

We observed that people were shown respect and their privacy and dignity was maintained. All staff spoke to people in a kind and friendly manner. We saw and heard staff carrying out personal care tasks in a discreet way.

People said they were happy living in the home and could choose what to do, when they wanted.

#### Other evidence

At this visit we spent a period of time sitting with groups of people in the lounge areas. The home has three lounges where people can sit with other people and their family and friends.

We were able to observe people's experiences of living in the home and their interactions with each other and the staff.

The atmosphere in the home was relaxed. Staff moved around the home, giving support and care to people whilst engaging in banter and conversation.

A number of people's friends and family visited during the course of the day, there was a lively atmosphere in the home. It was evident that people living in the home had a friendly relationship with staff members.

When we spoke to staff they were able to tell us how people were assisted with their care needs. The staff knew people well and were aware of how to respond to them. We also saw that people were involved and listened to by staff and requests made about their care were, where possible, accommodated.

We checked three care plans in detail during the site visit. We found all of the care plans were detailed in relation to people's preferences and choices. People and /or their representatives said they were aware of care plans and that they were involved in discussions and reviews about their care. This meant that people can have a say in how they received care or support. This consultation was confirmed and recorded as having taken place in the care plans we checked.

Care plans seen had information about who was involved in making best interest decisions about the person. One person's notes we reviewed contained a best interests assessment and letters from the local authority. The manager said nobody at the home was currently subject to a Deprivation of Liberty Safeguard (DOL's) provision.

### **Our judgement**

There are systems in place to gain and review consent from people. People's privacy, dignity and confidentiality is recognised and care, treatment and support is offered.

## 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 who we were able to communicate with told us that they were happy living at the home and that they were satisfied with the care they received.

One said "I am very well looked after here."

Relatives said that whenever they visited, people looked well cared for and there was always staff around to attend to people.

One relative took the time to write directly to us and said "My mum, since being admitted earlier this year has shown significant improvement and seems happy. When I visit I am struck by the homely, friendly and natural atmosphere of the home."

##### Other evidence

During our visit we found that people were provided with support when they needed it. We found that people were clean and wearing clean clothing. People told us they had received a good standard of personal care and support. There was respectful communication between staff and people who used the service and staff treated people in a kind manner.

People said they had regular contact with their GP and other health care professionals.

We checked the care files of three people.

The files contained good information about the person's biography, personality and their medical and support needs. People's individual needs and preferences were also reflected in the care plans seen.

Risk assessments were included within the documentation and included moving and handling and other risk factors, for example the use of bed rails. The care plans and risk assessments seen had been reviewed and updated as necessary.

We do have concerns over some issues relating to staff recordings in people's files. We found in all three plans checked that there were no written entries made by night staff for periods of between four days and /or several weeks. There was no evidence recorded that qualified nursing staff had assessed the person's overall condition or care delivery during the night.

The staff said that exception reporting is used by the night staff in people's care plans. This is when staff only record information on the evaluation sheet if there has been any changes or issues that have happened involving the person that night. They also said that night records were kept which showed what personal care each person had received during the night. These recordings were generally made by care assistants following routine checks made on people during the night. Staff recorded this information in a log book and not in people's individual care plans. Staff should be reminded that people's care/support plans are a legal document. The general approach to record keeping that courts of law adopt tends to be that 'if it is not recorded, it has not been done'.

The home employs two part time activities workers six days a week. The activities on offer included bingo, reminiscence, singing, card making, music and exercise. During our visit a number of people were enjoying a game of dominoes, later in the day people were painting and making Christmas cards. We spoke with the activities worker who was very enthusiastic about their role. They said they organised group activities and they also spent time on a one to one basis with individuals so that everybody receives some social support. The home has areas where old memorabilia is displayed and numerous photographs of previous social activities are available for people to see.

A visiting care professional said that they had visited Blenheim Court on a few occasions and said "I have found the atmosphere in the home to be warm and friendly with welcoming staff. People and their relatives I have spoken with have all said they are happy with the care here."

An authorised representative from Sheffield Local Involvement network (LINK's) visited the service this year. The LINK's role is to find out what people like and dislike about local health and social care services, and to work with those who plan and run them to help these services to improve.

The LINKs authorised representative reported on good practice especially around the standards of care and daily activities and felt residents were well looked after. They did recommend improvements to the environment and making better use of the gardens.

### **Our judgement**

We found people who use services experience effective, safe and appropriate care, treatment and support that meets their needs and protects 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 told us that they felt safe living in the home and had no worries or concerns. Relatives told us that they believed the home was a safe place for people to live. They said the environment was well maintained which helped to keep people safe. One relative added "The care is excellent, I have no worries and I sleep at night knowing 'Y' is being looked after."

##### Other evidence

We checked with the local adult safeguarding team to clarify how many safeguarding alerts regarding people who lived at the service had been made over the last year. They told us that two cases are currently being investigated and are yet to be concluded at case conference. They told us that the home works collaboratively with them and other agencies on safeguarding matters and attended safeguarding meetings as required. The manager told us: "We have safeguarding and whistle blowing policies in place". We saw these at the home.

We spoke with four staff. They were aware of adult safeguarding policies and procedures and what action they would take if they saw or suspected any abuse. We saw a training matrix that told us that staff had received adult safeguarding training. Staff we spoke to had knowledge of the Mental Capacity Act and Deprivation of Liberty legislation. Some staff said they had received recent training surrounding this area.

We reviewed how personal finances were managed at the home. The manager told us

that the home had a system to appropriately manage each person's 'personal allowance' and a sample of documentation was reviewed to demonstrate operation of the system.

**Our judgement**

We found systems and processes in place to help ensure people who use services are protected from abuse, or the risk of abuse, and their human rights upheld.

## 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 and their relatives told us that staff were available if needed.

During our visit we saw that staff were very visible around the home and were available to attend to people's needs when needed.

All of the people that we talked to praised the staff and said they were all nice, helpful and friendly.

One person said "I press my buzzer to call staff and they always come quickly."

##### Other evidence

On the day of the inspection there were 33 people living in the home. There was the registered manager, two qualified nurses and 6 care assistants on duty throughout the morning. There was also an activities worker, ancillary staff and a maintenance worker on duty. Staff told us that staffing numbers were the same on each day as they were on the day of the inspection.

Staff and the manager said they felt the current staffing levels enabled them to meet people's needs.

Our observations were that staff were able to meet people's support and care needs in a timely way. Although staff were busy they did not rush people and the atmosphere within the home was relaxed and friendly.

Staff said that they had received training in a number of topics including adult safeguarding and moving and handling. They said they were due to complete updated

and refresher training in some subjects. The training matrix confirmed this to us. We saw that the manager had highlighted the updated and refresher training that was required.

**Our judgement**

There are sufficient staffing levels to meet people's health and welfare needs.  
People's health needs are met by trained competent 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

Relatives said "We have a relative and resident meeting which are held every month or so. We talk about food, activities organised and other general issues about the home." We did not receive any other direct comments from people about this outcome area.

##### Other evidence

The homes manager had been in post for a number of years and is registered with CQC.

We saw evidence of internal auditing of the homes environment, services and records. An area manager visits the home on a monthly basis to carry out these audits. The manager also carries out regular audits. We saw evidence that issues requiring attention had been appropriately dealt with.

People who use the service meet with the management of the home on a regular basis. Minutes of meetings held were seen.

This will help to ensure that the provider listens to people's views and any concerns are acted on.

The service had carried out a recent 'Customer Satisfaction Audit'. We saw a copy of this. People had been asked their opinions about such things as the environment, food, activities, care, communication and staffing. The results of the audit had been entered into a report. The report showed the areas that people thought were very good and areas where people thought there needed to be improvements made. This was then

used to make any necessary changes to the way the home was functioning. The report showed that the home had scored a high percentage of positives throughout all areas.

Regular staff meetings were held and we saw minutes of these.

Staff working in the home told us that the manager was approachable and supportive. They said the manager always had the best interests of people at the forefront.

**Our judgement**

We found good systems were in place to assess and monitor the quality of service provision so that people who use services will benefit from safe, quality care, treatment and support.

# 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

<b>Document purpose</b>	Review of compliance report
<b>Author</b>	Care Quality Commission
<b>Audience</b>	The general public
<b>Further copies from</b>	03000 616161 / <a href="http://www.cqc.org.uk">www.cqc.org.uk</a>
<b>Copyright</b>	Copyright © (2010) Care Quality Commission (CQC). This publication may be reproduced in whole or in part, free of charge, in any format or medium provided that it is not used for commercial gain. This consent is subject to the material being reproduced accurately and on proviso that it is not used in a derogatory manner or misleading context. The material should be acknowledged as CQC copyright, with the title and date of publication of the document specified.

## Care Quality Commission

<b>Website</b>	<a href="http://www.cqc.org.uk">www.cqc.org.uk</a>
<b>Telephone</b>	03000 616161
<b>Email address</b>	<a href="mailto:enquiries@cqc.org.uk">enquiries@cqc.org.uk</a>
<b>Postal address</b>	Care Quality Commission Citygate Gallowgate Newcastle upon Tyne NE1 4PA