

Review of compliance

Royal Free London NHS Foundation Trust Edgware Community Hospital

Region:	London
Location address:	Burnt Oak Broadway Edgware Middlesex HA8 0AD
Type of service:	Acute services with overnight beds
Date of Publication:	October 2012
Overview of the service:	The Royal Free NHS Foundation Trust is one of a number of providers who have services at Edgware community hospital. Their services include the Kidney Care Centre and the Neurological Rehabilitation Centre.

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

Our current overall judgement

Edgware Community Hospital 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 5 September 2012, 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

When we undertook our inspection we visited two of the services provided by the Royal Free NHS Foundation Trust. These were the Kidney Care Centre (KCC) and the Neurological Rehabilitation Centre (NRC). In the KCC we spoke with eight patients. In the NRC we spoke with four patients.

At the KCC all of the patients we spoke with were very happy with the care they had received. They told us they felt that staff involved them in decisions about their care, were polite to them, and were able to meet their needs. They told us that they found the environment to be good and that it was always clean.

The following are examples of some of the comments we received from patients:

"I find it very nice."

"It is very clean. It is good."

"It is a beautiful place. I would recommend it."

At the NRC the patients we spoke with were generally positive about the care they had received. They told us they felt most staff were polite and helpful and that they were good at meeting their needs. They told us they had clear goals set for their stay and had good access to therapies to help them work towards these.

The following are examples of some of the comments we received from patients:

"It is very nice."

"The staff are 99.5% excellent."

"My stay has been very good. [I have] worked towards my discharge."

What we found about the standards we reviewed and how well Edgware Community Hospital 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's views and experiences were taken into account in the way the service was provided and delivered in relation to their care.

The provider was meeting this standard.

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.

Outcome 05: Food and drink should meet people's individual dietary needs

People were protected from the risks of inadequate nutrition and dehydration.

The provider was meeting this standard.

Outcome 06: People should get safe and coordinated care when they move between different services

People's health, safety and welfare was protected when more than one provider was involved in their care and treatment, or when they moved between different services. This was because the provider worked in co-operation with others.

The provider was meeting this standard.

Outcome 08: People should be cared for in a clean environment and protected from the risk of infection

People were protected from the risk of infection because appropriate guidance had been followed.

The provider was meeting this standard.

Outcome 11: People should be safe from harm from unsafe or unsuitable equipment

People were protected from unsafe or unsuitable equipment.

The provider was meeting this standard.

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

There were enough qualified, skilled and experienced staff to meet people's needs.

The provider was meeting this standard.

Outcome 14: Staff should be properly trained and supervised, and have the chance to develop and improve their skills

People were cared for by staff who were supported to deliver care and treatment safely and to an appropriate standard.

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 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

When we spoke with patients in the Kidney Care Centre they told us they felt the staff always spoke to them in a respectful and polite manner. They felt that staff were good at ensuring they understood what they were doing. The following are examples of some of the comments we received from patients:

"The staff are always polite."

"The staff are very good at speaking to you in a way you can understand."

They also told us that they felt involved in their care and making decisions. Some patients explained to us, how they felt they had been empowered by being trained to manage aspects of their care for themselves such as operating the dialysis machines.

When we spoke with patients in the Neurological Rehabilitation Centre they told us they felt involved in developing the goals they were working towards during their stay. Most of the patients also told us they felt staff listened to them and treated them in a manner that respected their dignity.

Other evidence

People's privacy, dignity and independence were respected. In both the areas we visited, patients told us they felt staff were good at maintaining their independence. When we observed care we saw staff speaking to patients in a respectful manner.

Kidney Care Centre

People were supported in promoting their independence and community involvement. The centre was using a model of care that allowed patients to take control of aspects of their care such as weighing themselves and taking other measurements.

Neurological Rehabilitation Centre (NRC)

People expressed their views and were involved in making decisions about their care and treatment. When people arrive on the unit they are given a questionnaire. We were told by staff that they then use this to work with the patient to prioritise what they want to do whilst they are on the unit and develop goals for their stay. A meeting will also be held with the family of someone if appropriate.

People who use the service were given appropriate information and support regarding their care or treatment. The unit had recently introduced a rehabilitation folder, which people had in their rooms. This included information on their progress against their goals. The unit was also currently in the process of developing a new patient information document. We saw a draft version of this and it provided an overview of what patients could expect from their stay on the unit.

People's views and experiences were taken into account in the way the service was provided and delivered in relation to their care. When people leave the NRC they are given a patient satisfaction survey to complete. We saw that the evidence from these surveys were being analysed and any areas for development were being identified. In the results we saw 80% had responded that they felt staff were kind and respectful.

Our judgement

People's views and experiences were taken into account in the way the service was provided and delivered in relation to their care.

The provider was meeting this standard.

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

When we spoke to patients in the Kidney Care Centre, they were very positive about the care they had received. The following are examples of some of the comments we received from patients:

"The care here is brilliant."

"The staff really involve you in the care."

"The care is excellent here."

"I have found the care here to be very good."

Most people felt they had good monitoring of their health. Patients told us they had regular appointments with the doctor to monitor their progress and they felt this worked well. However, some people felt these should happen on a more regular basis.

On the Neurological Rehabilitation Centre most of the patients we spoke with were happy with the care they had been receiving. They told us they had good access to therapies and that these had been effective:

"The therapies I have had have been excellent."

"I always get my physio."

They also told us that when the needed support, staff would respond to their call bell promptly.

When we asked patients about the activities available on the unit, none raised any concerns with us. One person told us, "There is enough to keep me occupied."

Other evidence

When we visited the Kidney Care Centre we observed that when patients asked for help, staff responded promptly. We also observed that all call bells were placed within reach of patients.

When we looked at the notes of patients on the unit there was evidence that their condition and health was being appropriately managed and recorded.

When we observed staff on the Neurological Rehabilitation Centre we saw that patient's needs were being met.

We looked at the care plans for three patients. These showed that a detailed pre-admission assessment was conducted. There was also evidence that appropriate risk assessments had been undertaken and plans put in place to reduce risks. For example, falls risks assessments were being undertaken.

Patient's needs were assessed and care and treatment was planned and delivered in line with their individual care plan. Each person who is admitted has an individualised plan developed, with specific goals to meet their needs. Progress against these was broken down into weekly steps.

Whilst on the unit there was evidence that there was good usage of a multi-disciplinary team in the development of goals and the delivery of patient care.

When we looked at the results of the patient satisfaction survey, which patients complete at discharge, 92% had responded they were satisfied with the care that they received.

People's care and treatment was planned and delivered in a way that protected them from having treatment without their agreement. If someone had been assessed as not having the capacity to make a decision, and where a decision was needed, multi-disciplinary best interest meetings were being held.

Our judgement

People experienced care, treatment and support that met their needs and protected their rights.

The provider was meeting this standard.

Outcome 05: Meeting nutritional needs

What the outcome says

This is what people who use services should expect.

People who use services:

* Are supported to have adequate nutrition and hydration.

What we found

Our judgement

The provider is compliant with Outcome 05: Meeting nutritional needs

Our findings

What people who use the service experienced and told us

When we spoke with patients in the Neurological Rehabilitation Centre they told us they were offered a choice of food, but it could sometimes be repetitive. The following are examples of some of the comments we received from patients:

"The food can be a bit repetitive, but it is okay."

"Food, there is enough."

"You are offered a choice of food. The menu is displayed on the board. The staff will help to serve it."

Other evidence

People were supported to be able to eat and drink sufficient amounts to meet their needs. When we observed a mealtime in the Neurological Rehabilitation Centre we saw that staff were providing patients with support and that, where required, people were provided with aids and adaptations to allow them to eat. We also saw staff asking people if they had enough to eat.

When we looked at people's care plans we saw that, where appropriate, patient's weights were being monitored. When patients were being fed by a PEG (percutaneous endoscopic gastrostomy) tube, this was being done appropriately. The unit was also conducting a weekly audit of nutrition. This looked at whether people had had appropriate choice and access to food.

People's food and drink met their religious or cultural needs. We were told that, if needed, food that met specific needs could be provided. On the day we visited one person had requested West Indian food and this had been provided.

When we visited the Kidney Care Centre we saw that the patients had access to drinks and snacks.

Our judgement

People were protected from the risks of inadequate nutrition and dehydration.

The provider was meeting this standard.

Outcome 06: Cooperating with other providers

What the outcome says

This is what people who use services should expect.

People who use services:

* Receive safe and coordinated care, treatment and support where more than one provider is involved, or they are moved between services.

What we found

Our judgement

The provider is compliant with Outcome 06: Cooperating with other providers

Our findings

What people who use the service experienced and told us

None of the patients we spoke with in the Kidney Care Centre raised any concerns with the sharing of information between the trust and other care providers. One person told us they felt there had been good sharing of information with their GP.

When we spoke with patients in the Neurological Rehabilitation Centre, one person told us that they had a clear discharge plan and that social services had been involved in the development of this.

Other evidence

In arranging discharges from the Neurological Rehabilitation Unit we were told that the team would work directly with the local social services team. The staff we spoke with felt this relationship was working reasonably well. They also told us they had been working to improve the written information provided to primary care colleagues on discharge.

The Community Neurological Conditions Management team was based at the same site and was jointly managed with the inpatient ward. Most patients continued to see this team after they had been discharged from the inpatient area.

There was also evidence the unit had developed links with other community groups. On the day we visited the unit 'Barnet Independent Living Service' was attending a coffee morning in the unit, providing information for people on accessing services.

Our judgement

People's health, safety and welfare was protected when more than one provider was involved in their care and treatment, or when they moved between different services. This was because the provider worked in co-operation with others.

The provider was meeting this standard.

Outcome 08: Cleanliness and infection control

What the outcome says

Providers of services comply with the requirements of regulation 12, with regard to the Code of Practice for health and adult social care on the prevention and control of infections and related guidance.

What we found

Our judgement

The provider is compliant with Outcome 08: Cleanliness and infection control

Our findings

What people who use the service experienced and told us

None of the patients in either of the areas we visited raised any concerns with the cleanliness of the units. They told us they felt the units were clean and that they felt the cleaners did a good job. The following are examples of some of the comments we received from patients:

"Cleaners work spotlessly. Really good"

"It is very clean. They are always cleaning."

"They have put on a clean sheet every day."

Other evidence

People were cared for in a clean, hygienic environment. When we visited we observed that both the Kidney Care Centre and the Neurological Rehabilitation Centre were clean and tidy. In both areas we visited we saw cleaning being undertaken. None of the staff or patients we spoke with raised any concerns with us regarding cleanliness.

When we observed staff we saw that they were washing their hands between patients. We also saw there was good access to gloves and hand gels

The Neurological Rehabilitation Centre was conducting daily self-assessment audits of its infection control procedures. There was evidence these had been undertaken. We saw the results of these for the previous month, which did not identify any concerns.

Our judgement

People were protected from the risk of infection because appropriate guidance had been followed.

The provider was meeting this standard.

Outcome 11: Safety, availability and suitability of equipment

What the outcome says

This is what people should expect.

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

* Are not at risk of harm from unsafe or unsuitable equipment (medical and non-medical equipment, furnishings or fittings).

* Benefit from equipment that is comfortable and meets their needs.

What we found

Our judgement

The provider is compliant with Outcome 11: Safety, availability and suitability of equipment

Our findings

What people who use the service experienced and told us

When we visited the Kidney Care Centre none of the patients we spoke to told us they had any concerns with the dialysis equipment. They told us they never had any problems and that if needed there were technicians who were always available. The following are examples of some of the comments we received from patients:

"I've never had any problems with the equipment."

"If there are problems, the technicians sort them out quickly."

None of the patients we spoke with on the Neurological Rehabilitation Centre raised any concerns with us regarding their access to specialist equipment.

Other evidence

People were protected from unsafe or unsuitable equipment. On the Kidney Care Centre there were technicians based on site to ensure the dialysis machines were maintained and any problems addressed. The unit had opened in the previous year and the equipment being used was new. None of the staff or patients we spoke with had any concerns regarding the equipment.

We were told by the technician that the machines were audited on a three-monthly basis. The water was also being tested on a three-monthly basis.

There was enough equipment to promote the independence and comfort of people who use the service. On the Neurological Rehabilitation Centre there was a fully equipped gym, which had a range of rehabilitation equipment. None of the staff or patients we spoke with raised any concerns with us regarding access to equipment. For example, we were told they had no problems in getting a pressure relieving mattress for a patient who required one.

Our judgement

People were protected from unsafe or unsuitable equipment.

The provider was meeting this standard.

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

When we visited the Kidney Care Centre the patients told us that they felt the staff were very good and that they always met their needs. However, some people felt that the unit would benefit from more staff. The following are examples of some of the comments we received from patients:

"There are always enough staff."

"Yes, there are enough staff here."

"They could do with some more staff, although I've never felt neglected."

"The staff are overworked."

On the Neurological Rehabilitation Centre the patients we spoke with told us they felt the staff were good. The following are examples of some of the comments we received from patients:

"Most of the staff are very keen and pleasant."

"The staff are very good and very nice."

Other evidence

On the day we visited the Neurological Rehabilitation Centre there were two qualified

nurses, one of which was the manager, and three healthcare assistants. We were told there should have been two registered nurses in addition to the ward manager, but they had not been able to get a member of staff to cover this vacant shift. When we spoke with staff they told us they regularly did not have their established number of staff. They told us it was difficult to meet the needs of the patients when there was only one qualified nurse on the shift. For example, two qualified members of staff are required to sign for controlled drugs. Therefore, staff were having to stay on beyond their shift to enable this to happen. When we spoke with the manager, they told us it was difficult to get staff to cover vacant shifts, but the management was supportive and they were allowed to use bank and agency staff if required. They also told us that they were currently in the process of recruiting more staff to fill the vacancies they had. However, the provider may wish to note that the unit did not have two registered nurses on its day shift regularly. In the previous month to our visit there had been nine shifts where there had only been one registered nurse. When we visited we did not find any evidence that reduced staffing was having a negative impact on patients.

When we visited the Kidney Care Centre there were five members of staff working. The staff we spoke with felt this was enough to meet the needs of the patients they had, but that any future increases in patient numbers would require more staff.

Our judgement

There were enough qualified, skilled and experienced staff to meet people's needs.

The provider was meeting this standard.

Outcome 14: Supporting 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 competent staff.

What we found

Our judgement

The provider is compliant with Outcome 14: Supporting workers

Our findings

What people who use the service experienced and told us

We spoke to patients using the services but their feedback did not relate to this standard.

Other evidence

The provider had safeguarded high standards of care by creating an environment where clinical excellence could develop. We spoke with 13 members of staff when we visited Edgware community hospital. Most told us they felt well supported and had good access to training. All of the staff we asked had an annual appraisal. None of the staff we spoke with raised any concerns with bullying.

In the Kidney Care Centre we spoke with five members of staff. They told us they felt they had a good, supportive team. They also told us they felt they had good links with other parts of the trust and that they felt part of the wider team. For example, we were told that some members of staff will attend joint meetings with staff in the trust.

In the Neurological Rehabilitation Centre we spoke with eight members of staff, including nurses and therapists. They told us they felt well supported in their role. They told us they had a monthly team meeting and they would feel confident in raising any concerns they had. They also told us they felt they had good access to training. When we looked at the percentages of staff that had completed mandatory training courses, we saw that most staff had completed these. For example, 100% of staff had completed level 1 training in safeguarding adults and 78% in level 2.

Our judgement

People were cared for by staff who were supported to deliver care and treatment safely and to an appropriate standard.

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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