

# Review of compliance

Northumberland Tyne and Wear Foundation Trust  
Brooke House

<b>Region:</b>	North East
<b>Location address:</b>	Brooke House Hetton Rd Houghton le Spring
<b>Type of service:</b>	Hospital services for people with mental health needs.
<b>Date the review was completed:</b>	29/03/2011
<b>Overview of the service:</b>	Brook House is home providing rehabilitation services for up to 10 people who have mental disorders. It is a purpose built home The service is registered with the Care Quality Commission for the regulated activities of treatment of disease disorder and injury and the assessment or medical treatment of people detained under the mental health act 1983.

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

## What we found overall

**We found that Brooke House was meeting all the essential standards of quality and safety we reviewed but, to maintain this, we have suggested that some improvements are made.**

The summary below describes why we carried out the review, what we found and any action required.

## Why we carried out this review

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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 29/03/2011, observed how people were being cared for, talked to people who use services, talked to staff, checked the provider's records, and looked at records of people who used services.

## What people told us

We visited this location on a weekday when all the people who lived at the unit were out doing a range of activities. We were able to talk to one person when they returned who was keen to show us the nice bedroom they had. The person told us that they could do lots of activities and that they liked living there.

## **What we found about the standards we reviewed and how well Brooke House was meeting them**

### **Outcome 1: People should be treated with respect, involved in discussions about their care and treatment and able to influence how the service is run**

Overall, we found that Brooke House was meeting this essential standard.

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### **Outcome 2: Before people are given any examination, care, treatment or support, they should be asked if they agree to it**

This essential standard was not inspected

### **Outcome 4: People should get safe and appropriate care that meets their needs and supports their rights**

Overall, we found that Brooke House was meeting this essential standard but, to maintain this, we have suggested that some improvements are made.

### **Outcome 5: Food and drink should meet people's individual dietary needs**

This essential standard was not inspected

### **Outcome 6: People should get safe and coordinated care when they move between different services**

This essential standard was not inspected

### **Outcome 7: People should be protected from abuse and staff should respect their human rights**

This essential standard was not inspected

### **Outcome 8: People should be cared for in a clean environment and protected from the risk of infection**

Overall, we found that Brooke House was meeting this essential standard.

### **Outcome 9: People should be given the medicines they need when they need them, and in a safe way**

Overall, we found that Brooke House was meeting this essential standard.

**Outcome 10: People should be cared for in safe and accessible surroundings that support their health and welfare**

Overall, we found that Brooke House was meeting this essential standard.

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

This essential standard was not inspected

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

This essential standard was not inspected

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

Overall, we found that Brooke House was meeting this essential standard.

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

Overall, we found that Brooke House was meeting this essential standard.

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

This essential standard was not inspected

**Outcome 17: People should have their complaints listened to and acted on properly**

This essential standard was not inspected

**Outcome 21: People's personal records, including medical records, should be accurate and kept safe and confidential**

This essential standard was not inspected

## **Action we have asked the service to take**

We have asked the provider to send us a report within 14 days of them receiving this report, setting out the action they will take to improve. We will check to make sure that the improvements have been made.

**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 1: 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 1: Respecting and involving people who use services

### Our findings

**What people who use the service experienced and told us**  
We visited this location on a weekday when all the people who lived at the unit were out doing a range of activities. We were able to talk to one person, when they returned, who was keen to show us the nice bedroom they had. The person told us that they could do lots of activities and that they liked living there.

**Other evidence**  
We saw that details of the next community meeting were displayed in the communal area along with the minutes of the previous meeting. Points of view cards were also available for people and their relatives to return in a box provided. A board in the lounge highlighted all the special events or activities planned for the next month. In the hall area there was a wide range of information for people to access, this included information on bus timetables, local housing and general health promotion material.  
The manager told us that the unit organises a meeting for carers every 2 months where information and support could be provided if requested.  
The manager told us that every week each person had protected 1 to 1 engagement

time with their named nurse where any concerns about their care could be discussed. This was confirmed when we checked the care records for three people. Each person had an agreed programme of activities, a copy of which was displayed in each persons bedroom.

People had access to independent mental health advocates (IMHA) and one person was using this service.

**Our judgement**

Overall, we found that Brooke House was meeting this essential standard.

# Outcome 2: Consent to care and treatment

## What the outcome says

This is what people who use services should expect.

People who use services:

- Where they are able, give valid consent to the examination, care, treatment and support they receive.
- Understand and know how to change any decisions about examination, care, treatment and support that has been previously agreed.
- Can be confident that their human rights are respected and taken into account.

## What we found

### Our judgement

[Click here and select](#) with outcome 2: Consent to care and treatment

### Our findings

This essential standard was not inspected

# Outcome 4: 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

**There are minor concerns** with outcome 4: Care and welfare of people who use services

### Our findings

**What people who use the service experienced and told us**  
We visited this location on a weekday when all the people who lived at the unit were out doing a range of activities. We were able to talk to one person, when they returned, who was keen to show us the nice bedroom they had. The person told us that they could do lots of activities and that they liked living there.

**Other evidence**  
The provider told us that it assessed, planned and delivered care that met people's individual needs. The location completed audits and internal inspections to ensure that this happened.  
During our visit, we examined the care records of three people who live there. The records showed that a range of assessments were completed to reflect people's current needs. It was clear from the records viewed that a person care had been regularly reviewed via 1 to 1 sessions with a person's link nurse and through multi disciplinary team meetings. In 2 records looked at there was no evidence that the linked care plans had been reviewed after these sessions.

Each person had a full review of their care by a multi disciplinary team at least once every three to six months or more frequently if required. The unit had a consultant psychiatrist who did one session every fortnight and there were visits from more junior doctors every week and when needed. We saw that all visits and reviews by

professional staff were clearly documented in the care records.

**Our judgement**

Overall, we found that Brooke House was meeting this essential standard but, in some cases there was no evidence to show that care plans had been routinely reviewed.

# Outcome 5: 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

[Click here and select](#) with outcome 5: Meeting nutritional needs

### Our findings

This essential standard was not inspected

# Outcome 6: 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

[Click here and select](#) with outcome 6: Cooperating with other providers

### Our findings

This essential standard was not inspected

# Outcome 7: 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

[Click here and select](#) with outcome 7: Safeguarding people who use services from abuse

### Our findings

This essential standard was not inspected

## Outcome 8: 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 8: Cleanliness and infection control

#### Our findings

##### Other evidence

We asked the provider to tell us how they meet this outcome. The provider told us that they completed a range of risk assessments. These included infection prevention control assessments and clinical area assessments.

The patient environmental action team (PEAT) visited the unit every year and highlighted any area for improvement. We saw the most recent report after a visit in January 2011. Minor areas of concern had been highlighted, but most of which had already been rectified.

During our visit we walked around all areas of the service. We found that communal areas were clean and in a good state of repair. The kitchen was also clean and tidy with refrigerator temperatures been recorded correctly.

The cleaning service plan and schedule for the unit were seen. The manager explained that they did monthly checks to ensure standards of cleanliness were maintained.

##### Our judgement

Overall, we found that Brooke House was meeting this essential standard.

# Outcome 9: 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 9: Management of medicines

### Our findings

**Other evidence**  
We asked the provider to tell how they meet this outcome. The provider told us each person who required medication had it ordered, stored, prescribed and administered correctly and safely.  
People were given their medicines by qualified nurses. We checked the medicines charts for 7 people and found that the administration of medicines had been recorded correctly. One person administered their own medication and there was a risk assessment in place to support this.  
Medicines were stored securely and refrigerator and room temperatures recorded daily.  
A medication audit had taken place in July 2010 and the results from this had been used to develop an action plan which had since been implemented.

**Our judgement**  
Overall, we found that Brooke House was meeting this essential standard.

# Outcome 10: Safety and suitability of premises

## What the outcome says

This is what people should expect.

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

- Are in safe, accessible surroundings that promote their wellbeing.

## What we found

### Our judgement

**The provider is compliant** with outcome 10: Safety and suitability of premises

### Our findings

**What people who use the service experienced and told us**  
We visited this location on a weekday when all the people who lived at the unit were out doing a range of activities. We were able to talk to one person when they returned who was keen to show us the nice bedroom they had. The person told us that they could do lots of activities and that they liked living there

**Other evidence**  
We asked the provider to tell how they meet this outcome. The provider told us that they told completed a range of risk assessments. These included environmental assessments and clinical area assessments.

The patient environmental action team (PEAT) visited the unit every year and highlighted any area for improvement. We saw the most recent report after a visit in January 2011. Minor areas of concern had been highlighted, but most of which had already been rectified. The unit had a planned maintenance programme and any extra work required was requested via the estates department.

Mandatory training for staff was recorded on a database. Records indicated that all staff at the unit had completed the required health and safety and fire training this year.

During our visit we walked around all areas of the unit. We found that communal areas were in a good state of repair and decoration. The kitchen was also clean and tidy.

**Our judgement**

Overall, we found that Brooke House was meeting this essential 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

**Click here and select** with outcome 11: Safety, availability and suitability of equipment

### Our findings

This essential standard was not inspected

# 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

[Click here and select](#) with outcome 12: Requirements relating to workers

### Our findings

This essential standard was not inspected

# 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

**Other evidence**  
During our visit, we discussed staffing levels and vacancies with the manager and reviewed rotas to obtain information about the numbers and roles of staff. The manager told us that the unit was currently fully staffed with one member of staff on long term sick leave. The manager told us that there was always 2 staff on duty as a minimum, one qualified nurse and a healthcare assistant. On day shift during the week 1 or 2 extra staff were on duty to support the range of activities for people. The manager stated that staffing levels could be reviewed or adjusted if people required extra support.  
In addition the unit had a cognitive behavioural therapist who worked there one day a week.  
A maximum of ten people can live at the unit but when we visited there were only seven people resident.

**Our judgement**  
Overall, we found that Brooke House was meeting this essential 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 visited this location on a weekday when all the people who lived at the unit were out doing a range of activities. We were able to talk to one person when they returned who was keen to show us the nice bedroom they had. The person told us that they could do lots of activities and that they liked living there

**Other evidence**  
We asked the service to provide us with information to show how they met this outcome. The service told us that they provide staff with training, professional development and supervision.  
During our visit we checked the computer database which records all the mandatory training that the staff had done. These records indicated that staff training was upto date.  
The manager told us that mandatory training was audited every month to ensure staff training was up to date. We saw a spreadsheet that highlighted when staff training was required.  
All staff had yearly appraisals and monthly supervisions with their line manager. Staff said that they thought that supervision sessions were well organised and structured and that they found them very useful.

**Our judgement**

Overall, we found that Brooke House was meeting this essential standard.

# 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

**Click here and select** with outcome 16: Assessing and monitoring the quality of service provision

### Our findings

This essential standard was not inspected

# Outcome 17: Complaints

## What the outcome says

This is what people should expect.

People who use services or others acting on their behalf:

- Are sure that their comments and complaints are listened to and acted on effectively.
- Know that they will not be discriminated against for making a complaint.

## What we found

### Our judgement

[Click here and select](#) with outcome 17: Complaints

### Our findings

This essential standard was not inspected

# Outcome 21: Records

## What the outcome says

This is what people who use services should expect.

People who use services can be confident that:

- Their personal records including medical records are accurate, fit for purpose, held securely and remain confidential.
- Other records required to be kept to protect their safety and well being are maintained and held securely where required.

## What we found

### Our judgement

[Click here and select](#) with outcome 21: Records

### Our findings

This essential standard was not inspected

## Action

we have asked the provider to take

### Improvement actions

The table below shows where improvements should be made so that the service provider **maintains** compliance with the essential standards of quality and safety.

Regulated activity	Regulation	Outcome
Treatment of disease, disorder or injury. Assessment or medical treatment of persons detained under the Mental Health Act 1983.	9	Outcome 4: Care and welfare of people who use services
	<b>Why we have concerns:</b> For some people there was no evidence to show that care plans had been routinely reviewed.	

The provider must send CQC a report about how they are going to maintain compliance with these essential standards.

This report is requested under regulation 10(3) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010.

The provider's report should be sent within 14 days of this report being received.

CQC should be informed in writing when these improvement actions are complete.



# 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 Adult 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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