

# Review of compliance

Mrs N Stimpson Catherine Lodge	
<b>Region:</b>	London
<b>Location address:</b>	36-42 Woodside Park Road North Finchley London N12 8RP
<b>Type of service:</b>	Care home service without nursing
<b>Date of Publication:</b>	June 2012
<b>Overview of the service:</b>	Catherine Lodge is a private care home which is registered to provide accommodation for persons who require nursing or personal care for a maximum of thirty-nine people who use the service. The home's aim is to provide people who use the service with a quality of life which is individualised, sensitive to their needs and of a high standard.

	<p>The home is located in North Finchley, Barnet and close to local amenities and transport. There is a registered manager in post.</p>
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# Summary of our findings for the essential standards of quality and safety

## Our current overall judgement

**Catherine Lodge 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 21 May 2012, observed how people were being cared for, talked to staff, reviewed information from stakeholders and talked to people who use services.

### What people told us

People who use the service informed us that they had been treated with respect and dignity. They spoke highly of staff and said they had been consulted and were involved in their care. They indicated that staff were competent and pleasant in their approach. This was confirmed by relatives we spoke to.

We observed that people who use the service appeared comfortable and well cared for. Staff were seen assisting them with their meals and drinks. Comprehensive assessments had been carried out and plans of care had been prepared for people who use the service. The care provided had been carefully monitored and there was evidence that the healthcare needs of people who use the service had been attended to.

Arrangements were in place to ensure that people who use the service are protected from abuse. The home had a safeguarding policy and procedure and staff had received the required training. There were arrangements to ensure that staff received regular supervision and support from their managers. Staff were knowledgeable regarding their roles and responsibilities and the individual needs of people who use the service.

People who use the service informed us that the home had been kept clean and staff were hygienic in their approach. All areas of the home inspected had been kept clean and tidy. There were suitable arrangements for cleanliness and infection control.

### What we found about the standards we reviewed and how well Catherine Lodge 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 07: People should be protected from abuse and staff should respect their human rights**

People who use the service were protected from the risk of abuse, because the provider had taken reasonable steps to identify the possibility of abuse and prevent abuse from happening.

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 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

People who use the service said they had been treated with respect and dignity. They spoke highly of staff and said they had been consulted and were involved in their care and the running of the home. Their views can be summarised by the following comments, "The staff are friendly, warm and respectful." and "We get a first class service." (relative)

We observed that staff were attentive and chatted with people who use the service. Staff knocked on the door and waited for a response before entering bedrooms. Some people who use the service were able to stay in their bedrooms while others were able to move freely in the home. Visitors to the home were warmly greeted.

#### Other evidence

Staff we spoke to were aware that all people who use the service must be treated with respect and dignity and they reassured us that this happened in practice. This was confirmed by people who use the service. The home had a policy on ensuring equality and valuing diversity. It included ensuring that the personal preferences of people who use the service were respected regardless of their background.

We were informed by the registered manager that regular meetings had been held in

the home during which people who use the service can express their views. The details of meetings with people who use the service were seen by us. The manager explained that this ensures that the views of people who use the service were noted and responded to. This was confirmed by people we spoke to.

The home has a service user guide and this included information about the home and its aims and objectives. We also noted that the home had a quarterly magazine with news regarding residents, staff and activities in the home. The magazine contained articles written by people who use the service.

**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

People who use the service informed us that they were well cared for and they were satisfied with the services provided. This was reiterated by relatives we spoke to. Their views can be summarised by the following comments : "I am happy with the care provided." and "All of the residents were always clean and comfortable and there was often some type of entertainment being arranged." (a relative)

We observed that people who use the service appeared well cared for and they were dressed appropriately. Staff were constantly interacting and supervising people who use the service.

##### Other evidence

The registered manager and Head of Care informed us that people who use the service had been fully assessed to ensure that their needs and preferences were noted. This was evidenced in the case records we examined. Following the assessment, plans of care had been prepared. Those we examined were comprehensive and had been reviewed. Risk assessments contained action for minimising potential risks such as risk associated with falls, dementia and pressure sores.

Plans of care had been prepared for people who use the service. These were comprehensive, holistic and appropriate. There was evidence that people who use the service and their relatives or representatives had been consulted. Their signatures were seen in the care plans. Relatives informed us that they had been regularly updated by staff. The care plans had been reviewed regularly.

The healthcare needs of people who use the service were closely monitored by staff. Details of appointments with healthcare professionals such as the chiropodist, GP and community psychiatric nurse had been kept.

We discussed the care of a person who required close supervision with staff. We also examined the case records. Staff informed us that they were vigilant and there was evidence that this person's care was monitored by staff. The provider may find it useful to note that the home did not have a close supervision policy and procedure. This is needed to provide the necessary guidance to staff.

We examined the care records of a person who had a skin condition. The records contained guidance to staff on how to care for the specific needs of this person. Staff we spoke to were knowledgeable regarding care and treatment to be provided. This person's relative informed us that improvement had been made in her skin condition.

**Our judgement**

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

The provider was meeting this standard.

## 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 who use the service informed us that they were well treated and staff were respectful towards them. Their views can be summarised by the following comments: "Well treated." "Staff are always respectful." and "The dignity of residents is unfailingly respected." (a relative)

We observed that staff were gentle and spoke in a pleasant manner towards people who use the service.

##### Other evidence

Staff had received training in safeguarding. This was evidenced in the training records we examined and by staff interviewed. The registered manager reassured us that all her staff had been informed to treat all residents with respect and dignity at all times. This was confirmed by staff we spoke to.

We asked staff what action they would take if they were aware that people who use the service were being abused. They informed us that they would report it to their manager. They were also aware that they can report it to Social Services or CQC if needed.

The home had a policy and procedure for meeting the Mental Capacity Act 2005 and the Deprivation of Liberty Safeguards (DOLs). There was documented evidence that staff had received recent training in this area.

#### Our judgement

People who use the service were protected from the risk of abuse, because the provider had taken reasonable steps to identify the possibility of abuse and prevent abuse from happening.

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

People who use the service informed us that the home had been kept clean and staff were hygienic in their approach. Their views can be summarised by the following comments: "staff wear gloves when it is needed." "My bedroom has been cleaned each day." and "The home smells nice and is always clean."

##### Other evidence

We observed that domestic staff were engaged in cleaning the home when we arrived. No unpleasant odours were detected. All areas of the home which we inspected had been kept clean.

The home had a comprehensive policy and procedure for the control of infection. This included guidance on the management of infections. The training records indicated that staff had received training in this area.

Information of concern associated with infection control had been reported to us. During this inspection, we did not find evidence to substantiate the allegations. The home had a policy on the use of gloves. This had been approved by the local community nurse who provided advice on such issues. Staff were aware of measures for reducing the risk of infections and they stated that they were not restricted in their use of gloves.

##### Our judgement

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

The provider was meeting this standard.

## Outcome 14: Supporting staff

### 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 staff

#### Our findings

##### What people who use the service experienced and told us

People who use the service expressed confidence in staff and indicated that they were capable and competent. Their views can be summarised by the following comments: "Staff are always kind. They are well organised." and "We cannot praise you and your staff enough." (a relative)

We observe that staff were friendly and pleasant to people who use the service. They worked as a team and were calmly assisting people who use the service.

##### Other evidence

Staff informed us that they worked as a team to ensure that people who use the service were well cared for. They expressed confidence in the way the home was managed.

Staff had been provided with essential training and updates. This was evidenced in the staff files and training records examined. Certificates were seen by us at the previous inspection last year. Staff were interviewed on a range of topics associated with their work such as care of those with dementia, safeguarding issues, healthcare issues and the administration of medication. They were noted to be knowledgeable regarding their roles and responsibilities.

The manager maintains a record of regular supervision. Monthly staff meetings had also been held and the minutes of these meetings were available for inspection.

##### 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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