

# Review of compliance

## Catherine Lodge

<b>Region:</b>	London
<b>Location address:</b>	Catherine Lodge 36 - 42 Woodside Park Road London N12 8RP
<b>Type of service:</b>	Accommodation for persons who require nursing or personal care
<b>Date the review was completed:</b>	16 <sup>th</sup> January 2011
<b>Overview of the service:</b>	<p>The home's stated aim is to always strive for excellence in providing an ethically sound, individualised and high standard of care to people who use their service within a relaxed environment with the support of well trained and highly motivated staff. In addition it also aims to provide a happy, stable home where good food, care and value for money are the watchwords.</p> <p>The home was originally made up of four houses which have now been converted into a single</p>

	<p>home. Bedrooms are located across all three floors. There is a lounge interconnecting with two dining rooms and a large conservatory at one end of the building and a separate quiet lounge at the other end. All floors are accessible via a shaft lift. There is also a stair lift on one of the staircases. At the back of the home is a large garden and a terrace.</p> <p>The home is situated just off the High Road in North Finchley, and only a few minutes walk from shops, restaurants, the library and the Art Depot in Finchley.</p>
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## **Summary of our findings** for the essential standards of quality and safety

## What we found overall

**We found that Catherine Lodge was meeting all the essential standards of quality and safety we reviewed.**

The summary below describes why we carried out the 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 7<sup>th</sup> January 2011, observed how people were being cared for, talked to people who use services and their relatives, talked to staff, checked the provider's records, and looked at records of people who use services.

### What people told us

People who use the service were satisfied with the accommodation provided and they indicated that their care needs had been attended to. They spoke highly of staff and said they were involved in the running of the home.

Comments made by them included the following:

"Everything is perfect, staff are wonderful."

"Staff are very careful."

" The care is exceptional !"

"Happy, well treated."

## **What we found about the standards we reviewed and how well Catherine Lodge 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**

People who use the service spoke highly of care staff in the home. They informed us that they had been treated with respect. There was also evidence that they had been involved in decisions affecting the running of the service. This ensures that they are able to receive appropriate care and influence the running of the service.

- Overall, we found that Catherine Lodge was meeting this essential standard.

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

The service has arrangements in place for obtaining consent to care and treatment for people who use the service and this was confirmed by people who use the service and their representatives. This ensures that they receive care and treatment which is appropriate.

- Overall, we found that Catherine Lodge was meeting this essential standard.

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

People using the service are receiving appropriate care and support. They had been properly assessed and potential risks had been identified. This ensures that the service provided is safe and meets the needs of residents.

- Overall, we found that Catherine Lodge was meeting this essential standard.

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

People who use the service were provided with adequate and nourishing food. There was a choice of food to meet their individual and cultural needs. This ensures that their dietary needs are met.

- Overall, we found that Catherine Lodge was meeting this essential standard.

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

The service works and co-operates well with other agencies and professionals. This ensures that people who use the service receive safe and co-ordinated care and support.

- Overall, we found that Catherine Lodge was meeting this essential standard.

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

People who use the service are well treated and there are safeguarding arrangements in place. This ensures that they are protected from abuse and their rights are respected.

- Overall, we found that Catherine Lodge was meeting this essential standard.

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

The home had been kept clean and tidy. There are suitable arrangements for cleanliness and infection control. This ensures that people who use the service live in a pleasant and clean environment.

- Overall, we found that Catherine Lodge was meeting this essential standard.

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

The service has suitable arrangements for the administration of medication and there is a system of audit to ensure that people who use the service are protected. This ensures that people get their medication at the right time and prescribed dose.

- Overall, we found that Catherine Lodge was meeting this essential standard.

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

The premises were safe and essential safety checks had been carried out. It was maintained to a high standard. This ensures that people who use the service live in a comfortable and safe environment.

- Overall, we found that Catherine Lodge was meeting this essential standard.

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

The home has a maintenance schedule and essential equipment used at the home had been subject to the necessary safety checks. This ensures that people who use the service are not at risk of harm from unsafe or unsuitable equipment.

- Overall, we found that Catherine Lodge was meeting this essential standard.

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

The required recruitment checks were in place for new staff before they start work. This ensures that residents are protected and staff recruited are suitable to work in the home.

- Overall, we found that Catherine Lodge was meeting this essential standard.

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

The home has suitable and adequate numbers of staff throughout the day and night. This ensures that people who use the service are safe and their health and welfare needs are being attended to.

- Overall, we found that Catherine Lodge was meeting this essential standard.

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

Staff in the home are well managed. They receive regular support from the manager and senior staff. There is a comprehensive training programme to ensure that all staff are able to meet the needs of people who use the service.

- Overall, we found that Catherine Lodge 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**

Suitable arrangements are in place to ensure that the quality of care provided is being carefully monitored. There is evidence of audits and consultation with people who use the service. This ensures that people who use the service receive a high quality of care and are able to influence the service provided to them.

- Overall, we found that Catherine Lodge was meeting this essential standard.

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

People who use the service had been provided with information on the complaints procedure. The service response promptly and effectively to complaints and concerns expressed. This ensures that people who use the service are well cared for.

- Overall, we found that Catherine Lodge was meeting this essential standard.

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

The service has the necessary essential records. The records are well maintained, up to date and fit for purpose. This ensures that the records are accurate and people who use the service are protected.

- Overall, we found that Catherine Lodge was meeting this essential standard.

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

None

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 interviewed the people who use the service. Some of them suffer from mild dementia. Some communication difficulties were experienced during our interviews with some of them. However, the impression gained from our observation and interviews was that people who use the service were very satisfied with the care provided and they had been treated with respect and dignity. This was confirmed by relatives we spoke to.

Comments made by them included the following:

"Everything is perfect, staff are wonderful."

"Staff are very careful."

“They (staff) are alright.”

“ Happy and well treated.”

### **Other evidence**

During this visit we observed that staff were responsive towards residents and spoke to them in a gentle and friendly manner. The manager informed us that staff are informed during their induction to treat all people who use the service with respect and dignity. This was confirmed by the staff interviewed.

We were informed by the manager that regular meetings had been held in the home during which people who use the service can express their views. The details of each individual meeting with each person had been recorded and these were seen by us. The manager explained that this ensures that the views of people who use the service are noted and responded to. We consider this an example of good practice as it ensures that the needs of people who use the service are met.

Individualised plans of care had been prepared for people who use the service. Those examined by us were comprehensive and addressed the holistic needs of service users. Individual preferences such as waking up times and preferred names were noted in the case records. There was documented evidence that people who use the service or their representatives had been involved in the planning of their care and had also been present at reviews of care. Relatives who were interviewed were able to confirm that they had been consulted and staff kept them updated regarding the progress of people who use the service. The plans of care had been signed by them by people who use the service or their representatives.

Two of the people who use the services and who were from an ethnic minority informed us that staff had treated them with respect and their cultural preferences regarding the meals provided had been attended to and they could eat meals they liked.

The home has a service user guide and this included information about the home and its aims and objectives. Relatives interviewed were able to confirm that they had been provided with this information. We also note that the home has a quarterly magazine with news regarding new residents, staff and activities in the home. We consider this an example of good practice as it keeps people who use the service informed.

### **Our judgement**

People who use the service had been treated with respect and dignity. Their views and preferences regarding their care had been taken into account in the way the service is provided. This ensures that they are able to receive appropriate care and influence the running of the service.

# 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

**The provider is compliant** with outcome 2: Consent to care and treatment

### Our findings

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

People who use the service and their relatives informed us that the home actively consults and obtain their consent regarding the care provided. Comments made by them included the following :

“ I have signed my care plan.”

“ Yes, they consult with her (resident) regarding the care .”

" We have always been consulted regarding any changes to my mother’s care."

**Other evidence**

The home’s PCA (Provider Compliance assessment) states :

“We ensure that consent is sought by a person who has sufficient knowledge about the individual and care options they are considering. “

Arrangements were in place for obtaining consent to care and support for people who use the service. The manager informed us that there is regular consultation and people who use the service have a say in their care arrangements. The four care plans we examined had been signed by people who use the service or their representatives.

We were informed by the manager that changes in the menu and activities such as entertainments provided had been made in response to suggestions made by people who use the service. People who use the service and their relatives were able to provide confirmation that the manager had been responsive and suggestions made by them had been promptly responded to. Documented evidence of these as recorded in a book was provided.

The home has a policy and procedure for meeting the Mental Capacity Act 2005 and the Deprivation of Liberty Safeguards (DOLs). The manager and her staff had received training in this area. The manager was knowledgeable regarding the need to complete the required DOLs (Deprivation of Liberty Safeguards) application if restraint or deprivation of liberty is implicated when caring for people who use the service.

### **Our judgement**

The service has arrangements in place for obtaining consent to care and treatment for people who use the service and this was confirmed by people who use the service and their representatives. This ensures that they receive care and treatment which is appropriate.

# 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

**The provider is compliant** with outcome 4: Care and welfare of people who use services

### Our findings

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

We asked people who use the service and their representatives about the care they had been provided. They responded and informed us that they are well cared for and they were satisfied with the services provided.

Comments made by them included the following :

“ Good staff - very careful.”

“ Yes, they take good care of us.”

" The care is exceptional !"

**Other evidence**

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. Residents'

relatives informed us that they had been regularly updated by staff. The care plans had been reviewed monthly. Minutes of reviews involving professionals were kept in the case records. Those examined by us indicated that the care needs of people who use the service had been attended to.

Details of appointments with healthcare professionals such as the chiropodist, GP and community psychiatric nurse had been kept. We were able to interview a visiting healthcare professional. This professional informed us that the healthcare needs of her clients had been met at the home and she was satisfied with the care provided.

The healthcare needs of people who use the service were closely monitored by staff. We examined the case records of a person with diabetes. We noted that the blood sugar levels of this person had been tested and recorded weekly. There were appropriate instructions to staff regarding the dietary needs. We also note that the weight of people who use the service had been recorded monthly and a graph had been charted.

Risk assessments had been carried out and recorded. These contained action for minimising potential risks such as the risk of falling and diabetes.

### **Our judgement**

People using the service are receiving appropriate care and support. They had been properly assessed and potential risks had been identified. This ensures that the service provided is safe and meets the needs of residents.

# 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

**The provider is compliant** with outcome 5: Meeting nutritional needs

### Our findings

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

We were present when lunch was served. We observed that the meals were served in a pleasant manner by staff and people who use the service appeared to be enjoying their lunch. People who use the service informed us that they were satisfied with the meals provided, they liked their meals and there were no complaints. Comments made by them were:

“There is enough food.”

“There is a choice of meals.”

“Food is excellent.”

Other comments received were:

“The food is of very high standard, offering a wide choice of meals and caters for the residents’ individual needs.” (Professional)

“We have very happy memories of Champagne Christmas and Birthday parties and

of course the Garden Party". (Relative)

### **Other evidence**

The manager informed us that there are regular meetings during which residents are consulted regarding the menu and meals provided. Their preferences are recorded and responded to. Documented evidence of these was provided. We spoke to people who use the service while they were having their lunch. They informed us that they were satisfied with the meals provided.

The home had a record of meals provided. These were noted to be balanced and varied. The kitchen where food was prepared was clean and well equipped. Food was stored at the appropriate temperatures.

Staff had been provided with training in Food Hygiene and there were certificates to evidence this. Kitchen staff were aware of special meal provisions for those with diabetes and those who needed a soft diet.

We spoke to two residents from an ethnic minority. They informed us that their preferences regarding meals provided had been responded to and they were happy with the meals provided. The manager reassured us that if people who use the service would like alternative meals, these would be provided.

### **Our judgement**

People who use the service were provided with adequate and nourishing food. There was a choice of food to meet their individual and cultural needs. This ensures that their dietary needs are met.

# 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

**The provider is compliant** with outcome 6: Cooperating with other providers

### Our findings

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

People who use the service and their relatives informed us that they had been able to meet with professionals involved in their care, such as their GP, psychiatrist and community psychiatric nurse. We also observed that a visiting healthcare professional was able to attend to people’s needs.

**Other evidence**

The home’s PCA (Provider Compliance assessment) states

“We ensure that we share information having regard to service users rights of confidentiality, and we co operate and share information with others involved with the service user’s care. We ensure when a hospital admission is necessary all necessary documentation accompanies that person to the hospital in the safe hands of the escort.”

One visiting healthcare professional who spoke to us indicated that staff are co-operative and relevant information had been shared. This professional noted that

people who use the service were well cared for. We were also informed that the home had been co-operative and specific care instructions had been followed.

The minutes of reviews carried out indicated that information had been shared with professionals involved in the care of people who use the service. We note that specific progress made had been recorded.

The case records contained details of appointments that residents have had with other professionals involved in their care. We also note that the home liaises closely with the staff from the local mental health day centre and the local community nursing service.

### **Our judgement**

The service works and co-operates well with other agencies and professionals. This ensures that people who use the service receive safe and co-ordinated care and support.

# 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

**The provider is compliant** with outcome 7: Safeguarding people who use services from abuse

### Our findings

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

We observed that staff were responsive and respectful towards people who use the service. We asked people who use the service about the care provided. People who use the service informed us that they were well treated and staff were respectful towards them. Comments made were :

“Well treated.”

“Staff are respectful.”

“They take good care of us.”

“Extremely so! “ (a reply from a resident when asked if staff were respectful)

**Other evidence**

All relatives who were interviewed indicated that staff at the home were respectful and had taken good care of people who use the service. No allegations of abuse or

safeguarding concerns had been recorded or reported to us within the past three years.

Staff had received training in safeguarding. This was evidenced in their training records. When interviewed, they were aware of action to take when responding to allegations or incidents of abuse. The deputy manager and manager reassured us that all her staff had been informed to treat all residents with respect and dignity at all times.

We asked care 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.

### **Our judgement**

People who use the service are well treated and there are safeguarding arrangements in place. This ensures that they are protected from abuse and their rights are respected.

# 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

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

We observed that staff were in the process of cleaning the home. We asked people who use the service for their views regarding the cleanliness of the home. People who use the service informed us that the home is always kept clean and they are satisfied with their accommodation. Comments made by them and their relatives included the following:

"The home is always clean."

"Home never smells."

**Other evidence**

The home had been kept neat and tidy. We note that cleaning staff were engaged in cleaning the home when we arrived. No unpleasant odours were evident. The two lounges and bedrooms of people who use the service which were visited by us had been kept clean.

The home has a comprehensive policy and procedure for the control of infection. This included guidance on the management of infections such as MRSA. This had been updated within the last twelve months. The training records indicated that staff

had received training in this area.

We discussed the laundering of soiled linen with the deputy manager and her laundry staff. They were aware of the need to ensure that soiled linen is first washed in a special sluice cycle. However, there were no instructions in the laundry room to remind staff (especially newly recruited staff). The manager agreed that this would be provided. We were informed soon after the inspection that the instructions had been provided in the laundry room.

### **Our judgement**

The home had been kept clean and tidy. There are suitable arrangements for cleanliness and infection control. This ensures that people who use the service live in a pleasant and clean environment.

# 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

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

We observed that the deputy manager was diligent in ensuring that medication is administered at the times indicated and the medicine charts were correctly signed for. We asked people who use the service and their relatives their views regarding the administration of medicines. They indicated to us that they had their medication each day and that they were well looked after in the home.

Comments made included the following:

"They give me my medicine."

"Yes, medicine given on time."

**Other evidence**

The medicines were being administered by the deputy manager when we arrived at the home. She was knowledgeable regarding procedures for the administration of

medication. The home's policy and procedure for the administration of medication was comprehensive and had been updated recently. We visited the treatment room and checked the records. We noted that there were suitable arrangements in place for the recording of receipts, storage, administration and disposal of medicines in the home.

No controlled drugs were stored in the treatment room. The deputy manager informed us that none of the residents had been prescribed controlled drugs. The local health area pharmacist had visited the home recently and his audit indicated that the home had adhered to safe procedures for the administration of medication.

Staff responsible for medication had received training and certificates were seen by us in the staff files.

### **Our judgement**

The service has suitable arrangements for the administration of medication and there is a system of audit to ensure that people who use the service are protected. This ensures that people get their medication at the right time and prescribed dose.

# 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**

People who use the service informed us that they were satisfied with their accommodation. They indicated that it was comfortable and they were satisfied with the facilities provided. Comments made included the following:

“The home is always clean.”

“Home is first class”

“My bedroom has been kept clean.”

“My room is very pleasant. The garden is amazing; we enjoy it during the spring and summer time”

“I appreciate everything that surrounds me, the place is very nice”.

**Other evidence**

The home has a parking area at the front and a large attractive garden at the rear. The inside of the home was well decorated with plants and paintings and appeared

cosy and homely. Bedrooms inspected were well furnished and had been personalised by people who use the service. There is a record of maintenance carried out. This included various safety inspections carried out. The home has a fire risk assessment and the fire alarm had been checked weekly.

### **Our judgement**

The premises were safe and essential safety checks had been carried out. It was maintained to a high standard. This ensures that people who use the service live in a comfortable and safe environment.

# 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

<b>Our judgement</b>
<b>The provider is compliant</b> with outcome 11: Safety, availability and suitability of equipment

<b>Our findings</b>
<p><b>What people who use the service experienced and told us</b></p> <p>People who use the service stated that they were satisfied with the facilities and accommodation provided.</p> <p><b>Other evidence</b></p> <p>The manager informed us that equipment used in the home are well maintained. The home has a record of maintenance carried out on equipment used. Some of these records were examined by us. The necessary safety inspections on the portable appliances, electrical and gas installations had been done. The arrangements for fire safety were found to be satisfactory. The home is furnished to a high standard. The bedrooms of people who use the service were well equipped. Pressure relieving mattresses are also available in the home.</p> <p><b>Our judgement</b></p> <p>The home has a maintenance schedule and equipment used at the home had been</p>

subject to the necessary safety checks. This ensures that people who use the service are not at risk of harm from unsafe or unsuitable equipment.

# 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

**The provider is compliant** with outcome 12: Requirements relating to workers

### Our findings

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

People who use the service told us that staff behaved in a professional manner, were capable and able to meet their needs. Comments made by people who use the service about staff included the following:

“Staff always respectful.”

“They (staff) are wonderful.”

“The staff are respectful and professional and dignified. All the staff impressed me with their gentleness, never failing good humour and above all professionalism.”  
(Relative)

**Other evidence**

The manager informed us that her staff had been carefully recruited to ensure that they are able to meet the needs of residents. The administrator provided us with the home's staff records. Those examined contained the required documentation and pre-employment checks such as Criminal Records Bureau (CRB) declaration,

references and evidence of identity had been carried out prior to staff commencing work at the home.

**Our judgement**

The required recruitment checks were in place for new staff before they start work. This ensures that residents are protected and staff recruited are suitable to work in the home.

# 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**

We observed that staff were responsive towards people who use the service and there was much interaction between staff and people who use the service. People who use the service and their relatives who were interviewed indicated that the home was well staffed and care staff were available to assist them if help is needed. Comments made by them included the following:

"Yes, enough staff."

"They take good care of you."

" Always have staff around "

**Other evidence**

The duty rota was examined. It indicated that the home in addition to the manager, deputy manager and administrator, there was normally at least five care staff during the day shifts. During the night shifts there were two staff on sleeping duty and two on waking duty.

Staff interviewed informed us that there was enough staff on duty to care for people who use the service.

The home has additional kitchen and cleaning staff on duty each day.

**Our judgement**

The home has suitable and adequate numbers of staff throughout the day and night. This ensures that people who use the service are safe and their health and welfare needs are being attended to.

# 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 observed that staff appear to work well together and there was a friendly atmosphere in the home. People who use the service spoke highly of care staff and informed us that care staff were able to attend to their care needs. Comments made by them included the following:

“Staff always respectful. They can’t do enough for me.”

“Staff are wonderful.”

**Other evidence**

The manager informed us that staff had been provided with on going training throughout the year. The staff records examined by us contained evidence that care staff had received a comprehensive training programme which included Food Hygiene, Health and Safety and Safeguarding. Certificates were seen by us. Staff who were on duty were interviewed on a range of topics associated with their work such as safeguarding, health and safety 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. These indicated that staff had been updated regarding the management of the home and the care of people who use the service.

Care staff who were interviewed indicated that there was a good team spirit and they worked well together. They expressed confidence in the way the home was managed.

### **Our judgement**

Staff in the home are well managed. They receive regular support from the manager and senior staff. There is a comprehensive training programme to ensure that all staff are able to meet the needs of people who use the service.

# 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**

We observed that staff were caring towards people who use the service and visitors were warmly welcomed into the home. People who use the service and their relatives informed us that their views had been sought and the home had responded to suggestions made by them. Comments made by them included the following:

"We are consulted about changes."

"Could not wish for a better home."

"If I point out something that needs to be done it will be fixed."

**Other evidence**

The PCA of the home states :

"Surveys with service users are carried out monthly...any concerns or complaints

are addressed immediately.”

The manager informed us that the home has systems in place for gathering information and evaluating the quality of care and support provided to people who use the service. We were informed by her that regular meetings had been held during which those who use the service can express their views. This was confirmed by those interviewed. The minutes of these meetings were seen by us.

We were also informed that staff meetings took place monthly. We were able to inspect the minutes of these meetings. Care issues had been discussed in these meetings.

We were also provided with the results of a consumer survey done within the last twelve months. This indicated that those who responded were very pleased with the services and care provided. The visiting healthcare professional and relatives we spoke to were all of the opinion that the home provided a high quality of care.

### **Our judgement**

Suitable arrangements are in place to ensure that the quality of care provided is being carefully monitored. There is evidence of audits and consultation with people who use the service. This ensures that people who use the service receive a high quality of care and are able to influence the service provided to them.

# 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

**The provider is compliant** with outcome 17: Complaints

### Our findings

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

People who use the service are aware of the complaints procedure and knew who to complaint to. They indicated to us that they were satisfied with the service provided.

**Other evidence**

The home has a complaints procedure and this was seen by us. It was also included in the Statement of Purpose and service users' guide. The complaints record was examined. The complaints recorded related to minor issues and these had been promptly responded to.

Relatives who spoke to us informed us that concerns brought to the attention of the manager were always promptly responded to.

**Our judgement**

People who use the service had been provided with information on the complaints procedure. The service responds promptly and effectively to complaints and concerns expressed. This ensures that people who use the service are well cared for.

## 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

**The provider is compliant** with outcome 21: Records

#### Our findings

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

People who use the service and their relatives informed us that they were satisfied with their care plans and had signed them. They made no comments regarding other records kept at the home. We observed that case records of people who use the service were kept locked securely in a cabinet in the office.

##### Other evidence

The administrator informed us that she ensures that the records of the home are

well maintained and up to date. We examined the case records. These were structured and contained essential and personalised information about people who use the service and instruction to staff on how people who use the service are to be cared for.

We examined the financial records of two people who use the service. These were properly documented and had been signed by staff and people who use the service whenever money had been withdrawn.

Records necessary for the running of the business were kept in the home and available for inspection. These included the insurance certificate, fire alarm tests, maintenance and health and safety inspection reports.

### **Our judgement**

The service has the necessary essential records. The records are well maintained, up to date and fit for purpose. This ensures that the records are accurate and people who use the service are protected.

# 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

<b>Document purpose</b>	Review of compliance report
<b>Author</b>	Care Quality Commission
<b>Audience</b>	The general public
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