

Review of compliance

Altogether Care LLP
Sherborne House

Region:	South West
Location address:	131, Sherborne Road Yeovil BA21 4HF
Type of service:	Care Home with nursing
Date the review was completed:	April 2011
Overview of the service:	<p>Sherborne House is registered for the activities; Accommodation for persons who require nursing or personal care, Treatment of disease, disorder or injury and Diagnostic or screening procedures.</p> <p>The home is able to accommodate up to 28 people who require nursing care. Sherborne House specialises in the care of people who require nursing care due to a dementia.</p>

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

What we found overall

We found that Sherborne 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 8 March 2011 and observed how people were being cared for. We talked to people who use services, talked to staff, talked to visitors, checked the provider's records, and looked at records of people who use services. We also asked the manager to provide some written information about how they felt they were meeting some of the essential standards.

What people told us

Sherborne House specialises in the care of people who have a dementia. The majority of people living at the home are unable to fully express their views verbally.

At the time of the visit there were 25 people living at the home. We spent time during our visit observing care practices, talking with staff, management and visiting relatives.

There is a very relaxed and happy atmosphere in the home. People observed appeared content and well cared for. Staff working at the home were very attentive and showed a good knowledge of the people they worked with. All requests for

assistance were dealt with promptly and kindly. When someone became anxious staff were quick to offer reassurance and calm the person.

We saw the main meal of the day being served and this appeared to be enjoyed by most people. Visitors said that the food was always very good and that portions were always ample. We observed that people who required support with meals were helped in an unhurried manner and their dignity was protected.

During the day there was constant interaction between people living and working at the home. We saw that staff explained all actions to people and offered reassurance before any tasks were performed.

There are various activities, some on a one to one basis, and others in a group setting where people are able to participate or observe. During the visit a pancake race was held in the garden which some people took part in and others watched. This appeared to give people pleasure and amusement. Generally people appeared animated and responsive to the staff who supported them.

On the day of the visit the home was clean and fresh and one visitor commented "There are no smells, it's always very clean."

There is clear signage throughout the home and objects of reference to assist people to orientate themselves and retain as much independence as possible. People were seen to have unrestricted access to their personal rooms and all communal areas.

At the most recent satisfaction survey carried out by the home 92% of people answered YES to the question "Would you recommend this care home to your friends?" The remaining people responded MAYBE.

What we found about the standards we reviewed and how well Sherborne 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

Care is provided in a manner which takes account of peoples known preferences and promotes privacy and dignity.

- Overall, we found that Sherborne House 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

There are systems in place to ensure that appropriate consent is sought from people using the service and their representatives.

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

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

People receive care and support that is personal to their needs and preferences.

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

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

People receive adequate nutrition and hydration but it is difficult to see how people are able to easily make choices about the food they eat.

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

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

The home cooperates with other providers to ensure people have their needs met appropriately.

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

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

Staff training, and an open culture, minimise the risks of abuse to people who live at the home.

- Overall, we found that Sherborne House 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 has policies and procedures in place to minimise the risks of the spread of infection to people who use the service.

- Overall, we found that Sherborne 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

People receive the correct medication at the prescribed time.

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

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

Sherborne House offers a comfortable homely environment to the people who live there. Up to date research has been incorporated into the home to assist people to maintain independence.

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

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

Suitable, safe equipment is in place to meet the needs of the people who currently live at the home.

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

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

A robust recruitment procedure minimises the risks of abuse to people living at the home.

- Overall, we found that Sherborne House 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

People living at the home are supported by sufficient numbers of staff who are suitably qualified to meet peoples' needs.

- Overall, we found that Sherborne 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

People living at the home are supported by a well motivated staff team who have received appropriate training.

- Overall, we found that Sherborne 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

There are system in place to enable people living at the home and their representatives to influence practice and ongoing improvements.

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

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

All complaints made by people living at the home and/or their representatives are fully investigated. Action is taken to address any shortfalls identified.

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

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

Well maintained records show how people are protected by the homes policies and procedures.

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

Action we have asked the service to take

We have asked the provider to send us a report within 28 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.

Other information

Please see previous review reports for more information.

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

Many of the people living at the home are unable to fully express their views. The home has gone to great lengths to ensure that care is appropriate to peoples known likes and dislikes. Information about peoples' previous interests and daily routines has been gathered from representatives and relatives. This information has been made available to staff to ensure that care is delivered in a person centred way. Many staff gave instances of how people are able to make choices without verbally expressing their views. For instance if someone is reluctant to get up or accept personal care at a specific time staff ensure that the person is comfortable and return to them at a later time.

Relatives spoken with during the visit said that they were involved in the creation of care plans and invited to reviews. Relatives said that their views about care were always listened to and incorporated into care plans where appropriate.

Throughout the visit we observed that people were treated with respect and everyone was supported in a way which promoted their dignity.

Other evidence

Care plans seen gave clear information about peoples likes, dislikes and preferred

routines. The last quality assurance survey results shows that 100% of people felt that they were treated with respect and their right to privacy was upheld. It also showed that people felt staff helped them to exercise choice and control over their lives.

Our judgement

Care is provided in a manner which takes account of peoples known preferences and promotes privacy and dignity.

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

Throughout the visit we observed that staff took account of the responses from people when assisting them. All staff seen explained what they were doing, and why, when they assisted people with any tasks. Care plans gave evidence that they are regularly reviewed to ensure that they reflect changing needs and wishes. The views and wishes of relatives are also recorded in the care plan.

Other evidence

Written information provided by the home states that everyone living at the home is assumed to have capacity to make decisions unless it is established that they lack capacity. It also states that “Reviews of consent decisions take place as part of the ongoing care plan review, which routinely reviews and records changing needs.” The manager states that staff receive training about the Mental Capacity Act and that there are clear procedures in place to make ‘best interest’ decisions on behalf of those who lack capacity. Training records seen during the visit showed that the majority of staff had undertaken training in the Mental Capacity Act and we saw that the subject had also been discussed at a recent staff meeting.

Our judgement

There are systems in place to ensure that appropriate consent is sought from people using the service and their representatives.

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

Care plans seen gave very personal information about each person to ensure that they are assisted in a way which matches their lifestyle choices and preferred routines. Relatives spoken with during the visit said that they were consulted on the care of their relative and kept informed of any changes. There were assessments in place to promote good skin care, nutrition and mobility. We saw that equipment and support stated in these assessments was in place.

Throughout the day there was interaction between the staff and the people who live at the home promoting social stimulation. There is also an activity worker who supports people to take part in, or observe, activities. On the afternoon of the visit there was a pancake race in the garden to mark Shove Tuesday. Some people joined in and others watched.

Staff responded quickly to requests for assistance and to any changes in behaviour which may indicate that someone was uncomfortable or required assistance. There is a very calm and relaxed atmosphere in the home and everyone appeared content and well cared for.

Other evidence

Written information provided by the home states that everyone has a care plan which is personal to them. The care plan identifies risks and states how these risks

will be managed. Pre admission assessments are carried out before a person moves into the home, this ensures that the Sherborne House is an appropriate place to meet their individuals needs. Written information states that all care plans are regularly reviewed to ensure their effectiveness and changes are made in line with changing needs. This was evidenced at the visit.

The home states that they have policies and procedures on end of life care. These were seen in the care plans viewed during the visit.

The home specialises in the care of people who have a dementia and staff receive training to ensure that they have the skills to support this group of people. The manager and deputy are very visible in the home and offer ongoing support and guidance to other staff. One member of staff said that they had learnt about dementia care by formal training and by working with more experienced members of staff. All staff said that they were able to speak with the homes management if they wanted advice at any time.

Our judgement

People receive care and support that is personal to their needs and preferences.

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

There are minor concerns with outcome 5: Meeting nutritional needs

Our findings

What people who use the service experienced and told us

During the visit we saw the main meal of the day being served to people. The menu for the day is written on a board in the dining room and does not offer a choice at each meal. The manager stated that people are able to have an alternative if they did not like what was on the menu. However it was difficult to see how some people would request an alternative and the majority of people may find it easier to choose between two meals shown to them. People asked during the visit said that the food was “nice” and “tasty.” Portions were ample and the meal was well presented. At the most recent quality assurance survey 89% of people said that the food was either excellent or good.

We observed that the main meal of the day was relaxed and unrushed with people able to choose where they ate. Staff assisted people who required support in a sensitive manner which promoted dignity.

Other evidence

Care plans seen contained nutritional assessments and there was evidence that advice had been sought from healthcare professionals where a concern was identified. Some people living at the home had been prescribed food supplements and we saw these being given to people. Where concerns about food or fluid intakes had been identified food and fluid monitoring was in place. The recording on food charts seen was very basic and did not record the actual food which had been eaten. Entries said things like “Whole main course eaten.” It was therefore difficult to

establish any trends or preferences in food flavours or textures which may assist staff in encouraging a good diet and promote choice.

Our judgement

People receive adequate nutrition and hydration but it is difficult to see how people are able to easily make choices about the food they eat.

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

Everyone living at the home has a document called 'This is me.' The document contains information about all aspects of the persons' needs and preferences. It is designed to be passed on to a hospital or care home if the person is transferred. This ensures that anyone providing care has a full picture of the individual even if they are unable to express themselves.

Care plans seen show that people are assisted to access other healthcare professionals such as doctors, opticians, community mental health nurses and chiropodists. All appointments are recorded in care plans and any action needed to be taken is outlined.

Other evidence

Written information provided by the home states that where a persons' care is provided by more than one individual or agency a lead nurse is always identified to coordinate the care. If someone is transferred to another setting then relevant information is transferred with them. The home states that staff receive training in data protection during their induction and this is updated annually. This is to ensure that all personal information is shared appropriately.

Our judgement

The home cooperates with other providers to ensure people have their needs met appropriately.

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

People living at the home appeared very comfortable and relaxed with the staff who supported them. People were able to move freely around the home and had unrestricted access to their personal rooms and communal areas. 92% of people who completed the homes recent quality assurance survey answered YES to the question “Do you feel you are in safe hands at all times?”

Other evidence

Staff working at the home receive training in the protection of vulnerable adults during their induction and there are annual up dates in this subject. Staff spoken with during the inspection said that they were aware of how to raise concerns and all felt confident that any worries they had would be listened to and addressed.

Our judgement

Staff training, and an open culture, minimise the risks of abuse to people who live at the home.

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

At the time of the visit all areas of the home were clean and fresh. There are hand washing facilities around the home and staff were seen washing hands through the day.
One relative said “There are no smells, it’s always very clean.”

Other evidence

The laundry is located outside the main property and there are separate areas for clean and dirty laundry. Only personal items are washed at the home and bed linen and towels are sent to an outside commercial laundry.
The home has recently had an outbreak of infection and the appropriate authorities were informed. The home was closed to all visitors and the outbreak was quickly brought under control.
Written information states that the home is planning to implement a monthly infection control audit. There are named lead nurses and carers who take responsibility for prevention and control of infection. All staff receive training in infection control as part of their induction programme and annually thereafter. Records of training were seen at the time of the visit.

Our judgement

The home has policies and procedures in place to minimise the risks of the spread of infection to people who use the service.

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

No one currently living at the home is assessed as able to administer their own medication. All medication is administered by qualified nurses who have received specific training in this area. Medication administration records show that people receive the correct medication at the prescribed time. There are protocols in place for the use of ‘as required’ medication to ensure that people receive this medication when needed. No medication is given without consent.

Other evidence

The home has appropriate storage facilities for medication including storage for controlled drugs and medicines which require refrigeration. All medication is checked and signed for when it enters the home and when administered or refused. This gives a clear audit trail.

Our judgement

People receive the correct medication at the prescribed time.

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

Sherborne House is an older style building with accommodation over two floors. It has a comfortable homely feel with ornaments and objects of reference around the communal areas. Everyone currently living at the home has their own personal bedroom which they are able to personalise to their own tastes. To promote peoples privacy the majority of rooms have en suite toilets and wash basins where people can be assisted with personal care in private. There are a variety of communal spaces to give people chooses about where they spend their time. Throughout the home there is clear signage and objects of reference to assist people to orientate themselves and move around the home independently. Each bedroom has a memory box outside containing items that are personal to the individual which helps people to recognise their own rooms. All doors have clear signs on. Toilet doors are colour coded in line with up to date research and environmental standards for people with a dementia.

Other evidence

The providers have up graded many areas of the building and re decoration is ongoing. Some en suites have curtains across instead of doors and these are gradually being replaced. One lounge is being refurbished to create a reminiscence room. On the first floor some areas of flooring are uneven and this has been highlighted in line with recommendations from the Health and Safety Executive.

Our judgement

Sherborne House offers a comfortable homely environment to the people who live there. Up to date research has been incorporated into the home to assist people to maintain independence.

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

What people who use the service experienced and told us

The home has equipment which is appropriate to the needs of the people currently living there. Staff said if new equipment is needed to meet a specific need then it is quickly acquired. We observed that some people had nursing beds and pressure relieving mattresses in line with their assessed needs. There are assisted bathing facilities but no level access showers so people are unable to choose between a bath and a shower.

Other evidence

Staff working at the home said that all equipment is regularly checked and serviced to ensure that safety is maintained.

Our judgement

Suitable, safe equipment is in place to meet the needs of the people who currently live at the home.

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

Throughout the visit to the home we observed that staff appeared competent and had a good knowledge of each individual living at the home. People living at the home seemed comfortable with all the staff who supported and assisted them.

Other evidence

We spoke to one member of staff who described their recruitment process. They said that they had attended for an interview and had been offered a job subject to references and a Criminal Records Bureau (CRB) check. We looked at two recruitment files of people recently appointed to work at the home. These gave evidence of a robust recruitment procedure which included obtaining written references and undertaking checks before the person began work. As well as CRB checks there was also evidence that professional qualifications had been checked.

Our judgement

A robust recruitment procedure minimises the risks of abuse to people living at 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

During our visit we observed that all requests for assistance were responded to promptly and staff also had time to socialise and interact with people living at the home. When one person became anxious the staff swiftly responded, offered reassurance and quickly calmed the person. When another person called out from their bedroom staff went to the person to offer assistance. One relative said that they thought that there was always sufficient staff on duty. They said “No one is ever rushed and if any one asks for help then they are there straight away.”

Other evidence

We were given copies of duty rotas which showed that the staffing levels in the home are consistent. In the morning there is one registered nurse and five care assistants, in the afternoon there is one registered nurse and four care assistants. Overnight there is a registered nurse and two care assistants. The manager, deputy and all ancillary staff are in addition to this. There is also an activity worker who works part time spreading their hours through the day and early evening. Staff spoken with said that there was a good team spirit within the home and people were always willing to cover extra shifts when needed.

Our judgement

People living at the home are supported by sufficient numbers of staff who are suitably qualified to meet peoples’ needs.

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

Staff seen working during the visit were well motivated and confident in their roles. Staff were able to demonstrate a good knowledge of the people living at the home and appeared cheerful in all their interactions with people. One relative said “Staff create a warm, friendly atmosphere and nothing is ever too much trouble.”

The management of the home said that they do not use agency staff. This ensures that staff are familiar to the people who live at the home and have the right skills to meet everyone’s needs.

Other evidence

There is always a qualified nurse on duty who co-ordinates and leads the shift. The manager and deputy are very visible in the home and offer ongoing guidance and support to all staff.

One member of staff said that they had received a good induction when they began work. They said that they had received all mandatory training away from the home and had been able to shadow a more experienced member of staff at Sherborne House until they felt confident in their role. All staff felt that the management and other team members were very supportive and always ready to answer any questions they had. All staff spoken with said that they had good opportunities for ongoing training and many had completed National Vocational Qualifications in care.

Training records seen showed that all staff, including ancillary staff, undertake

training in dementia care. Records also show that all staff have regular formal supervision and annual appraisals.

Our judgement

People living at the home are supported by a well motivated staff team who have received appropriate training.

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

The home holds some formal meetings for people who live at the home and their representatives. Many people are not able to fully contribute to these meetings but relatives spoken with said that suggestions could be made at any time and were always listened to. Staff and management were able to demonstrate how the needs of the people living at the home were able to influence daily routines. For example people are able to get up when they are happy to do so and receive personal care when they choose.

There are numerous cards of appreciation at the home which have been sent to staff and management from representatives of people living at the home. These indicate a high level of satisfaction with the care provided by the home and there were many comments about the kindness shown by staff.

Other evidence

Written information states that the home provides a service which improves as a result of client comments and learns from adverse events. The home carries out satisfaction surveys and there are regular meetings for people living and working at the home. An analysis of the most recent satisfaction survey was seen and this showed a high level of satisfaction with the service offered.

Risk assessments are carried out in respect of the environment and individuals. Control measures are put in place where appropriate to ensure that people are able to carry on with activities whilst the risk to themselves and others is minimised. These risk assessments were seen in individual care plans.

Our judgement

There are system in place to enable people living at the home and their representatives to influence practice and ongoing improvements.

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 living at the home appeared very comfortable and content with the staff who supported them. Staff said that they would recognise any changes in behaviour or mood which may indicate that someone was unhappy. One relative spoken with said “You can talk to anyone about anything at any time.” The home also has a suggestion box by the front door where people can write suggestions and comments. These suggestions can be made anonymously if people do not wish to give their name.

Other evidence

Written information states that there is a company complaints policy which is made available to relatives and representatives. They state that all staff are aware of how to deal with complaints. The home has received one complaint in the last 12 months. Records seen showed that this was investigated and resolved to the satisfaction of all parties.

Our judgement

All complaints made by people living at the home and/or their representatives are fully investigation. Action is taken to address any shortfalls identified.

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

Care plans seen were reflective of peoples' up to date needs and wishes. The manager said that they continue to look at ways to ensure that the care plans are person centred and emphasise peoples' abilities as well as their needs. The home is also working with people living at the home and their representatives to create life story books for everyone. One life story book was seen during the visit. This gave a full pictorial history of the person which could be easily understood by the person and staff working with them. This will also ensure that care and support is person centred.

Other evidence

At the time of the visit we requested to see various records relating to individuals and to the running of the home. All information was made available, all records seen were well maintained and up to date.

Records relating to staff showed that people are protected by the homes recruitment and training procedures. Duty rotas demonstrated that there is always a senior member of staff on duty and staffing levels are consistent.

Medication records gave a clear audit trail of all medicines entering and leaving the home and gave evidence that people are receiving the correct medication at the

prescribed time. Controlled drugs records were well maintained and checks undertaken during the visit showed that stocks held correlated with records held.

Our judgement

Well maintained records show how people are protected by the homes policies and procedures.

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
Accommodation for persons who require nursing or personal care	14	5
Treatment of disease, disorder or injury	Why we have concerns: People receive adequate nutrition and hydration but it is difficult to see how people are able to easily make choices about the food they eat.	
Diagnostic or screening procedures		

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 28 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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Care Quality Commission

Website	www.cqc.org.uk
Telephone	03000 616161
Email address	enquiries@cqc.org.uk
Postal address	Care Quality Commission Citygate Gallowgate Newcastle upon Tyne NE1 4PA