

Review of compliance

Jasmine Court

Region:	South West
Location address:	Jasmine Court 13 Park Place Weston Super Mare North Somerset BS23 2BA
Type of service:	Care home service with nursing
Date the review was completed:	January 2011
Overview of the service:	Jasmine Court is a nursing home providing accommodation for 24 residents. The home has a passenger lift and A stair lift allowing access to all floors. It has a front garden in the form of a patio garden for its residents.

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

What we found overall

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

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

Why we carried out this review

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 the 20/01/2011. We observed how people were being cared for, talked to people who use services, talked to staff, checked the provider's records, and looked at records of people who use services.

What people told us

We spoke with people who used the service and we met two relatives who were available at the time of our visits to gain their views.

Service users told us that they felt safe at the home and that staff, "Can't do enough for you".

People told us that the food was 'lovely' and that there was plenty to eat at times that suited them. There was assistance for them to maintain their personal hygiene and that their privacy and dignity was respected. People told us that their rooms were warm and comfortable.

Overall people had positive comments to make about the home and we found that the majority of the essential standards were met. We had some minor concerns about some of the things we noticed when we visited. These were about the level of involvement and activities the service users experience in the home, the level of supervision and support for staff, the systems to keep the home clean and the space available for people.

What we found about the standards we reviewed and how well 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 are involved in making some decisions about their care. However people are not always given a choice to spend time on activities as they spend the majority of the day in the lounge. There are also very few residents meetings where they could give their views.

- Overall, we found that Jasmine Court meeting this essential standard but some improvements were needed

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

People are supported to make decisions and choices about their care and treatment.

- Overall, we found that Jasmine Court was meeting this essential standard

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

People who use the service are properly cared for and their welfare is maintained. People and their families are involved in identifying their care needs.

- Overall, we found that Jasmine Court meeting this essential standard

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

People who use the service have their nutritional needs met. They are provided with choices of food which supports their health.

- Overall, we found that Jasmine Court was meeting this essential standard

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

People receive safe and coordinated care, including when they move between services

- Overall, we found that Jasmine Court was meeting this essential standard

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

People are safeguarded against the risk of abuse.

- Overall, we found that Jasmine Court 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 is clean, tidy and generally well maintained. We found that staff do not always follow infection prevention and control policies. This means people are not always protected against risks of infection.

- Overall, we found that Jasmine Court meeting this essential standard but some improvements are needed

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

The staff team have sufficient systems in place to ensure service users always receive their medication appropriately.

- Overall, we found that Jasmine Court was meeting this essential standard

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

People live in a homely environment that is well maintained. The current design and layout means that space is limited when all the service users are in the lounge at the same time.

- Overall, we found that Jasmine Court meeting this essential standard but some improvements were needed

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

There are suitable arrangements to protect service users and others who may be at risk from the use of unsafe equipment.

- Overall, we found that Jasmine Court was meeting this essential standard

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

People are cared for by staff that have appropriate qualifications relevant to their role. All required recruitment and selection processes are in place

- Overall, we found that Jasmine Court 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 who use the service are looked after by enough suitably trained staff.

- Overall, we found that Jasmine Court 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 who use the service are cared for by competent staff. Staff are not fully supported through a system of regular supervision. They do not always follow policies, which may compromise the health and welfare of people living in the home.

- Overall, we found that Jasmine Court meeting this essential standard but some improvements are needed

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

People are protected by the systems in place to assess and monitor the quality of the service they receive at the home.

- Overall, we found that Jasmine Court was meeting this essential standard.

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

People who use the service are well supported to make complaints

- Overall, we found that Jasmine Court was meeting this essential standard.

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

The records of people that use the service and the records required for the effective running of the home are well maintained.

- Overall, we found that Jasmine Court 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 receiving this review setting out the action they will take to improve. We will check to make sure that the improvements have been made.

We have referred the concerns around safeguarding and consent to care to Baines Council Adult Safeguarding Team. We will check to make sure that improvements have been made.

What we found
for each essential standard of quality
and safety we reviewed

The following pages detail our findings and our regulatory judgement for each essential standard and outcome that we reviewed, linked to specific regulated activities where appropriate.

We will have reached one of the following judgements for each essential standard.

Compliant means that people who use services are experiencing the outcomes relating to the essential standard.

A **minor concern** means that people who use services are safe but are not always experiencing the outcomes relating to this essential standard.

A **moderate concern** means that people who use services are safe but are not always experiencing the outcomes relating to this essential standard and there is an impact on their health and wellbeing because of this.

A **major concern** means that people who use services are not experiencing the outcomes relating to this essential standard and are not protected from unsafe or inappropriate care, treatment and support.

Where we identify compliance, no further action is taken. Where we have concerns, the most appropriate action is taken to ensure that the necessary improvements are made. Where there are a number of concerns, we may look at them together to decide the level of action to take.

More information about each of the outcomes can be found in the *Guidance about compliance: Essential standards of quality and safety*.

Outcome 1: Respecting and involving people who use services

What the outcome says

This is what people who use services should expect.

People who use services:

- Understand the care, treatment and support choices available to them.
- Can express their views, so far as they are able to do so, and are involved in making decisions about their care, treatment and support.
- Have their privacy, dignity and independence respected.
- Have their views and experiences taken into account in the way the service is provided and delivered.

What we found

Our judgement

There are minor concerns with outcome 1: Respecting and involving people who use services

Our findings

What people who use the service experienced and told us

We met and talked to people who use the service and they told us that they felt included in some decisions about their care. For example, one person told us that, "We can choose what we want to eat." One person confirmed that the staff members ask them before contacting a doctor.

The service users who we met and talked to at the home said that they had care plans but were not sure what was in them. They told us that staff members show them these plans and they said they go to meetings about their care.

People who spoke with us also said that they were able to go to their room for privacy when they so wished and that staff left them alone for a reasonable time when they did not want to be disturbed.

During our visit, we noticed that the majority of people stayed in the lounge during the day and few went to their rooms. We were told that people sometimes go to their

rooms to make phone calls and they can go if they asked the staff. We looked at the care documentation to see if there was evidence that people went to their rooms during the day and we found some evidence that they did. We asked staff members and we were told of just a few times where people had left the lounge. We were told by the manager that surveys were carried out to find out what activities people liked. We were told most people had expressed a preference for watching the television.

We asked the manager how people contributed to decisions about their care and welfare. She told us that meetings were held and showed us the minutes of the two most recent ones. We saw that these meetings occurred infrequently with only one in 2008 and two in 2010 and therefore did not provide adequate opportunity for people who use the service to express their views. We also saw that the agenda was limited and in one meeting the only subject discussed was activities

Staff said that potential service users are always invited to visit the home in advance of taking any decision as to whether they want to move to the home. They are able to see the room available and meet the staff and other people who use the service, and will often spend the day at the home, with or without their relatives and/or friends. Relatives that we spoke with also confirmed this was the case.

One person who had more recently arrived at the home said that she had previously made an introductory visit for the day and had been given plenty of information about the activities, the facilities, the staff and the food.

People who use the told us that if they had a complaint or concern that they would approach the manager.

A relative told us that "The staff always ring us if they have a concern. They go out of their way to help." They told us how involved the staff had made them about decisions for their relative.

Other evidence

The manager sent us information about their own assessment of their compliance with this outcome. We asked about ways that people who use the service can make choices and they told us that, "All care plans, especially risk assessments, are signed in agreement by the resident and family. There are regular, approximately every six months, questionnaires. There are family/residents meetings. There are also verbal and written testimonials. I (the manager) always speak to my residents daily, ensuring all is well and there are no problems. I always spend time with each relative when they visit and inform them on how things are progressing. If we should have a problem then we call a meeting with the resident, family and social worker if they have one.

If choices cannot be met i.e. walking up and down the stairs but due to decline there is a greater possibility of them falling, especially if short term memory loss and becoming more frail. We can discuss this with the resident and family to produce a specialised risk assessment, which logs the problem and how we are going to deal with it, this then would be signed by the family.

We saw on the care files that relatives are reguallly contacted by the staff team if there are any concerns about the service users.

Our judgement

People are involved in making some decisions about their care. However people are not always given a choice to spend time on activities, as they spend the majority of the day in the lounge. There are also few residents meetings where they could give their views.

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 that we met and talked to told us that being asked to sign their care plans was one way in which they thought their consent was sought.

Relatives that we spoke with stated that “We are always asked to sign the care plans”

Some people who use the service said they knew about their care plans

Other evidence

The provider sent to us information to show how they were compliant with this outcome. They told us “Due to staff training, staff know the importance of consent from residents and our residents are not afraid to refuse to change their decision making and staff are aware it is their choice and this is then recorded in their standex. If it is a complex refusal regarding medication, which is important, then a trained member of staff would explain the reason for taking the medication and what

would happen if they did not. Again if they continue to refuse we would inform family and GP and record the events”.

Our judgement

People are supported to make decisions and choices about their care and treatment.

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 meet 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

People who use the service that we met and talked with at the home said that they felt their care was “good”. We heard examples were people had looked at several homes in the area with their relatives and picked this one because it seemed to be the best.

Relatives we spoke with told us that the care of their relative was excellent.

People who use the service said that the home provided some activities for them to participate in each week and they were able to join outings if they wished. People told us they can sit on the patio if they so wished.

We saw the staff were caring and kind in their manner towards the people who use the service. We saw staff helping people in a thoughtful and considerate way.

The staff were able to convey to us a good understanding of the needs of people who use the service and what kind of care and support each person needed.

Other evidence

Information that we received from the provider about this outcome told us that they were compliant. They said, “individual care plans are compiled by named nurse and residents and sometimes relatives where the resident is unable. Time is taken to

explain and discuss obtainable goals, benefits and risks. At times the risks outweigh the benefits for example when a resident was previously mobile and due to illness has not walked for several weeks. We then action plan together how we are going to promote mobility ensuring the residents safety. Our residents make ongoing decisions daily when to get up, bath or shower, meals, clothes to wear, social activities etc. I (the manager) have for the past six years tried to encourage a resident/relative forum verbally and in newsletters but they are all happy with the way I inform them daily of events, problems, and new things within the home. They are aware of our residents guide and we do regular surveys to ensure we provide the service they are happy with.

Discussions with the manager and our observations of the care documentation confirmed that the activities took place but these could be further developed. We saw that two people visited the home twice a week and spoke of their experiences abroad and held events like quizzes. People could also have a massage once a week and there was also bingo which we saw took place on the day of the site visit. However, we noted that it was a lovely day on the day of the site visit and there were no plans for any people to go out. We did not see a system in place for individuals or small groups of people to go out with the staff on a regular basis. We spoke with the manager about further developing people's opportunities to go out with staff members.

We read four peoples care plans so that we could find out how people are supported with their care needs. A care plan is a document that should set out what sort of support and help a person needs in their daily life. The information we read explained the person's range of care and health needs, as well as what to do to help them meet those needs. We saw helpful information in the care plans about the person's life history, what matters to them in their lives and who is important to them such as family and friends. The care plans had been reviewed and updated regularly. This demonstrates the care that people need and the support they get is clearly identified. The people concerned had signed the care plans to show that they had been involved in planning what care and support they need. The information we read in the care plans was helpful and set out what actions staff must follow to help the person to meet their needs and live their daily life to their maximum potential.

Our judgement

People who use the service are properly cared for and their welfare is maintained. People and their families are involved in identifying their care needs.

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

People who use service that we met and talked with told us that the food they were served was of a high quality. They and two other people that we spoke with told us about the standard of the food provided for them. One person said that the food was usually “lovely” that the hot meals were always appropriately hot when served. They said that they were able to make suggestions for the menus and that the menu was generally varied.

People who use the service advised that staff had made it clear to them that if they did not want to eat their meals in the dining room, and preferred to eat in the patio area then they could.

Relative’s told us that the food is,” really good, there are two choice of main meals, two sweets and four choices of vegetables. We see the staff ask people what they want every time we visit.”

We tasted the food on the day of our visit and found it was well cooked, nutritious and tasty. The choice was a chicken stir fry or beef lasagne and we saw people eating both options. We saw staff members ask people which dessert they would like

Other evidence

We went into the kitchen and saw that it was clean and tidy. The menus were seen to contain a variety of foods. The cook and staff members confirmed that people who use the service could influence the menu.

We saw the dining room was quiet and peaceful during lunch. One person said that the majority of them liked to eat together, but without too much noise or interruption. We saw people chatting together.

Information the provider sent to us about this outcome stated they were compliant.

Our judgement

People who use the service have their nutritional needs met. They are provided with choices of food which supports their health.

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
The people who use the service did not talk to us about how the home cooperates with other providers

Other evidence
We looked at the care documents and saw that the home liaises with health professionals, relatives and social workers when people move from one service to another. There was evidence of effective planning and reviews to ensure the move is safe and information is shared.

On the day of our visit a pharmacist, a physiotherapist and GP were visiting the home. We saw evidence that people have regular contact with a range of professionals.

Our judgement
People receive safe and coordinated care, including when they move between services.

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 who use the service that we met and talked to said that they felt that they were well cared for in the home. We asked people if they felt safe in the home and they confirmed that they did.

Other evidence

We saw a copy of the homes policy on how to keep people safe from abuse. We saw that there was not clear information on how to make a safeguarding referral, but the manager was able to identify who to contact to make a referral.

We saw that staff members complete the online training from the local authority. Staff members spoken with were able to demonstrate an understanding of safeguarding procedures and the whistle blowing policy.

Our judgement

People are safeguarded against the risk of abuse.

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

There are minor concerns with outcome 8: Cleanliness and infection control

Our findings

What people who use the service experienced and told us
People who use the service that we met and talked to at the home said that in their view the home was clean and tidy.
Relatives that we spoke with said the house was always nicely presented and there are flowers on the tables.

Other evidence
During our visit to the home we found that all areas were mostly clean, tidy and generally well maintained.
We found evidence that the staff team were not consistently taking measures to protect service users against identifiable risks of acquiring infection and to prevent and control the spread of infection. On the day of the visit we saw a pile of used bed linen over a chair in one person’s room and the staff team had to be reminded by the manager to remove this. This issue was mentioned in staff meetings minutes where staff were told not to “throw dirty clothes on the floor.”
We looked at the home’s infection control procedures and saw that they were in place, but staff was not following them and had to be repeatedly reminded at staff meetings. We have covered this aspect of compliance in outcome 14 later in this report. We saw that otherwise standard infection control precautions were being followed, such as wearing of gloves and aprons and hand hygiene procedures were being followed as appropriate.

Our judgement

The home is clean, tidy and generally well maintained. We found that staff do not always follow infection prevention and control policies. This means people are not always protected against risks of infection.

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
People who use the service that we met and talked to at the home said that they were sure that they were given their medication on time and correctly.
Staff members confirmed they understood peoples medication and the reasons they received these medicines.

Other evidence
During our visit to the home we saw a staff member administer medicines and this was seen to be completed appropriately. We looked at the policies and procedures for the management of medicines and found them to be suitable for the home. Staff knew about and understood the policies. We looked at the systems in place to store medication and saw these were well managed.

Our judgement
The staff team have sufficient systems in place to ensure service users always receive their medication appropriately.

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

There are minor concerns 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 that we spoke with said that they liked the home. People told us of the wonderful sunsets that they see across the sea.

Relatives that we spoke with said they found the home to be warm and welcoming.

Other evidence
We found that the majority of the people's rooms were clean, tidy and well maintained. The house looked welcoming and cosy. The house overlooks the sea and has two patio areas, in the main people use the lower patio. The manager stated that they are hoping to develop the upstairs patio with a conservatory to give people more options where to sit. The manager said if people wanted to be quiet they could use this space. We saw that two of the bedrooms overlook the upper patio, so the privacy of the people occupying those rooms will need to be taken into account.

When we wanted to speak to staff member we were shown to a bedroom as there was no other private space. Although the staff asked for their permission, we were concerned that this was an intrusion of that person's privacy. We saw that there was some space at the back of the office but this was limited.

The lounge area and a joining conservatory are well used and are compact. When all the service users and staff members are in this space it is very crowded. We noted that the introduction of the new conservatory would go some way to alleviate this crowding, but that it is not yet in place.

There are three toilets for all the service users downstairs. In one of these toilets the space is limited, so a folding door is used. The majority of people use these toilets during the day and therefore there is a high demand for their use. There is a staff toilet on this floor which could be utilised for the service users.

We saw some evidence that people are encouraged to move around the house. Whilst we recognise some people may choose to stay in the lounge all day, if people were offered regular opportunities to go out, this would in part alleviate the crowding in the lounge.

The communal areas of the home were clean and tidy and well maintained. The dining room was light and airy and had plenty of room for the service users to manoeuvre safely.

We saw some peoples' bedrooms and they were personalised and homely. There is a system in place to ensure the rooms are redecorated regularly. The manager told us that six new carpets had recently been purchased.

Risk assessments for the building have been completed.

Our judgement

People live in a homely environment that is well maintained. The current design and layout means that space is limited when all the service users are in the lounge at the same time.

Outcome 11: Safety, availability and suitability of equipment

What the outcome says

This is what people should expect.

- People who use services and people who work in or visit the premises:
- Are not at risk of harm from unsafe or unsuitable equipment (medical and non-medical equipment, furnishings or fittings).
 - Benefit from equipment that is comfortable and meets their needs.

What we found

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

Our findings
<p>What people who use the service experienced and told us</p> <p>People who use the service that we met and talked to at the home said that they did not have any concerns about the equipment used at the home.</p> <p>Other evidence</p> <p>During our visit we saw that there is a system in place to ensure that equipment is well maintained and safe.</p> <p>We saw that the staff had made safe the stair lift to protect people. The manager told us how they are made improvements after a service user found it difficult to use safely.</p> <p>Our judgement</p> <p>There are suitable arrangements to protect service users and others who may be at risk from the use of unsafe equipment.</p>

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 that 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

The people that we spoke with did not make specific comments about the recruitment of staff that support them.

Other evidence

In the information that the provider sent to us they stated that appropriate recruitment checks are carried out before staff commence employment. They told us " All prospective staff are interviewed by two staff members for fairness and equality. We ask relative questions pertaining to care of the elderly. We apply for references and criminal records bureau (CRB) and if satisfactory inform them of their induction date when their Independent Safeguarding Authority (ISA) check has been returned from the Registered Nursing Home Association RNHA (our umbrella CRB contact). If it is a trained nurse we would have contacted Nursing and Midwifery Council to check their registration number and if a foreign national would have checked if they are a Bristish resident".

We looked at the staff recruitment records and saw that they had sufficient information about staff members. In the files that we checked we saw that two references were available for staff. There was also proof of identity and criminal

record bureau checks. These checks aim to make sure that the home only employs people who are safe to work with service users.

Our judgement

People are cared for by staff that have appropriate qualifications relevant to their role. All required recruitment and selection processes are in place.

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
The people who use the service that we met and talked to were very positive about the staff and the way they were supported by them. They were described as “lovely girls.” We observed the staff on duty supporting people in a sensitive and kind way. We saw there was a lot of cheerful banter between the staff and people who lived there.

Relatives told us that they see a lot of staff on duty when they visit and they have never felt that their relative was not suitably cared for by the staff team.

Other evidence

We checked the staff rotas and spoke with staff members to see if people benefit from there being enough staff on duty to meet their needs and we found that this was the case.

We saw that the manager is extra to the rota staffing and is available for additional support if needed. She is also on call outside her usual hours if the staff team need her support. The manager told us that there are eight trained nurses within the care team working at the home. She told us that many of the staff team have worked at the home for years, often starting work as cleaners then becoming care staff.

Our judgement

People who use the service are cared for by enough suitability qualified, skilled and experienced staff.

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

There are minor concerns with outcome 14: Supporting workers

Our findings

What people who use the service experienced and told us
The people we spoke to during the compliance visit did not make any comments directly connected to this outcome.

Other evidence
During our visit to the home we had discussions with staff members and looked at the care documentation..
Staff confirmed that they had received a programme of induction. We noted that staff meetings were infrequent. Meetings of staff meetings showed us that the same concerns about the about the way the staff team worked were raised at several meetings. Supervision arrangements were in place, but for some staff members they were not sufficiently frequent and / or effective in ensuring staff were following the homes policies and procedures.
We saw that staff are trained to meet the changing needs of people who live there. We saw that staff complete online training courses from the local authority. This includes Mental Capacity Act (MCA) and safeguarding training.

Staff members we spoke with were very positive about the manager and felt that they could approach the manager with concerns or suggestions at any time.
Staff were aware of and able to tell us about the home’s whistle-blowing policy.

Our judgement

People who use the service are cared for by competent staff. Staff are not fully supported through a system of regular supervision. They do not always follow policies, which may compromise the health and welfare of people living in the home.

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 people we spoke to during the compliance visit did not make any comments directly connected to this outcome.

We observed the manager reminding a new staff member about the dress code to ensure that it was in keeping with the standard of the home. This is one way that demonstrates that the manager monitors the service.

Relatives told us that the manager always asks their views about the care their relatives receives.

Other evidence

In information the provider sent to us they stated that there are six monthly, questionnaires completed by the people who use the service and verbal and written testimonials. Comments have been made earlier in this report about the frequency of residents' meetings. We saw on the care files that the views of relatives, social workers and health professionals are sought in the provision of care.

Our judgement

People are protected by the systems in place to assess and monitor the quality of the service they receive at the home.

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
The service users who we met and talked to at the home said that they would talk to staff members or the acting manager if they had a complaint or concern. They thought that they would then sort out the problem for them.
Relatives we spoke with said they knew how to use the complaints system, but have never had cause to use it.

Other evidence
Discussion with staff members and evidence seen in the daily records confirmed that the staff team act upon service users complaints.

Our judgement
People who use the service are well supported to make complaints

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
The people we spoke to were aware that records were kept about their care and some people had been shown their care plans, but others were unsure about what information was kept in their records.

Other evidence
We saw the records relating to people who use the service are kept securely when not in use. The records seen were legible, up to date and kept in good order. We saw staff members completing daily records and we noted that people could read them at any time they wished to. We saw that the records relating to health and safety and fire in the home were also kept in good order and were satisfactorily maintained.

Our judgement
The records of people that use the service and the records required for the effective running of the home are well maintained.

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 Treatment of disease, disorder or injury	17	1 Respecting and involving people who use services
	<p>Why we have concerns:</p> <p>People are involved in making some decisions about their care. However people are not always given a choice to spend time on activities as they spend the majority of the day in the lounge. There are also very few residents meetings where they could give their views.</p>	
Accommodation for persons who require nursing or personal care Treatment of disease, disorder or injury Diagnostic and screening procedures	12	8 Cleanliness and infection control
	<p>Why we have concerns:</p> <p>The home is clean, tidy and generally well maintained. We found that staff do not always follow infection prevention and control policies. This means people are not always protected against risks of infection.</p>	
Accommodation for persons who require nursing or personal care	15	10 Safety and suitability of premises

	<p>Why we have concerns:</p> <p>People live in a homely environment that is well maintained. The current design and layout means that space is limited when all the service users are in the lounge at the same time.</p>	
<p>Accommodation for persons who require nursing or personal care</p> <p>Treatment of disease, disorder or injury</p> <p>Diagnostic and screening procedures</p>	<p>23</p>	<p>14</p> <p>Supporting staff</p>
	<p>Why we have concerns:</p> <p>People who use the service are cared for by competent staff. Staff are not fully supported through a system of regular supervision. They do not always follow policies, which may compromise the health and welfare of people living in the home. .</p>	

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

Document purpose	Review of compliance report
Author	Care Quality Commission
Audience	The general public
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