

# Review of compliance

## Nightingale Retirement Care Limited Priors Mead Retirement Home

<b>Region:</b>	South East
<b>Location address:</b>	26 Blanford Road Reigate Surrey RH2 7DR
<b>Type of service:</b>	Care home service without nursing
<b>Date of Publication:</b>	February 2013
<b>Overview of the service:</b>	Priors Mead Retirement Home provides accommodation and care for up to 19 people over 65. There are parking spaces at the front of the premises, as well as on street parking.

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

## Our current overall judgement

**Priors Mead Retirement Home was meeting all the essential standards of quality and safety inspected.**

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

### Why we carried out this review

We carried out this review as part of our routine schedule of planned reviews.

### How we carried out this review

We reviewed all the information we hold about this provider, carried out a visit on 16 November 2012, checked the provider's records, observed how people were being cared for, looked at records of people who use services, reviewed information from stakeholders and talked to people who use services.

### What people told us

People said that they could choose what they wanted to do to do, where to be and could have what they wanted to eat.

People also told us that they were happy living in the home and the food was good. They said the staff were nice, they felt safe in the home and the home was well run.

Two people said the staff were wonderful and treated them well and with respect, and told us about trips they had been on recently in the home's new car.

One person told us how their care was being provided in accordance with their wishes.

Another person told us that they came for respite and had intended to return home. However, as they had wanted to remain as independent as possible they decided that the best place to do that was at Priors mead and had decided to stay there.

### What we found about the standards we reviewed and how well Priors Mead Retirement Home was meeting them

**Outcome 01: People should be treated with respect, involved in discussions about their care and treatment and able to influence how the service is run**

People's privacy, dignity and independence were respected.

The provider was meeting this standard.

**Outcome 04: People should get safe and appropriate care that meets their needs and supports their rights**

People's needs were assessed and care and treatment was planned and delivered in line with their individual care plan.

The provider was meeting this standard.

**Outcome 07: People should be protected from abuse and staff should respect their human rights**

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

The provider was meeting this standard.

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

There were enough qualified, skilled and experienced staff to meet people's needs.

The provider was meeting this 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**

The provider had an effective system to regularly assess and monitor the quality of service that people receive.

The provider was meeting this standard.

**Other information**

Please see previous reports for more information about previous reviews.

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

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

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

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

Where we judge that a provider is non-compliant with a standard, we make a judgement about whether the impact on people who use the service (or others) is minor, moderate or major:

A minor impact means that people who use the service experienced poor care that had an impact on their health, safety or welfare or there was a risk of this happening. The impact was not significant and the matter could be managed or resolved quickly.

A moderate impact means that people who use the service experienced poor care that had a significant effect on their health, safety or welfare or there was a risk of this happening. The matter may need to be resolved quickly.

A major impact means that people who use the service experienced poor care that had a serious current or long term impact on their health, safety and welfare, or there was a risk of this happening. The matter needs to be resolved quickly.

Where we identify compliance, no further action is taken. Where we have concerns, the most appropriate action is taken to ensure that the necessary changes are made.

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

# Outcome 01: Respecting and involving people who use services

## What the outcome says

This is what people who use services should expect.

People who use services:

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

## What we found

### Our judgement

The provider is compliant with Outcome 01: Respecting and involving people who use services

### Our findings

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

People said that they could choose what they wanted to do to do, where to be and could have what they wanted to eat.

Two people said the staff were wonderful and treated them well and with respect.

#### Other evidence

People who use the service make choices about their lives and are treated as individuals.

We saw that there were individual meetings and group monthly meetings at the home, to seek the views of people and their relatives.

We saw that that the home had implemented changes following care choices being raised by people at these meetings. For example, considering the introduction of named key worker staff.

We saw people being offered choices and making choices. For example, we observed that people chose when to get up or to stay in bed, and we saw staff offered choices about meals, activities, and how to spend the day.

People's privacy and dignity were respected.

We saw that people's privacy was supported by staff speaking to people with respect, knocking on bedroom doors before opening them and closing them before starting to support with care.

We observed staff offering support in a dignified, sensitive and caring manner. For example, staff sat down next to the person they were supporting during lunch, engaged with them in conversation, and also did not rush them.

People's diversity, values and human rights were respected.

We saw that people that were supported to attend religious services of their choice in the community and are supported to access religious representatives at the home if that was their wish.

People's wishes and arrangements after death, and associated spiritual and cultural needs were recorded and supported.

**Our judgement**

People's privacy, dignity and independence were respected.

The provider was meeting this standard.

## Outcome 04: Care and welfare of people who use services

### What the outcome says

This is what people who use services should expect.

People who use services:

\* Experience effective, safe and appropriate care, treatment and support that meets their needs and protects their rights.

### What we found

#### Our judgement

The provider is compliant with Outcome 04: Care and welfare of people who use services

#### Our findings

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

Two people told us about trips they had been on recently in the home's new car.

One person told us how their care was being provided in accordance with their wishes.

Another person told us that they came for respite and had intended to return home. As they had wanted to remain as independent as possible they decided that the best place to do that was at Priors mead and had decided to stay there.

##### Other evidence

People's needs were assessed and care and treatment was planned and delivered in line with their individual care plan.

We looked at three care plans and saw that the home had acquired existing assessments, undertaken their own assessments and risk assessment, and sought other professionals' input. We saw that people's individual care plan was drawn up from these and with the person's input and choices recorded.

We saw that care was delivered in line with people's choices as recorded in their care plans.

For example, one person's choice to eat alone was seen to be recorded and supported in practice. We saw that care plans described how people wanted to be supported with their care, their preferences, likes, dislikes, and aspirations.



We also saw many examples of staff asking people how they wanted to be supported and people being offered choices throughout the day.

Care and treatment was planned and delivered in a way that ensured people's safety and welfare.

We saw that the people who use this service are registered with a local GP. Records of GP visits are included in care plans. Other specialist support can be arranged on referral. Care plans contained health records, health care consultations and appointment records, medical correspondence, annual health checks, risk assessments and reviews.

We saw that the home has emergency procedures, for example, fire, medical emergencies, hospital admission, electricity power cuts, heating, adverse weather conditions and had a disaster plan giving details of how to provide continuing appropriate care in an emergency.

**Our judgement**

People's needs were assessed and care and treatment was planned and delivered in line with their individual care plan.

The provider was meeting this standard.

## Outcome 07: Safeguarding people who use services from abuse

### What the outcome says

This is what people who use services should expect.

People who use services:

\* Are protected from abuse, or the risk of abuse, and their human rights are respected and upheld.

### What we found

#### Our judgement

The provider is compliant with Outcome 07: Safeguarding people who use services from abuse

#### Our findings

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

People also told us that they felt safe in the home.

Two people said the staff were wonderful and treated them well.

##### Other evidence

We saw that the provider minimised risk and the likelihood of abuse by making sure all the policies and procedures to promote safeguarding were in place.

We looked staff training records, which confirmed that they had undertaken safeguarding training and refreshers.

We spoke to three members of staff, who were aware of safeguarding procedures, had attended training in this area and were able to demonstrate knowledge of those procedures when asked. This included their responsibilities in reporting any incidents to the appropriate person should they witness or be made aware of any incident where the safety of person using the service may be compromised.

Staff were also aware of other connected policies, such as the whistle blowing policy and deprivation of liberty safeguards when it was in the best interest of the person who used the service.

##### Our judgement

People who use the service were protected from the risk of abuse, because the

provider had taken reasonable steps to identify the possibility of abuse and prevent abuse from happening.

The provider was meeting this standard.

## Outcome 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

Two people said there were enough staff.

##### Other evidence

There were enough qualified, skilled and experienced staff to meet people's needs.

Staff were seen to offer support in an unrushed and pleasant way, and with a knowledge of people's preferred communication methods and preferences.

We observed staff spending time and interacting with people throughout this visit and that staff offered support without delay when needed.

We spoke to staff who told us they had an induction into their role, regular supervision and appraisals. Staff management records examined confirmed this. Staff induction includes for example, health and safety, safeguarding, infection control, food hygiene and fire precautions.

We saw staffing rotas which confirmed that there were three care staff on duty in the morning and three in the afternoon, with two care staff on duty at night on waking duty.

There were also cook and cleaner posts.

Nine out of ten care staff members had the National Vocational Qualification in Care, level 2.

Eleven out of twenty seven staff had the National Vocational Qualification in Care, level 2.

**Our judgement**

There were enough qualified, skilled and experienced staff to meet people's needs.

The provider was meeting this standard.

## Outcome 16: Assessing and monitoring the quality of service provision

### What the outcome says

This is what people who use services should expect.

People who use services:

\* Benefit from safe quality care, treatment and support, due to effective decision making and the management of risks to their health, welfare and safety.

### What we found

#### Our judgement

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

People told us that they were happy living in the home and the home was well run.

##### Other evidence

We saw that the health and safety of people was constantly promoted, reviewed and audited.

Systems were in place to monitor quality assurance.

The provider had sent out feedback questionnaires to the relatives of people using the service and health care professionals to gain their views and experiences about the way the service was provided. The director had a role in following these up.

We saw that the organisation listened to people's views, for example, introducing a keyworker system following feedback and then consultation with other people living at the home.

We saw that audits of complaints, incidents, and medication occurred, and reviews of care plans and health and safety audits took place which formed part of the quality assurance process. Information about risks was gathered, analysed and reviewed. Any changes required that arose from reviewing these were implemented and recorded.

We saw that the manager was responsible for monitoring quality at the home and that this monitoring is passed up throughout the organisation who do their own monthly audits.

**Our judgement**

The provider had an effective system to regularly assess and monitor the quality of service that people receive.

The provider was meeting this standard.

# What is a review of compliance?

By law, providers of certain adult social care and health care services have a legal responsibility to make sure they are meeting essential standards of quality and safety. These are the standards everyone should be able to expect when they receive care.

The Care Quality Commission (CQC) has written guidance about what people who use services should experience when providers are meeting essential standards, called *Guidance about compliance: Essential standards of quality and safety*.

CQC licenses services if they meet essential standards and will constantly monitor whether they continue to do so. We formally review services when we receive information that is of concern and as a result decide we need to check whether a service is still meeting one or more of the essential standards. We also formally review them at least every two years to check whether a service is meeting all of the essential standards in each of their locations. Our reviews include checking all available information and intelligence we hold about a provider. We may seek further information by contacting people who use services, public representative groups and organisations such as other regulators. We may also ask for further information from the provider and carry out a visit with direct observations of care.

Where we judge that providers are not meeting essential standards, we may set compliance actions or take enforcement action:

**Compliance actions:** These are actions a provider must take so that they **achieve** compliance with the essential standards. We ask them to send us a report that says what they will do to make sure they comply. We monitor the implementation of action plans in these reports and, if necessary, take further action to make sure that essential standards are met.

**Enforcement action:** These are actions we take using the criminal and/or civil procedures in the Health and Social Care Act 2008 and relevant regulations. These enforcement powers are set out in the law and mean that we can take swift, targeted action where services are failing people.



## Information for the reader

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