

Review of compliance

Vintage Care Limited **Acton Care Centre** London Region: 48 Gunnersbury Lane Location address: Acton London **W3 8EF** Type of service: Care home service with nursing Date of Publication: February 2012 Overview of the service: Acton Care Centre is a purpose built home that can accommodate 125 people. There are two units for people living with the experience of dementia and three units for people with nursing care needs. The home can provide high dependency care for people with complex nursing needs. The home is registered to provide the following regulated activities: Accommodation for persons who require

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

Our current overall judgement

Acton Care Centre was meeting all the essential standards of quality and safety.

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

We were supported on this review by an expert-by-experience who has personal experience of using or caring for someone who uses this type of care service.

What people told us

People told us staff treated them with respect. People had a choice of meals and had the right to change their choice at the time of the meal if they so wished. People could also choose what activities they wanted to be involved with. People said they got up and went to bed when they wanted to, and staff respected their wishes.

People expressed their satisfaction with the care the staff provided and said they were very happy at the home. Visitors said the care was of a high standard and that they were kept informed of any changes in their relative's health and welfare. One visitor said their relative had the opportunity to go on outings and also attended the weekly church service at the home, which they enjoyed.

People said they would report any concerns to the manager and the staff. Visitors said they were able to raise any issues and were confident that these would be addressed.

People were happy that the staff understood their needs and cared for them effectively. Visitors said that staff were well trained and were encouraged to learn and further their careers. People said they had been involved in surveys, for example, about the menu, and that their opinions were listened to.

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

Care Centre 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

Staff treated people with dignity and respect, and involved them and their representatives in making decisions about their care.

Overall, we found that Acton Care Centre was meeting this essential standard.

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

People were receiving the help and support they required to meet their needs. Activities were available and people were encouraged to join in with sessions they were interested in

Overall, we found that Acton Care Centre was meeting this essential standard.

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

There were processes in place to protect people living at the home from the risk of abuse, and these were understood and followed by staff.

Overall, we found that Acton Care Centre was meeting this essential standard.

Outcome 08: People should be cared for in a clean environment and protected from the risk of infection

Infection control procedures were in place and these were followed by staff who had received training, to give them the knowledge to manage infection control issues effectively when caring for people using the service.

Overall, we found that Acton Care Centre was meeting this essential standard.

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

Staff working at the home received the supervision and training they needed to provide them with the skills and knowledge to care for people effectively.

Overall, we found that Acton Care Centre 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

Monitoring processes were in place and used to improve practice and provide good outcomes for people living at the home.

Overall, we found that Acton Care Centre was meeting this essential 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.

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 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 told us staff treated them with respect. People had a choice of meals and had the right to change their choice at the time of the meal if they so wished. People could also choose what activities they wanted to be involved with. People said they got up and went to bed when they wanted to, and staff respected their wishes. People could choose where they wanted to spend their day, either in their bedroom or in the communal sitting and dining rooms.

Staff understood the importance of treating people in a dignified way and preserving their privacy. We observed staff supporting people whilst encouraging them to maintain some independence, even in small ways, such as turning the pages of the newspaper for themselves. Visitors told us staff knew people's individual needs and wishes and that there was a 'real community feel' at the home. Another visitor said they visited the home at differing times of day and staff were always providing a good standard of care to people.

Other evidence

The manager said they encouraged people and their families to visit the home prior to admission, and they could visit at any time. People had been assessed prior to coming to the home to see if the home could meet their needs. Information from health and

social care professionals was also obtained to provide home staff with comprehensive information about the needs of each individual.

We viewed some care plan documentation and there was evidence of involvement from people and their next of kin in the compiling and review of the care plans. Meetings took place for people and their families and minutes were available. People were encouraged to express their views and action was taken to address points that were raised. A food survey had recently been carried out and this had resulted in more Caribbean meals being included on the menu. Diets for people with cultural or religious needs were also provided.

Our judgement

Staff treated people with dignity and respect, and involved them and their representatives in making decisions about their care.

Outcome 04: Care and welfare of people who use services

What the outcome says

This is what people who use services should expect.

People who use services:

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

What we found

Our judgement

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

Our findings

What people who use the service experienced and told us

People expressed their satisfaction with the care the staff provided and said they were very happy at the home. Visitors said the care was of a high standard and that they were kept informed of any changes in their relative's health and welfare. One visitor said their relative had the opportunity to go on outings and also attended the weekly church service at the home, which they enjoyed.

We observed staff assisting and supporting people at mealtimes. On one unit the mealtime seemed a bit disorganised, however everyone received their meal and help was available to those who needed it. The manager was aware of the need for further work on this unit. We observed two other units at mealtimes and these were well organised and sociable occasions.

Other evidence

We viewed a sample of care plan documentation on each unit. Overall the information was comprehensive and provided a good picture of each individual, their needs and how these were to be met. Assessments of identified risks were in place and documentation had been updated monthly and additionally when people's needs had changed. Where healthcare needs had been identified there was evidence that the person had been referred to and received input from the relevant healthcare professional. We spoke with a visiting healthcare professional who said staff kept them up to date with any health concerns and implemented any changes identified for people's care and treatment.

The home provided palliative care and had just received the Beacon Award from the Gold Standards Framework. The manager explained this was the highest award attainable and the home were receiving regular referrals and providing palliative care to people.

We spoke with the activities coordinator. She said that she visited people in their rooms each morning to see what activities they would like to do. The 'Christmas tombola' was taking place during our first visit, which was taken to every unit so people, visitors and staff could join in. The activities programme was on display in areas throughout the home and people were encouraged to join in activities, with their choices being respected. The home was decorated to reflect the festive season and people were looking forward to the Christmas celebrations. Regular Christian church services were held in the home, and representatives from other religions and faiths were accessed for people when required.

Our judgement

People were receiving the help and support they required to meet their needs. Activities were available and people were encouraged to join in with sessions they were interested in.

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 said they would report any concerns to the manager and the staff. Visitors said they were able to raise any issues and were confident that these would be addressed.

Other evidence

Staff we spoke with said they had received training in safeguarding and whistle blowing procedures, and were clear to report any concerns. Notifiable incidents had been reported to CQC and we clarified the reporting of specific findings, for example people admitted with pressure sores, at the time of inspection. The manager has since submitted notifications in respect of these findings.

Information about reporting abuse and copies of the complaints procedure were on display in the home and people were encouraged to bring any concerns to the attention of the management. Complaints documentation showed that complaints had been investigated and responded to in a timely way.

Our judgement

There were processes in place to protect people living at the home from the risk of abuse, and these were understood and followed by staff.

Outcome 08: Cleanliness and infection control

What the outcome says

Providers of services comply with the requirements of regulation 12, with regard to the Code of Practice for health and adult social care on the prevention and control of infections and related guidance.

What we found

Our judgement

The provider is compliant with Outcome 08: Cleanliness and infection control

Our findings

What people who use the service experienced and told us

On this occasion we did not speak to people about this outcome area.

Other evidence

The manager provided comprehensive information to show how the home was compliant with this outcome. We carried out a partial tour of the home and areas viewed were clean and tidy. Action was taken promptly to manage any odour control issues, and overall the units were being well maintained in line with infection control procedures.

We spoke with nursing, care, domestic and administration staff. They had all received recent training in infection control and were clear about the procedures to be followed to minimise any infection risks.

The manager said that for prospective people to be admitted to the home documentation to identify any infection issues was completed. This was also done when transferring people between the home and other healthcare facilities, so that any infections were identified and specific care could be appropriately planned and implemented.

Protective clothing was available, including gloves and aprons. Colour coded aprons were in use to identify those to be used for care tasks and those for use when supporting and assisting with mealtimes. Colour coding was also used for the laundry so that people's personal clothing was laundered appropriately and safely. The laundry person said they advise people and their relatives about clothing suitable for home laundering. Anti-microbial hand gel was available throughout the home and notices for

infection control topics such as hand washing procedures were on display.

The manager and administrator were the infection control link practitioners for the home and had undertaken a two day infection control links course. Staff representatives from each unit and other sections of the home were members of the infection control team. Monthly infection control meetings took place and the manager said a variety of relevant topics were discussed, to heighten staff awareness and knowledge and promote good practices.

Cleaning schedules were in place and audits were carried out regularly for infection control to ensure standards were being met and maintained.

Our judgement

Infection control procedures were in place and these were followed by staff who had received training, to give them the knowledge to manage infection control issues effectively when caring for people using the service.

Outcome 14: Supporting staff

What the outcome says

This is what people who use services should expect.

People who use services:

* Are safe and their health and welfare needs are met by competent staff.

What we found

Our judgement

The provider is compliant with Outcome 14: Supporting staff

Our findings

What people who use the service experienced and told us

People were happy that the staff understood their needs and cared for them effectively. Visitors said that staff were well trained and were encouraged to learn and further their careers.

Other evidence

Staff said they had plenty of opportunities for study days and courses and that they were encouraged to undertake training sessions regularly. They confirmed they undertook health and safety training every year, and training for some topics such as fire safety was every 6 months. All new staff undertook induction training and were allocated to an experienced member of staff as a 'mentor' until they were competent and confident in their role. The manager said they provide the opportunity for all new staff to train for a recognised qualification in either health and social care or other training subjects relevant to their role.

The manager provided training records that confirmed the training undertaken by staff. The manager said that all nursing staff undertook competencies in specific topics, for example medication, wound dressings and specialist feeding techniques, prior to being left in charge of a unit, so they understood and could meet people's individual healthcare needs. Several of the care staff were trained nurses in their country of origin and were offered the opportunity to undertake adaptation training to become registered nurses in the UK.

Staff said they had regular supervision sessions, at which professional development, areas of care practice and individual strengths and weaknesses were discussed, with

comprehensive notes being maintained. One nurse explained that care staff had been trained up to undertake responsibility for specific areas of care, for example, nail care, observations and weight monitoring. Staff said the management was supportive and they were encouraged to learn new skills. The activities coordinator said she had been provided with training for her role and had visited other care facilities to learn from and share ideas with the activities coordinators.

Our judgement

Staff working at the home received the supervision and training they needed to provide them with the skills and knowledge to care for people effectively.

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 said they had been involved in surveys, for example, about the menu, and that their opinions were listened to.

Other evidence

Monthly audits had been carried out to cover a variety of care and environmental areas. There were examples of shortfalls being identified and action taken promptly to address them. There were monitoring systems in place for medications management including random audits by the manager and 6 monthly inspections by the dispensing chemist. Staff said the audits had improved medication management in the home, which was now being maintained at a good standard.

The administrative manager undertakes the monitoring and audits for all health and safety for the premises. Repairs had been reported and addressed promptly. The provider annual health and safety audit was due and the administrative manager said this was being arranged.

'Family matters' meetings were held for relatives and minutes kept. Individual reviews for people were also carried out and next of kin were invited to attend these. Mealtimes on the dementia care units had been reviewed and as a result the main meal on one unit had been moved to the evening, which had improved people's sleep and rest patterns overnight.

Our judgement

Monitoring processes were in place and used to improve practice and provide good outcomes for people living at the home.

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:

<u>Improvement actions</u>: These are actions a provider should take so that they <u>maintain</u> 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.

<u>Compliance actions</u>: 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 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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