Care Quality Commission

Review of compliance

Berwick Care Homes Tweed View House

Region:	North East
Location address:	8-10 Tweed Street
	Berwick-upon-Tweed
	Northumberland
	TD15 1NG
Type of service:	Care home service without nursing
Date of Publication:	July 2012
Overview of the service:	Tweed View is a care home which accommodates up to thirty six people some of whom may have dementia or general care needs. It is registered for the regulated activity 'Accommodation for persons who require nursing or personal care.' Nursing care is not provided.

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

Our current overall judgement

Tweed View House 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 2 July 2012, 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.

What people told us

We spoke with four people who lived at the home and three relatives, to find out their views on the care provided at the home. One person who lived there said, "I am very happy with the home, I really like living here and everyone is very kind. The staff pop in regularly to see me because I prefer to stay in my room. The staff know what I need help with and they come quickly when I ring the bell for them." Another person told us "I like the food and my room is very comfortable. I have been able to bring in bits and pieces from my house so it is more like home to me now. The staff are lovely; they have a joke and a laugh with you. It has been a good move for me, because I couldn't manage at home."

One relative told us, "I don't think they could be looked after any better anywhere else." Another said they were very satisfied with the care provided by the staff. They said they came in daily and staff were very good. However this person had made a complaint about the behaviour of another person who lived there that was impacting on the life of their relative. This was discussed with the manager who was aware of the situation.

What we found about the standards we reviewed and how well Tweed View House 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

The provider was meeting this standard. People's privacy, dignity and independence were respected.

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

The provider was meeting this standard. People experienced care, treatment and support that met their needs and protected their rights.

Outcome 09: People should be given the medicines they need when they need them, and in a safe way

The provider was meeting this standard. People were protected against the risks associated with medicines because the provider had appropriate arrangements in place to manage medicines.

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

The provider was meeting this standard. People were cared for by staff who were supported to deliver care and treatment safely and to an appropriate standard.

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

The provider was meeting this standard. There was an effective complaints system available. Comments and complaints people made were responded to appropriately.

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

Some people were unable to give answers to our questions because of the nature of their condition. However, those that could told us staff respected their privacy and dignity. People told us staff involved them in all decisions about their care. They said routines were flexible and they could choose how to spend their day. One person told us, "I am able to choose what I do." Another person said, "I can get up and go to bed when I like." Other comments included, "I enjoy spending time in my own room I don't go down for my meals I have them here. I like my own space and do not want to spend the day with the other people. I've got some of my furniture from home and that is nice to look round and see things I am familiar with. I do what I like, I please myself."

Other evidence

The environment at Tweed View helped to promote people's privacy. We saw people had their own bedrooms. These were decorated and furnished with keepsakes, mementoes and for some, familiar furniture from their previous homes. This helped them to feel more at home.

We saw staff maintained the privacy and dignity of people and promoted their independence. They knocked on doors before they entered rooms. Staff spoke to people respectfully and addressed them by the title they preferred. We saw staff

enabled people to make choices about their daily lives, for example they asked what they preferred to eat at lunch time. Staff gave people the support necessary to remain as independent as possible with eating, drinking and mobility. We noticed adapted cutlery was available at lunch time, and walking aids were used. People we saw were appropriately dressed to protect their dignity.

We looked at people's care plans and found they were person - centred. Their care needs, choices and preferences were recorded. Care plans contained information about people's preferred routines and the ways in which they were supported. This information helped staff make sure that people were involved in daily decisions about their care.

The activities records showed opportunities were provided for people to take part in a variety of activities. These helped to attract and occupy people's attention.

Our judgement

The provider was meeting this standard. People's privacy, dignity and independence were respected.

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

We spoke with people about how they were cared for at the home. Two people said the staff were aware of their personal needs and these were met appropriately. One person told us, "I am very happy here and staff are wonderful. I get the care and support I need so I feel safe now. When I lived at home I was worried that I couldn't manage."

Other comments included, "The care is very good and I am very comfortable. All the staff are really kind and they come promptly when I ring for help,"

A relative told us, "I think they've been really good here. I'm happy because I know they're looking after him. He's being well fed and he is always clean." Another relative told us, "We are really satisfied with the care and support provided. X has been really happy since they came here. The staff keep us informed if there are any changes. The family was not able to manage the care at home and we were always worried in case anything happened, so now we know there is always someone around to support X."

Other evidence

We talked with staff about the care of three specific people and observed the support offered. We looked at the care records for those three people. This was to check if care records effectively guided and accurately reflected the care provided. This is called 'pathway tracking'.

Staff were knowledgeable about each person's care needs. Staff told us people in the home had many different needs and they were able to provide support in various ways.

We saw one person needed a lot of support because of their condition, and was looked after in bed. This person looked clean and comfortable and was lying on a pressure relieving mattress. This was a special mattress that was powered by a control unit to support the person on a cushion of air to reduce the risk of skin damage. Another person needed support from staff to manage their behaviour and we saw this was provided sensitively in a way that suited their needs.

We noted that each person had a plan of care. This aimed to maintain the individual's welfare and took into account, physical, mental, emotional and personal relationships together with social needs. This ensured all aspects of the person's health were maintained.

Information about personal health care needs was recorded. When a person had a specific medical condition, there was information for staff to be able to support that person. We noted that people were registered with local doctors and opticians and were supported to attend routine appointments for health checks and treatment. This showed staff addressed people's general health needs.

We noted that areas of risk, for example in relation to manual handling, were documented. This meant staff had clear guidelines to make sure people who lived and worked at the home were safe.

Our judgement

The provider was meeting this standard. People experienced care, treatment and support that met their needs and protected their rights.

Outcome 09: 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 09: Management of medicines

Our findings

What people who use the service experienced and told us

We did not ask people about their views on the administration of their medicines.

Other evidence

There were written guidelines for staff on the administration of medicines. Staff administering medicines had signed to indicate they had read and understood these. Training records showed staff had received training in administration of medicines. Records showed that medication check ups were carried out by the manager and deputy manager. This meant people's medicines were checked regularly to see that staff were administering, ordering and disposing of them properly.

A monitored dosage system was in use. This is a system that is designed to simplify the administration of medication. We saw that medications had been re-packaged by the pharmacist into "blister packs" which indicated the days of the week and times of day that medicines should be taken.

All medication records we looked at had been signed following the administration of medication. This meant it was possible to identify which people had taken their medicine. Arrangements for the storage of medicines complied with national guidance.

Our judgement

The provider was meeting this standard. People were protected against the risks associated with medicines because the provider had appropriate arrangements in place

to manage medicines.

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

One person told us, "I think the staff are very good, they are always cheerful and kind. They seem to know what they're doing." A relative told us that she thought the staff were great and nothing was too much trouble. They provide really good care for X and I have no concerns about X. The staff always respond appropriately to people living here and I have never had any concerns about the quality of care."

Other evidence

Staff training records were available and these showed what training had been provided. The records confirmed that staff had updated their training in safe working practices. In addition they had received training to meet the specialist needs of certain people who lived there which included those who had dementia, communication and behavioural difficulties. All staff had completed national qualifications in care except for one person who was near to retirement age.

New staff received an induction when they first started working at Tweed View. This was confirmed through checking records and discussions with staff. Staff said there were support systems in place for new staff. One person who had recently started work confirmed this.

Staff said there were plenty of training opportunities available and felt they had the training they needed.

Evidence from staff and records showed that regular one to one meetings (supervisions) took place. These sessions provided a formal way for staff and their line

manager to discuss any concerns they had, request training and support and discuss how they carried out their roles.

We saw and staff told us that regular staff meetings were held and minutes were available. Staff said that they contributed at these meetings and were confident their views were taken into account by the manager and owner. Staff told us they felt supported by the manager and senior staff team and were satisfied that clear communication systems were in place.

Our judgement

The provider was meeting this standard. People were cared for by staff who were supported to deliver care and treatment safely and to an appropriate standard.

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 told us they had no complaints or concerns about the service. They said they found staff approachable and told us they could make any comments or raise concerns directly with staff. They said they were aware of how to make a complaint and expressed confidence that if they needed to make a complaint, this would be addressed in a prompt and fair manner.

One relative said they were aware of the complaints procedure. They said they intended to make a complaint about the behaviour of another person who lived there. An incident had occurred the previous night when this person behaved in a threatening manner. This was discussed with the manager who agreed to look into this and let us know the outcome.

Other evidence

We saw that the complaints procedure was in an information pack in the main entrance. This meant people were made aware of the complaints system. We saw that the information was provided in a format that met the needs of people at the home.

We talked with staff and they confirmed they were aware of the complaints procedure. They told us how they would assist a person who wished to make a complaint and who they would tell about it. This showed that staff had read and understood the complaints procedure.

The manager told us there had been no complaints in 2012. She was able to explain

what actions would be taken to investigate and respond to anyone who made a complaint. She discussed the concerns raised by the relative during the inspection and demonstrated she was aware of the need to investigate and respond appropriately.

Our judgement

The provider was meeting this standard. There was an effective complaints system available. Comments and complaints people made were responded to appropriately.

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:

<u>Compliance actions</u>: 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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Author	Care Quality Commission
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