

Review of compliance

David Arthur Hopkins
Bankfield

Region:	North West
Location address:	Gigg Lane Bury BL9 HQ
Type of service:	Care Home without nursing
Date the review was completed:	23/08/2011
Overview of the service:	Bankfield is a care home providing personal care for up to 47 older people. It is a large purpose built detached home situated in a residential area of Bury. It is close to main bus routes and is approximately 3 miles away from Bury Town Centre. There is a large enclosed garden at the back of the home and car parking to the front of the home for staff and visitors.

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

What we found overall

We found that Bankfield was meeting all the essential standards of quality and safety we reviewed.

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

Why we carried out this review

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

How we carried out this review

We reviewed all the information we hold about this provider, carried out a visit on 23 August 2011, 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

The residents that we spoke to were very complimentary about the care they received. Residents told us that they felt the staff respected their privacy, their dignity and their right to make choices about how they spent their day.

Some of the comments were:

"I like it here".

"They are so good".

Relatives expressed their satisfaction with the care provided in the home.

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

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

The residents were treated with respect and were involved in decision making about their care and support.

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

- Overall, we found that Bankfield was meeting this essential standard. The residents' needs were met in a safe, caring and dignified way.

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

- Overall, we found that Bankfield was meeting this essential standard. Arrangements were in place to help safeguard the residents from abuse.

Outcome 8: People should be cared for in a clean environment and protected from the risk of infection

- Overall, we found that Bankfield was meeting this essential standard. The residents were living in a clean environment and systems were in place to prevent, detect and control the spread of infection.

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

- Overall, we found that Bankfield was meeting this essential standard. The residents were cared for by staff that were properly trained, supported and supervised.

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

- Overall, we found that Bankfield was meeting this essential standard. The residents benefited from a well managed home that had systems in place to monitor the quality of the service provided.

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

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

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

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

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

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

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

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

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

Outcome 1: Respecting and involving people who use services

What the outcome says

This is what people who use services should expect.

People who use services:

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

What we found

Our judgement

The provider is compliant with outcome 1: Respecting and involving people who use services

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Our findings

What people who use the service experienced and told us

We spoke to three of the residents during our visit to the home. All three residents told us that they felt the staff respected their privacy, their dignity and their right to make choices about how they spent their day.

One of the residents told us that they understood about their care and treatment and the reasons why the staff cared for them as they did.

One resident told us that they preferred to sit in the small conservatory and “Read my newspaper in peace”.

Other evidence

Before we visited the home we requested that the Provider send us information to show how they ensured that the residents were involved in making important decisions about their care, treatment and support.

We were told that the residents made their own decisions in relation to how they wished to be supported and cared for.

We were also told that management arranged to have regular resident and family meetings to discuss, amongst other things, any new ideas that the residents may have to help improve how the home could be run.

During our visit we saw that the majority of the residents were sat in the lounge or in the conservatories. One resident was sat outside in the garden talking to their visitors. Staff told us that the residents could go to their room whenever they wished. One of the residents confirmed that they could go "Off for a nap" if they wanted to.

We looked at one of the care records to see if the resident, or a relative acting on their behalf, had been involved in decisions relating to their care and treatment. The record showed that the relative had signed their agreement to the care plan.

We watched how staff offered assistance to the residents when they needed it. The residents were spoken to in a pleasant manner and were assisted with whatever activity they were doing, in an unhurried and respectful way. There was also plenty of friendly banter between the staff and the residents.

An activity organiser was employed at the home to make sure that, as far as possible, the residents had their social care needs met.

Staff told us that they try to get the residents to maintain links with the community by encouraging visitors to take their relative out if they are able to.

We were made aware that one resident was from Eastern Europe. We were told that communication was not a problem as the resident could speak some English, but in addition, a staff member also spoke the same language.

Our judgement

The residents were treated with respect and were involved in decision making about their care and support.

Outcome 4: Care and welfare of people who use services

What the outcome says

This is what people who use services should expect.

People who use services:

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

What we found

Our judgement

The provider is compliant with outcome 4: Care and welfare of people who use services

Our findings

What people who use the service experienced and told us
The residents that we spoke to were very complimentary about the care they received. Some of the comments were:
“I like it here”.
“They make sure that they check on me throughout the night”.
“They are so good”.

The two relatives that we spoke to told us that they had acted on behalf of their relative and been involved in the planning of their care. They also told us that they trusted the staff and were happy with the care provided.

Other evidence
Before we visited the home we requested that the Provider send us information to show how they were ensuring that the residents were receiving safe care and treatment that met their needs and protected their rights.

We were told that people were assessed before they were admitted to the home to ensure that their individual needs could be met.
During the early part of our visit we were told that the Manager was not available as she had gone to undertake assessments on two people who were hoping to be admitted to the home.

We looked at two assessments. They were detailed and gave a clear indication of what the residents could do for themselves and what they needed help and support with.

Once an assessment had been done and the person was admitted to the home, a care plan was then put into place. A care plan details the individual care and support needs that a resident may have and shows how those needs are to be met by the staff.

We looked at two care plans. They contained a lot of information to show how the residents were to be supported and cared for. They also contained information that identified if the resident was at risk of harm from any hazards.

The residents looked clean, comfortable and well cared for.

We asked the Manager to tell us how staff cared for residents who were very ill and at the end of their life. We were told that the staff worked closely with the resident's GP and the District Nursing Service to ensure that the best possible care can be given. We were also told that training in End of Life Care had recently been organised.

Our judgement

The residents' needs were met in a safe, caring and dignified way.

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

We did not ask the residents any questions concerning their views about this outcome.

Other evidence

The Manager told us that the staff had received training in the safeguarding of vulnerable adults. A look at the training files confirmed that the training had been undertaken for most of the staff and that it was an ongoing process.

We saw that the documents that guide staff about the safeguarding procedures to follow were readily available in the staff office.

We asked two care staff to tell us what they would do if an allegation of abuse was made to them, or if they suspected that abuse had occurred. What they told us confirmed that they had a good understanding of what action would need to be taken.

No safeguarding alerts have been made to us about this service in the last 12 months.

We were told that the Manager and the Deputy Manager had received training in the

Mental Capacity Act 2005 and Deprivation of Liberty Safeguards and that training for other staff had recently been arranged.

This training should help staff understand that assessments need to be undertaken to determine if people have capacity to make informed decisions about their care, support and treatment. Also it should help staff understand that if a resident is deprived of their liberty, they will need special protection to make sure that they are looked after properly and are kept safe.

Our judgement

Arrangements were in place to help safeguard the residents from 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

The provider is compliant with outcome 8: Cleanliness and infection control

Our findings

What people who use the service experienced and told us
One of the residents that we spoke to told us: "I always find it nice and clean".

Other evidence
Before we visited the home we requested that the Provider send us information to show us how they ensure that the home is kept clean and how they manage and monitor the control of infection.
We were told that training in infection control had been undertaken for most of the staff and that it was an ongoing process.
We were also told about the systems that were in place to control and prevent the spread of infection.

Just prior to our visit we had received a complaint about some of the poor practices that were in place in the home. The complainant told us that some staff did not always wash their hands as often as they should, did not always wear protective clothing and that the toilets were not cleaned regularly.

The Manager agreed that since her recent appointment she had identified issues of concern about infection control procedures. The Manager told us what she had done to improve practice and showed us the documents that the staff at the home had to refer to for guidance.

We were also told that the overall responsibility for ensuring that staff follow the correct infection control procedures had been delegated to a senior member of staff.

We did not go into every area of the home but the corridors, toilets, bathrooms, lounges, dining room and kitchen that we looked at were clean and there were no unpleasant smells.

We saw that staff were wearing protective clothing of disposable aprons and gloves and that hand washing facilities were in place throughout the home. This helps prevent the spread of infection.

Cleaning schedules were in place for all areas of the home and clinical waste was handled safely.

Our judgement

The residents were living in a clean environment and systems were in place to prevent, detect and control the spread of infection.

Outcome 14: Supporting workers

What the outcome says

This is what people who use services should expect.

People who use services:

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

What we found

Our judgement

The provider is compliant with outcome 14: Supporting workers

Our findings

What people who use the service experienced and told us
We did not ask the residents any questions concerning their views about this outcome.

Other evidence
The Manager showed us the induction programme that all newly employed staff had to undertake when they first started their job. The induction programme contained basic information to help staff understand what is expected of them and what needed to be done to ensure the safety of staff and residents.

We were also shown the training plan that was in place for all the staff. It showed that the staff had received the essential training necessary to safely support the residents.

We looked at some of the documents that were in place to help protect the safety and well being of the staff. These included a policy on whistle-blowing that allows staff to raise concerns in confidence. There was also a policy on bullying and harassment.

The staff that we spoke to told us that they felt supported by management. They told us that they had regular supervision meetings with senior staff where they could discuss their progress and any learning and development needs that they had. We were told that the Manager was “Superb” and that they felt they had a “Brilliant

team” within the home.

Our judgement

The residents were cared for by staff that were properly trained, supported and supervised.

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

We did not ask the residents any questions concerning their views about this outcome.

Other evidence

Before we visited the home we requested that the Provider send us information to show us how they reviewed and monitored the quality of the service that the residents received.

We were informed that there were a number of systems in place for gathering and recording information about the quality of the services provided.

The Manager showed us the documents that recorded how they checked on all parts of the home to make sure that it was kept safe. We also saw the documents that recorded the checks that had been undertaken on care, accident and personnel records.

We were told that resident and relative meetings were held every three months to enable them to express their views on the service they receive and to make suggestions for improvements.

We saw records of these meetings displayed on the notice board in the main

reception area. We also what had been put into place to address one of the concerns that had been raised about the laundry service

We were also told that surveys were sent to the residents and their relatives asking for their opinion on the care and services provided.

Our judgement

The residents benefited from a well managed home that had systems in place to monitor the quality of the service provided.

What is a review of compliance?

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

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

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

When making our judgements about whether services are meeting essential standards, we decide whether we need to take further regulatory action. This might include discussions with the provider about how they could improve. We only use this approach where issues can be resolved quickly, easily and where there is no immediate risk of serious harm to people.

Where we have concerns that providers are not meeting essential standards, or where we judge that they are not going to keep meeting them, we may also set improvement actions or compliance actions, or take enforcement action:

Improvement actions: These are actions a provider should take so that they **maintain** continuous compliance with essential standards. Where a provider is complying with essential standards, but we are concerned that they will not be able to maintain this, we ask them to send us a report describing the improvements they will make to enable them to do so.

Compliance actions: These are actions a provider must take so that they **achieve** compliance with the essential standards. Where a provider is not meeting the essential standards but people are not at immediate risk of serious harm, we ask them to send us a report that says what they will do to make sure they comply. We monitor the implementation of action plans in these reports and, if necessary, take further action to make sure that essential standards are met.

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

Information for the reader

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