



# Review of compliance

## Careline Lifestyles UK Limited St Stephen's Court

<b>Region:</b>	North East
<b>Location address:</b>	St Stephen's Court Brunel Terrace, Scotswood Road Newcastle-upon-Tyne Tyne and Wear NE4 7RL
<b>Type of service:</b>	Rehabilitation services Residential substance misuse treatment and/or rehabilitation service Care home service with nursing
<b>Date of Publication:</b>	January 2012
<b>Overview of the service:</b>	St Stephen's Court is a care home for persons requiring accommodation with nursing or personal care; treatment of disease, disorder or injury; and diagnostic and screening procedures. It is divided into small units. It provides 29

	single bedrooms with en-suite facilities.
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## Summary of our findings for the essential standards of quality and safety

### Our current overall judgement

#### St Stephen's Court 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 6 December 2011, 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

Many of the people living in the home had difficulty in communicating verbally, but one person told us that they were well looked after, and that the staff treated people with respect. This person said that they were happy living in the home, were comfortable, and couldn't think of any ways to improve the home. Another person living in the home told us, "I like it here".

We spoke with a number of visiting relatives. One told us they were "ecstatic about the care!". A second told us that, "I'm really pleased. The carers are so loving. [My relative] is well looked after and is happy here".

Another relative said that "[My relative] has settled down well and is being well cared for." A fourth relative commented, "[My relative] is really happy here, it's brilliant, so much going on and so many activities.

#### What we found about the standards we reviewed and how well St Stephen's Court 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**

We found that people living in the home were actively encouraged and supported to make decisions about their lives, and that they and their families were able to give input into the running of the home wherever possible.

Overall, we found that St Stephen's Court was meeting this essential standard.

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

We found that people's assessed needs were being met in ways that enhanced their individuality and dignity, and that they were experiencing safe, effective and highly personalised care.

Overall, we found that St Stephen's Court was meeting this essential standard.

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

We found that people living in the home were protected from abuse by well informed, suitably trained staff. Clear systems were in place for identifying and addressing any issues of concern or allegations of abuse.

Overall, we found that St Stephen's 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**

We found that people living in the home were having their health and welfare needs properly met, and were benefiting from having a skilled and highly motivated team who were well managed and well trained.

Overall, we found that St Stephen's Court 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**

We found that effective systems were in place to monitor and continually improve the quality of the service being provided.

Overall, we found that St Stephen's Court 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

One person living in the home told us that she could get up and go to bed whenever she wanted to, and could eat what she liked. She said, "I get spoilt at Christmas, me. I like it!"

A visiting relative told us, "[My relative] gets asked what he wants to do, and gets choices. We feel involved, we get invitations to the birthday parties at the home. Staff ring you if there's anything you need to know".

Another relative said, "The staff ask my opinions".

In a recent survey of the views of relatives, one commented, "[My relative] is involved in everything here and loves this".

##### Other evidence

We observed that people were asked their views about things and were given choices by the staff.

Staff told us that it was difficult to hold meaningful communal meetings with everyone living in the home, so the person's named nurse and key worker met with each person

individually to discuss their wishes and views about the home.

We saw documentary evidence of consent being sought for a wide range of issues such as invasive nursing techniques and taking a person's photograph, and that relatives or advocates were involved where necessary in giving consent. Each person had a signed service user contract.

Personal information about living in the home was detailed and up to date. This included the person's preferred daily routines, their likes, dislikes, hobbies and interests, as well as the most appropriate methods of communication with them. Care plans were also signed by all parties involved, including relatives.

We saw that a comprehensive range of assessments had been carried out to determine people's needs. These assessments included nutrition requirements, wound assessments, risk assessments, and assessments of pressure ulcer risks. We saw that the assessments incorporated information from social workers and other professionals. Palliative care agreements were in place along with people's wishes regarding resuscitation.

We saw documentary evidence that people and their families were consulted about the day to day operations of the home, including their wishes regarding the decoration of their own bedrooms. There was also evidence that people's right to vote was discussed with them.

#### **Our judgement**

We found that people living in the home were actively encouraged and supported to make decisions about their lives, and that they and their families were able to give input into the running of the home wherever possible.

Overall, we found that St Stephen's Court was meeting this essential 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

#### Engagement

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

#### Out findings

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

We spoke with a number of visiting relatives. One told us they were, "ecstatic about the care!". A second told us that, "I'm really pleased. The carers are so loving. [My relative] is well looked after and is happy here".

Another relative said that, "[My relative] has settled down well and is being well cared for". A fourth relative commented, "[My relative] is really happy here, it's brilliant, so much going on and so many activities".

A visiting professional told us that his client seemed happy with the help and support being given. This person told us, "[My client] seems very happy".

##### Other evidence

We looked at the care records for four of the people living in the home. Where individual needs had been identified in the initial assessment process, we saw that these had been taken into account in compiling detailed and highly personalised care plans. Care records included clear statements of assessed need; the expected outcome of the care plan (in a measurable form, where possible); and details of any physical interventions that staff might need to carry out. These care plans were evaluated every month and amended where appropriate.

Health and medical conditions were recorded, with details of "how it might affect me, and the support I may need". Medications were listed, with reasons for the items prescribed, and any allergies. Dietary needs were recorded. Details of appointments,

referrals to specialists and attendance at clinics were recorded, along with the outcomes. Each person had a 'hospital passport' on file, and a 'health action plan', written in conjunction with information from Advocacy Services and the local NHS Trust.

Assessment of the need for specialist equipment had been carried out. Equipment supplied included special mattresses, pressure cushions and ceiling tracking. The building was fully wheelchair accessible, and contained an activities room, a large Jacuzzi bath (staff were trained life savers), lifts, and two sensory rooms (one low stimulus; one high stimulus, doubling as a small disco, as required).

#### **Our judgement**

We found that people's assessed needs were being met in ways that enhanced their individuality and dignity, and that they were experiencing safe, effective and highly personalised care.

Overall, we found that St Stephen's Court was meeting this essential 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

#### Out-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

A person who lived in the home told us that, "Living here's alright. The staff are kind. They treat me with respect. If I have any worries, I tell Sarah [the manager] - she's lovely!"

Another resident said that she felt safe in the home.

A visiting relative said that they had never seen anything untoward going on in the home. This person told us that they had only ever made one complaint, about a lack of staff on the floor on one occasion, but also said that this had been sorted out straightaway by the manager.

Another relative said, "[My relative] feels safe here".

##### Other evidence

Safeguarding records showed that four alerts had been made to the local council safeguarding team by the service in 2011. All were appropriate referrals, and were reported promptly.

The manager carried out any internal actions necessary to respond to the issues raised, including disciplinary action, where appropriate. She described the need for clarity of expectation and communication when dealing with safeguarding issues.

All staff had been given safeguarding training as part of their induction to the home, and half had been given training from the Newcastle local authority safeguarding team. The

other staff were to have this training within the next twelve months. The manager and her deputy had received more in-depth safeguarding training. Staff confirmed that they were also given training in 'whistle blowing' (exposing bad practice). The manager told us that she questions all staff annually to determine their understanding of safeguarding and whistle blowing issues.

Training in the implications of the Mental Capacity Act and 'deprivation of liberty' issues was ongoing, and mental capacity care plans were in place, where appropriate.

The complaints policy had been revised to include picture prompts for people living in the home. Staff told us that they acted as advocates for the people in the home, and had reported issues such as a leaking shower on behalf of individual residents. A total of 17 complaints had been logged in the past year, mostly on behalf of people in the home. All issues were taken seriously and were logged in good detail. An 'outcome' section was being added to the documentation and the manager told us this would be completed in future.

#### **Our judgement**

We found that people living in the home were protected from abuse by well informed, suitably trained staff. Clear systems were in place for identifying and addressing any issues of concern or allegations of abuse.

Overall, we found that St Stephen's Court was meeting this essential standard.

## 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

#### Qualification

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

We didn't ask people living in the home about staff support, but one relative told us that "All the staff are welcoming and well mannered". Another relative said, "The staff are brilliant"

#### Other evidence

Staff told us that they received regular supervision, usually every two months. They said supervision was a positive experience, they felt supported, and they felt their views were taken seriously by their manager. Staff told us that they work as a team and said there was mutual respect among the staff. They felt there were enough staff to provide a good level of care and were obviously proud of the home and of the care being given. They told us that the home was well managed.

Staff told us they were given comprehensive and regular training, and the staff training matrix confirmed this. The company had a training officer who identified training needs, in conjunction with the home manager, and booked the necessary courses. Mandatory training was up to date. For the coming year, 2012, the manager had identified the need for an increased focus on the health care needs of individuals, such as bowel management, and areas where specialist nursing inputs were necessary. Staff members' individual training and development needs had been assessed and were being addressed, with various staff members doing advanced training in areas such as acquired brain injury and autism.

A visiting health professional told us that staff were very experienced, had been well trained and co-operated fully with all guidance given to them.

**Our judgement**

We found that people living in the home were having their health and welfare needs properly met, and were benefiting from having a skilled and highly motivated team who were well managed and well trained.

Overall, we found that St Stephen's Court was meeting this essential 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**

We asked people living in the home and visiting relatives to suggest any improvements that the home could make: no-one was able to give us any suggestions for improvements.

In a recent survey of the views of relatives, one had commented, "The management is excellent - Sarah and her staff are brilliant - nothing is a bother". Another said, "Good and sustained communication with the home".

##### **Other evidence**

We saw that a range of quality assurance systems were in place. Audits were undertaken at appropriate intervals covering areas such as medications (which included daily spot checks), health and safety, infection control and environmental. We saw evidence that, where a deficit was identified, remedial actions were quickly taken. Examples included identifying and addressing training needs, providing better protective clothing for staff and improvements to the safe storage of medicines.

Regular staff meetings took place. There was an emphasis on identifying areas that needed improvement and then carrying out those improvements. We saw improvements documented to electronic recording systems; improved social activities for people living in the home; clarification of roles and expectations within the team; and improvements to the way in which safeguarding updates were sought. It was apparent from the minutes of these meetings that staff were actively encouraged to contribute their views and suggestions for improving the service.

We saw documentary evidence that staff were expected to sign that they had read and fully understood the contents of each person's care record file. The manager was carrying out and recording staff competency checks on a regular basis.

Surveys of the views of people living in the home, their relatives and advocates were being carried out on an annual basis. The most recent survey results (September 2011) were still being collated, but had already lead to improvements in the food choices given to people, and to the introduction of a more nutritionally balanced menu.

**Our judgement**

We found that effective systems were in place to monitor and continually improve the quality of the service being provided.

Overall, we found that St Stephen's Court was meeting this essential 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.

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 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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