

Review of compliance

Felixstowe Care Home for the Elderly Limited Merryfields

Region:	East
Location address:	7 Mill Lane Felixstowe Suffolk IP11 7RL
Type of service:	Care home service without nursing
Date of Publication:	December 2011
Overview of the service:	Merryfields is a care home providing accommodation and personal care for up to ten older people. The service also provides care for people living with a dementia.

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

Our current overall judgement

Merryfields 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 7 November 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.

What people told us

We spoke with five people who lived in the home and they told us they were involved in decisions, their views were listened to and they were treated with dignity and respect. One person said "I can say what I want and they (staff) listen to me". Another person told us "I was involved in my care plan making sure they know what I like and don't like". In relation to privacy one person told us the "staff always knock on peoples' doors and call out before entering".

People who used the service told us there was a range of social activities available, they explained that they could choose whether or not to join in or pursue individual interests if they preferred. One person told us "I am happy with my decision to move in here, I can be as independent as much as I want or join the others if I want company".

People told us they experienced good care and their healthcare needs were met. One person said "staff are very attentive and supportive and take good care of me".

We received positive comments about the food and drinks in the home. One person who used the service said "I can't complain about the food, you get plenty of choice – you can have what you want when you want". They also told us "staff are always coming in checking if you want a drink or something to eat". Another person said "I like the food here, there is always plenty of choice and they (staff) know what I like and what I don't like to eat".

People who used the service told us there was enough staff to support them with their

needs. One person said "I get on very well with the staff they are all caring and kind hearted". Another person said about the manager "they are very friendly, always willing to help and take on board any ideas you have".

Everyone we spoke with told us they felt safe and secure living at Merryfields with their care workers.

What we found about the standards we reviewed and how well Merryfields 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 who live in the home are involved in decisions about their care and support. They have their privacy, dignity and independence respected.
The provider is compliant with this outcome.

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

People who live in the home receive good care and support that meets their individual needs.
The provider is compliant with this outcome.

Outcome 05: Food and drink should meet people's individual dietary needs

People's nutritional needs are met through proper planning and monitoring and the provision of appetising meals.
The provider is compliant with this outcome.

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

There are processes in place to safeguard the people who live in the home from abuse.
The provider is compliant with this outcome.

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

People live in a home that is kept clean and provides them with a pleasant and safe environment.
The provider is compliant with this outcome.

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

People who live in the home are assisted with their medication safely.
The provider is compliant with this outcome.

Outcome 14: Staff should be properly trained and supervised, and have the chance

to develop and improve their skills

People who live in the home have their health and welfare needs to be met by care workers who are appropriately trained and supervised.
The provider is compliant with this outcome.

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

People live in a home where the quality is monitored and their contribution is considered important.
The provider is compliant with this outcome.

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

We spoke with five people who lived in the home, they told us that their privacy, dignity and independence were respected and that their views on their care, treatment and support were taken into account. One person told us "I can say what I want and they listen to me". Another person said "I was involved in my care plan making sure they (the staff) know what I like and don't like".

Everyone we spoke with told us their care plans were regularly reviewed and adapted in light of any changes. They also said that they were regularly asked for their feedback on the care being provided and how the home is run.

People we spoke with told us that they liked the activities on offer and said there was always something to do. One person said "every Friday we have a sing song with the pianist which is good fun". They also told us the "staff take me to the library as I love to read and have been going since I was little".

Another person told us "I can go out whenever I want – don't really like to go too far as I'm not that confident anymore, I like to go out with the staff or family as they support me".

Another person told us "I feel lucky to have found a place like home" and told us how accommodating the home has been: "I was worried about leaving my cat behind if I moved in, but the manager told me it wasn't a problem for me to bring the cat and the others here seem to like the cat too".

We visited Merryfields on 7th November 2011 and we noted that peoples clothing was clean, which showed that their personal needs were attended to and that their dignity was respected. One person told us " I have two baths a week as I like the shower more but if I wanted more baths I could have it, its not a problem the staff are very obliging".

Everyone we spoke with told us they felt safe and were happy living in the home.

Other evidence

In the bedrooms of people that we visited we saw that they had a copy of the home's handbook. The handbook provided information about the services provided in the home and was pinned up on a notice board along with details about their key worker (designated member of staff).

We saw that staff treated people with respect and sought their agreement before providing any support or assistance. One member of staff told us "I treat people how I want to be treated, not patronised, given a choice to make an informed decision".

A relative we spoke with told us "the activities are good, there is plenty for people to do or not if they don't want to and they always seem to be enjoying themselves". Another relative said "the home tries to accommodate peoples' needs and likes to take them out as much as possible. The owners often take the residents out on trips and get involved. One resident here used to love going to the football and they are being taken to see Ipswich Town in a few weeks by the manager."

A member of staff talking about the activities on offer in the home said "all residents are encouraged to take part and get involved in the daily activities but we respect their choice if they don't get involved". They also said the home "tries to get the balance and do 1:1 activities with people if they don't like group participation, that way no one is left out".

The home employs an activities coordinator and during the visit we saw people taking part in group activities such as a quiz and doing gentle exercises with a mobility coach who visited them once a week. We also saw a member of staff sitting in a room reading to a person who was in bed.

The manager told us that as far as possible people were involved in making decisions about their care. Where this was not possible because of capacity issues the home worked closely with their families or independent advocates acting on the persons' behalf.

When asked to, providers are required to demonstrate their compliance to us across the whole of the service at a location level. The Provider Compliance Assessment (PCA) is a self assessment tool that has been designed to help providers monitor compliance with the essential standards of quality and safety.

The manager gave us a copy of the Provider Compliance Assessment (PCA) for this

outcome group. It told us that "All residents and those using our services are made aware of their rights and the risks involved in the care process, whilst balancing choice, safety and preferences." Information in the PCA detailed how people who used the service were involved in the assessment and care planning process.

The manager told us that to promote rights and choices for people who used the service the home had a person centred approach and regularly consulted people about their needs, wishes and preferences.

We looked at four people's care records. Information in the care plans was detailed and individual to each person. People's choices and preferences were reflected in the care plans and written in a way that promoted independence.

Each of the care records we looked at held a photograph of the person, a description of their daily routines and their dietary requirements. The care plans also included information of people's preferences, such as their preferred form of address and how their dignity and privacy was respected and met.

The manager told us that the service undertook regular reviews of care plans, encouraged feedback and had quality assurance processes in place to improve service delivery.

Our judgement

People who live in the home are involved in decisions about their care and support.

They have their privacy, dignity and independence respected.

The provider is compliant with this outcome.

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 five people who lived in the home. They all said they were happy and positive about the care and support they received. They also confirmed they had personal care plans that cover the support and assistance they require.

Everyone we spoke with told us the staff were kind and caring and knew them well and understood their needs

Other evidence

Relatives we spoke with during our visit told us they were happy with the level of care and support given and said the staff were "very professional always nice" and "they make a fuss of them". One relative told us "I can't find anything to fault and I am very picky".

During our visit we spoke with a General Practitioner (GP) carrying out a follow up visit for one of the people living in the home. They told us that they had no concerns about the home and were satisfied it offered a good service and standard of care to people who lived in the home.

We looked at four people's care records. Information in the care plans was detailed and individual to each person, reflected people's choices and preferences and written in a way that promoted independence.

The manager told us that daily records for people who lived in the home were completed on the 'Care Doc' system, which could be accessed by staff on the home's

computer. A member of staff told us "Care Doc is very popular with staff as it captures up-to-date information which we can respond too; gives us an insight into peoples nuances, likes and dislikes to help tailor the care to be more person centred".

The provider showed us an emergency admission pack that had been introduced into all of the resident's care plans and was used to accompany a resident to hospital. The pack contained key information about the individual including personal details; a photograph, description of their medication, medical conditions, contact details for the home and their next of kin. The provider told us that feedback from other healthcare professionals including the ambulance service about the pack had been very positive and it had "greatly assisted in the transfer of residents to hospital and back to the home".

The Provider Compliance Assessment (PCA) for this outcome told us about the assessment and care planning process and what the service did to ensure people received safe, effective and personalised care for example: "Upon admission all new residents complete a personalised Care Plan with a senior member of staff. This takes into account their choices made whilst in a residential setting".

Information in the home and discussions with staff and people showed us that people were supported to feel socially included and engaged through the provision of activities and outings.

Our judgement

People who live in the home receive good care and support that meets their individual needs.

The provider is compliant with this outcome.

Outcome 05: Meeting nutritional needs

What the outcome says

This is what people who use services should expect.

People who use services:

* Are supported to have adequate nutrition and hydration.

What we found

Our judgement

The provider is compliant with Outcome 05: Meeting nutritional needs

Our findings

What people who use the service experienced and told us

People told us they enjoyed the food in the home and were given plenty of choice and variety at meal times. They also told us they were given the choice where they took their meals. One person said "if you have ideas or requests you can fill out a form or mention it at the monthly residents' meeting and they listen to what you say, we suggested we have real fish and chips from the local chippy and we now have that once a fortnight which we all love".

Other evidence

During our visit we looked at the menu on display in the dining room and saw that people were offered a choice of the day's main lunch time meal or an alternative from the light bite menu if they preferred

When lunch was served it looked well presented and appetising and residents told us they had enjoyed the meal.

The manager told us that the menu was discussed at residents' meetings with suggestions put forward to the Chef.

A relative told us "the food is good and they (the staff) always offer choice at meal times. Throughout our visit we saw staff offering people living in the home hot and cold drinks and there was fresh fruit available in the dining room".

We looked at people's care records and saw that people's nutritional needs were assessed and weight charts in place to monitor and record any changes in an

individual's weight. A Malnutrition Universal Screening Tool (MUST) was in place to determine the risk of developing malnutrition and check skin viability and records were kept on the home's Care Doc system. Where a person was identified at risk of poor nutrition or dehydration, staff implemented a process of regular monitoring of diet, fluid intake and weight.

The Provider Compliance Assessment (PCA) for this outcome told us that people who lived in Merryfields completed a pre admission form on entering the home, where they expressed their food and drink preferences. These were recorded onto their personal care plan and dietary requirements reviewed every 6 weeks with the resident. In the event of any food related health changes, action is taken in the form of consulting a GP or dietician. The PCA also told us the home's Chef visited each person who lived in the home daily to discuss their food choices and whilst the home had set meal times, food was available 24 hours a day on request.

Our judgement

People's nutritional needs are met through proper planning and monitoring and the provision of appetising meals.

The provider is compliant with this outcome.

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

We spoke with five people who lived in the home. They told us they felt safe and trusted the manager and staff in the home. They also told us they knew how to report concerns and would speak with a member of staff or the manager if they had concerns and were confident that the matter would be dealt with in a timely manner. Everyone we spoke with told us they were treated with dignity and respect at all times

Other evidence

There have been no safeguarding issues reported.

Information in the Provider Compliance Assessment (PCA) for Outcome 4 told us staff received appropriate Safeguarding of Vulnerable Adults (SOVA) training in line with company policy and all issues of concern were referred to the local authority.

The manager told us that staff were provided with comprehensive training as part of their induction which included safeguarding procedures. We looked at three staff files and saw that required checks had been carried out as part of the recruitment process and the staff had received safeguarding training.

Staff we spoke with during our visit explained their understanding of the different ways abuse could occur and they were familiar with the safeguarding procedures and whistle blowing policy in place in the home.

Our judgement

There are processes in place to safeguard the people who live in the home from abuse.

The provider is compliant with this outcome.

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

People told us they were happy with the level of cleanliness at the home. One person said "they (the staff) keep it beautiful here".

Other evidence

During our visit a relative told us "there is always a clean smell in the home, they (the staff) are immaculate with their cleaning - it's never dirty or unkempt".

We looked at the home's Infection Control Policy which showed us that the home had implemented systems to manage and monitor the prevention and control of infection. The document also identified that the home had risk assessments and policies and procedures in place to protect the health, safety and welfare of people. .

We looked at staff files and saw that staff had received training in Infection Control as part of their induction and the manager told us that refresher training was regularly provided.

We looked at the most recent quality audit report which showed the views of people living in the home. They rated the level of cleanliness of the home as good and excellent.

During our visit we saw that the home was clean and hygienic and we did not observe any poor practice concerning infection control.

Our judgement

People live in a home that is kept clean and provides them with a pleasant and safe

environment.

The provider is compliant with this outcome.

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 talk with anyone about their medication during our visit to the home.

Other evidence

We looked at the home's Medication Policy which showed medication was administered only by senior members of staff. We looked at their records which showed that these staff had received training in medication administration, assistance and support. The training was updated annually.

The recording of the administration of medicines on the medicine administration records (MAR) was appropriately completed in the sample seen.

We saw medication being administered to people in a respectful way.

Our judgement

People who live in the home are assisted with their medication safely.
The provider is compliant with this outcome.

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 we spoke were told us they felt well looked after by the staff at Merryfields. They said the staff were "wonderful" and "very good and very caring".

One person told us "staff know what they are doing and are well trained".

Other evidence

A person's relative told us "staff work desperately hard to get it right". Another relative said the "staff are kind and if I have any concerns or worries I can talk to the staff who are able to accommodate or help".

Information in the Provider Compliance Assessment (PCA) for this outcome told us how staff were recruited, supported and trained.

During our visit we asked staff if they felt they were supported to do their job and they told us they had regular supervisions and felt able to raise any issues with senior staff and management and were confident that these issues would be dealt with appropriately.

Staff we spoke with told us they "loved their job", it's a "nice place to work" and they "work as a team". One member of staff said "we have time to spend with the residents; there is enough staff to do that and for it not to be rushed". Another member of staff told us "there is good communication in place which keeps us informed of what is going on". They also told us that there were regular staff meetings in place where "you can raise concerns, discuss issues it's very open and transparent".

We asked about training and staff we spoke with told us they had received their mandatory training and had received refresher training when required. They also told us they had been encouraged to undertake relevant qualifications and records we looked at confirmed this. One staff member told us the home "takes their time to train you and make sure you have understood what to do – it's not rushed".

The manager told us that staff were given a full and detailed induction, undertook mandatory training and received refresher training and updates where required. We looked at three staff files and saw that training and supervision processes were in place.

Our judgement

People who live in the home have their health and welfare needs to be met by care workers who are appropriately trained and supervised.
The provider is compliant with this outcome.

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 we spoke with told us they felt comfortable talking to the staff about any issues that they had. They told us that they have been asked for their views about the care and support they received and their views and opinions are acted upon.

Other evidence

During our visit we asked the manager what internal monitoring and assessing of the service was in place. The manager told us they carried out satisfaction surveys for people living in the home, staff and visitors every three months.

We looked at the results from the latest survey for people who lived in the home. People were happy with their rooms, felt the place was clean, and liked the food and the choice available.

The manager advised us that internal reviews of people who used the service regularly took place with relatives and professionals to ensure that people's health and care needs were met in the most appropriate and respectful way.

The manager told us routine audits were in place to review falls and accidents to monitor trends. Policies and procedures were reviewed annually and updated accordingly. Risk assessments to support the safety of people living in the home and the staff working there were reviewed and updated where necessary.

We looked at the Issue Response Sheet used to capture any concerns or feedback

people living in the home and relatives had. The form listed the issue/concern and the actions taken to address the concern and the outcome. The forms were reviewed by the manager and completed forms kept on the individual's file. We looked at a completed form and saw that the issue raised had been dealt with in a timely manner.

We spoke with people's relatives at the home they told us the manager was always available to talk to them. One person's relative said: it's "very transparent here there are forms you can use to raise concerns or issues which the manager deals with – he does a fine job". Another visitor talking about the Issue Response Sheet said "I have no complaints, but if I did I would put them in writing to the manager or complete one of the forms in reception the manager had brought in which you can list your concerns on. It is easy to use, a good idea".

The manager told us there were monthly "resident's meetings" which took place offering a forum for people living in Merryfields to express their views. We looked at the last resident meeting minutes and saw that issues and suggestions had been raised to the manager and acted upon.

The manager advised us that they were in the process of pulling together a comprehensive list of all the internal audits and checks they had in place to monitor and assess the quality of the service they provided and document what actions they had taken as result of issues or complements raised.

Our judgement

People live in a home where the quality is monitored and their contribution is considered important.

The provider is compliant with this outcome.

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

Document purpose	Review of compliance report
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