

Review of compliance

BELVEDERE HOUSE

Region:	South East
Location address:	Woodmansterne Lane Banstead Surrey SM7 3HA
Type of service:	Care Home
Date the review was completed:	15 December 2010
Overview of the service:	<p>The service is operated by a registered charity THE ROYAL ALFRED SEAFARERS' SOCIETY and provides support and care to adults.</p> <p>The support the service provides ranges from nursing, personal care, treatment of diseases, disorders and injuries and diagnostic and screening procedures.</p> <p>Belvedere House is a care home with nursing for up to fifty six service users.</p> <p>The home is purpose built and located in</p>

	<p>Banstead in Surrey and close to public amenities. Accommodation is on two floors accessed by stairs or a lift and comprises of lounges, dining rooms, a kitchen, laundry room, bathrooms, toilets, showers and single bedrooms with en-suite facilities.</p> <p>The home has a large garden, which is private, secure, and accessible with private parking available.</p>
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Summary of our findings for the essential standards of quality and safety

What we found overall

We found that Belvedere House was compliant in 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.

:

- Respecting and involving people who use services
- Consent to care and treatment
- Care and welfare of people who use services
- Meeting nutritional needs
- Cooperating with other providers
- Safeguarding people who use services from abuse
- Cleanliness and infection control
- Management of medicines
- Safety and suitability of premises
- Safety, availability and suitability of equipment
- Requirements relating to workers
- Staffing
- Supporting workers
- Assessing and monitoring the quality of service provision
- Complaints
- Records

How we carried out this review

The provider completed and returned a Provider Compliance Assessments (PCA) to us when requested. The PCA is a tool that providers can use as a routine internal assurance record, where they assess who they is meeting the essential standards.

We then reviewed all the information we hold about this provider and carried out a visit on 19th December 2010.

We talked to people who use the service and or their representatives to gain their views about the care and support that they receive.

We talked to staff, we looked at some records in the service's office, and we looked at some of the records of people who use services.

What people told us

People who use the service told us that they have experienced a good level of respect they stated that staff always knock on their door before they come into the room and always ask her permission before undertaking her care.

They were respected by staff, treated with dignity when receiving care, allowed privacy and supported to be more independent or to maintain their independence.

Staff were described as being very patient and understanding and would work at the pace of the person they were providing care for.

The staff always ask permission before assisting in all aspects of care.

One person who uses the service told us that the a member of staff had asked him if he wanted any relative to be involved in planning his care package and if they wanted anyone else involved outside the family members.

They receive care that meets their needs and said that the staff were "always busy but never to busy to help, always willing to listen and are very kind" when providing care.

One person who recently moved into the service told us that before they moved in someone from the service came and had a long chat with her and her family to make sure that Belvedere House could meet her needs. The care plan that was developed included the needs assessed during their chat and other information the service received from the GP and after a recent hospital discharge.

People who uses the service told us that the food is "very nice and there is always something I like" and "always looks and tastes very nice" and that they were looking forward to their Christmas lunch.

What we found about the standards we reviewed and how well Belvedere House 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 Belvedere House was meeting this essential standard.

Outcome 2: Before people are given any examination, care, treatment or support, they should be asked if they agree to it

Overall, we found that Belvedere House was meeting this essential standard.

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

Overall, we found that Belvedere House was meeting this essential standard.

Outcome 5: Food and drink should meet people's individual dietary needs

Overall, we found that Belvedere House was meeting this essential standard.

Outcome 6: People should get safe and coordinated care when they move between different services

Overall, we found that Belvedere House was meeting this essential standard.

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

Overall, we found that Belvedere House was meeting this essential standard.

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

Overall, we found that Belvedere House was meeting this essential standard.

Outcome 9: People should be given the medicines they need when they need them, and in a safe way

Overall, we found that Belvedere House was meeting this essential standard.

Outcome 10: People should be cared for in safe and accessible surroundings that support their health and welfare

Overall, we found that Belvedere House was meeting this essential standard.

Outcome 11: People should be safe from harm from unsafe or unsuitable equipment

Overall, we found that Belvedere House was meeting this essential standard.

Outcome 12: People should be cared for by staff who are properly qualified and able to do their job

Overall, we found that Belvedere House was meeting this essential standard.

Outcome 13: There should be enough members of staff to keep people safe and meet their health and welfare needs

Overall, we found that Belvedere House was meeting this essential standard.

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

Overall, we found that Belvedere House 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

Overall, we found that Belvedere House was meeting this essential standard.

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

Overall, we found that Belvedere House was meeting this essential standard.

Outcome 21: People's personal records, including medical records, should be accurate and kept safe and confidential

Overall, we found that Belvedere House was meeting this essential standard.

Action we have asked the service to take

We have not asked Belvedere House to undertake any further actions.

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

Our findings

What people who use the service experienced and told us.
A person who used the service told us that they have experienced a good level of respect they stated that staff always knock on their door before they come into the room and always ask her permission before undertaking her care.
There was consistent feedback from the people who live at the service that they were respected by staff, treated with dignity when receiving care, allowed privacy and supported to be more independent or to maintain their independence.
A visiting carer stated that whenever they come to the service to visit they are always allowed privacy to sit and chat without being interrupted by staff.
The staff were described as being very patient and understanding and would work at the pace of the person they were providing care for.

Other evidence

Members of staff demonstrated during the visit that they are aware of the needs of the people who live at the service and are trained to be respectful and ensure that their opinions are valued. This was confirmed by the number of meetings held by the service and the people who live there and action the service have introduced as a result of the comments they have received.

The manager stated that an advocacy services from independent sources is available to the people who live at the service. During the visit the advocacy service was seen to be advertised in the Home for people and their families to use if required.

The manager stated that the people who live at Belvedere House are respected and their opinions are valued.

The staff team consulted demonstrated that they understood the rights of the person they were supporting and knowledge of the care and treatment of the people they were supporting and were clear about the persons rights to make choices. One person indicated that they wanted to attend the Christmas concert the staff assisted this person into the room, at this point the person decided that they no longer wanted to join in and was supported to leave with minimum of fuss and maintaining their dignity.

A review of the training offered to the staff team demonstrated that the provider is pro active in ensuring staff are equipped with the skills to support the people who live at this location. The training offered to staff was designed to provide them with clear guidance when helping the people living there to maintain their dignity, offering them respect and to maintain their privacy. Staff also have training in equality and diversity.

The service organises a number of event at the location and in the local community. This includes fates, concerts, shopping trips and garden parties. The people who live at the service have access to local community events, such as libraries, churches, elections and outings. The service has its own transport to access the recourses of the local community.

Our judgement

There are appropriate processes in place to ensure that the people who live at Belvedere House are provided with choices, their dignity is upheld and they are provided with appropriate levels of privacy. Measures have been put in place to identify and support diversity amongst the people who live at the service and the staff are encouraged to promote independence.

The service has a strong commitment to providing opportunities for the people who live there to access and participate in the service and the local community.

Overall we found that Belvedere House was meeting this essential standard.

Outcome 2: Consent to care and treatment

What the outcome says

This is what people who use services should expect.

People who use services:

- Where they are able, give valid consent to the examination, care, treatment and support they receive.
- Understand and know how to change any decisions about examination, care, treatment and support that has been previously agreed.
- Can be confident that their human rights are respected and taken into account.

What we found

Our judgement

The provider is compliant with outcome 2: Consent to care and treatment

Our findings

What people who use the service experienced and told us
A person who uses the service told us that the staff always ask her permission before assisting her in all aspects of her care. In addition, this person continued to inform us that at all times she is encouraged by the staff and managers to ask questions about the care or treatment she was getting.
A visiting carer stated that their relative who had moved into the service was supported to make as independent choices as possible and that their rights were always seen as a priority over the needs of the service.
Another visiting carer told us that whenever their relative has a review their relative invites them to come along and have some input into the meeting "in case he forgets anything".
This was supported by one person who uses the service told us that the a member of staff had asked him if he wanted any relative to be involved in planning his care package and if they wanted anyone else involved outside the family members.

Other evidence
The staff who were available to have a discussions with us were very clear in their understanding of the role they play in supporting the people who use the service

appropriately always asking for permission, allowing a person to have choices and on occasions to support a person if the change their and in regards to their care or treatments.

Members of the staff team were seen during the visit to be fully engaged in the activities of supporting the people who live at the service. Staff members were seen asking for permission to assist one person out of a chair and on another occasion when asking is a person wanted their medication then or after they had finished their coffee.

The service has a well developed system of reviews in operation to ensure that care and medication plans are reviewed on a regular bases to ensure that any changes identified in the needs of the people who live there can acted upon with maximum effect.

A random selection of care plans seen during the visit provided evidence that they are reviewed frequently and are signed and dated by a representative of the home and the person receiving care or their representatives.

The family was invited to the planning session only once the home had received the permission from their relative living at the home.

The final care plan was agreed by the person living in the home and their family and has been reviewed on several occasions.

The provider has indicated that the people who live at the service are fully engaged in the care provisions they are provided at Belvedere House. The provider stated in the PCA that were ever possible the service will always attempt to gain the consent of the individual prior to offering care, if the individual is unable to give consent their families or their representatives are involved in the care planning if appropriate.

The manager stated during the visit that it is essential that the people who live at the home are fully involved where ever possible in the planning and implementation of their package of care.

During the visit the staff demonstrated their knowledgeable of the rights of the people who live at the service and the appropriate measure that they must use and comply with under the Mental Capacity Act 2005.

Our judgement

There are appropriate procedures in place to ensure that people who live at the service are able to give informed consent to their treatment and care.

The service has ensured that where a person can not provide appropriate consent a representative of the person will be asked to provide the consent.

The service undertakes regular reviews to ensure that the consent process is being adhered to by staff when providing care.

Belvedere House has made appropriate arrangements to comply with the Mental Capacity Act 2005.

Overall we found that Belvedere House was meeting this essential standard.

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 protect 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
One person who recently moved into the service told us that before they moved in someone from the service came and had a long chat with her and her family to make sure that Belvedere House could meet her needs. The care plan that was developed included the needs assessed during their chat and other information the service received from the GP and after a recent hospital discharge.
A visiting carer informed us that prior to their relative moving into the service they were fully assessed by the service and all aspects of their health and social needs were discussed "to enable them to build a better picture of" the need of their family member before or if they moved into the service. They continued to tell us that in the small time their family member has been in the service their care needs have been reassessed on "several occasions" as they have settled into life at Belvedere House.
Another person who uses the service stated that they receive care that meets their needs and said that the staff were "always busy but never to busy to help, always willing to listen and are very kind" when providing care.
Other evidence
The provider has stated that regular planned reviews are a main part of the care and

welfare of the people who use the service. Reviews are increased when there is a need to make more frequent updates to meet the needs of an individual.

The staff on duty were seen to be in appropriate numbers to meet the individual and group needs of the people who use the service. The care that was being provided in a way that was appropriate to the needs of the individuals and carried out in a dignified manner.

We witnessed several people being assisted by staff to eat, mobilise, and undertake an activity and to attend a Christmas concert, in all cases the staff involved demonstrated an appropriate and effective level of care ensuring the persons rights were being respected.

Our judgement

The service has introduced policies and procedures to ensure that the people who use the service receive appropriate treatment and care.

The people who use the service have their needs assessed prior to being offered a place at Belvedere House, these assessment are used as the bases of their care plans and are reviewed at regular intervals.

In the event of gradual or sudden changes to the needs of a person who uses the service there are provisions in place that will ensure the correct action is taken to maintain their health.

Overall we found that Belvedere House was meeting this essential standard.

Outcome 5: 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 5: Meeting nutritional needs

Our findings

What people who use the service experienced and told us
One person who uses the service told us that the food is "very nice and there is always something I like".
This was supported another person who stated that the food "always looks and tastes very nice" and that they were looking forward to their Christmas lunch.
A visiting carer stated that the service is always looking for ways to improve the meals they serve, to introduce healthy options and to have themed events for "high days and holidays".

Other evidence
The provider stated in the PCA that "All residents have their nutritional requirements assessed on admission. Any risks identified are evaluated and included in the individuals care plan.
The catering staff are involved in the residents' dietary requirements so that their needs can be met.
The catering manager has details of each resident's dietary requirements in the kitchen, including likes and dislikes and intolerances.
Meal times are a quiet time. Staff assist those who require help to maintain their independence.
Staff were seen supporting three people who use the service to eat their breakfasts

this was done in a dignified manner and at a pace that meet the needs of the individuals they were supporting.

The service has process in place to ensure that during the day the people who use the service are offered drinks throughout the day. During this visit staff were seen to be offering drinks to the people who use the service. The staff gave the individuals a choice of drinks to pick from either hot or cold.

Our judgement

Belvedere House has robust process in place to ensure that the people who use the service experience good nutrition and hydration.

The people who use the service have their nutritional and hydration needs assessed to ensure that they remain healthy.

The catering staff make every effort to ensure that the people who use the service are offered appropriate choices that take into account the individuals preferences and divers needs.

The staff are in sufficient numbers and have the correct training to ensure that they support the people who use the service appropriately.

Overall we found that Belvedere House was meeting this essential standard.

Outcome 6: Cooperating with other providers

What the outcome says

This is what people who use services should expect.

People who use services:

- Receive safe and coordinated care, treatment and support where more than one provider is involved, or they are moved between services.

What we found

Our judgement

The provider is compliant with outcome 6: Cooperating with other providers

Our findings

What people who use the service experienced and told us
A person who uses the service told us that they have just had a review of their care, this included their GP, care manager and their family.
Another person living at Belvedere House stated " I saw the manager before I came in and she also talked to the hospital I was in before so she knew about what I needed".
A care manager of a person who uses the service told us "that the provider and staff were very cooperative and informative when they needed information".

Other evidence
The PCA stated that the service users all receive an annual care review. This can be a multi disciplinary meeting to which all agencies involved in the service users care are invited and asked to participate in, a care plan is agreed and updated, this group also includes the Service user and their families.
The service regularly make contact with doctors and other medical practitioners for the previous medical history of people in the home. The provider stated that the compiled document includes previous medical history and current medication. Copies of this are kept in each person's care plan and are sent with them if they are transferred to hospital or another care plans.
A random sample of a care plans seen demonstrated that the location involves other

providers in the provision of care to the people who live at the home. The care plans demonstrated that multi agency reviews take place where care managers, medical professionals and in places advocates have been involved in the design of the care package being offered to the person living in the home.

In addition the manager stated that the home will regularly cooperate with other professionals, especially in respect to potential complaints and safeguarding, if and when these arise.

Our judgement

The service has made provisions to ensure that relevant and appropriated information is shared between agencies when a person who uses the service is moving into Belvedere house or when they are being admitted to hospital.

According to external professionals the information that is supplied is relevant and passed in a timely manner.

The service has procedures in place to ensure that all information is shared under the auspices of the Data Protection Act 1998.

Overall we found that Belvedere House was meeting this essential standard.

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, on this occasion speak to people regarding this outcome so cannot report what the people using the service said.

Other evidence
Belvedere House has clear policies and procedures on the protection of people, which includes clear procedures for the safeguarding of vulnerable adults.

The service has demonstrated that they have awareness of the local authority safeguarding vulnerable adults from abuse procedures and they are aware of their responsibilities.

Staff receive safeguarding training during induction, which is also updated annually. The provider stated in the provider compliance assessment that staff are made aware of the procedures to follow if they encounter alleged or suspect abuse may have occurred.

During this training staff are made aware of signs and symptoms to look out for if someone may be a victim of abuse.

We sampled a random selection of staff training records, which confirmed that they receive safeguarding training. Discussion with some members of staff also confirmed this.

Information that we have received has indicated that incidents of a safeguarding matter have been reported appropriately and promptly to the local authority.

A training module covering, choice, dignity and respect is provided during staff induction. This is monitored through random checks and work place supervision of staff.

The service stated that they have a policy on dealing with challenging behaviour, violence and aggression.

Our judgement

People using this service are protected from abuse or the risk of abuse because the service has systems in place, which ensures that they identify and prevent abuse from happening. They respond appropriately when it is suspected that abuse has occurred or is at risk of occurring.

Overall we found that Belvedere House was meeting this essential standard.

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
A person who lives at the service stated “the home is always spotless, the staff work effortlessly to keep the place clean”.
A carer visiting the service stated that the home is always nice and the way it is always kept clean and tidy is excellent.

Other evidence
The home was clean and fresh throughout, the service has a dedicated cleaning team to ensure that it is keep clean at all times.
All areas of the service were clean including bathrooms.

The staff informed us that aprons and gloves were always available,
Disposable towels, foot operated bins and soap dispensers in all bathrooms and no towels or washcloths left out.
The service has supplies of gel hand wash in place throughout the home for the use of staff and visitors.
There have been no issues regarding cleanliness or infection control brought to the notice of the CQC.
The Home has a Lead Nurse responsible for infection control. This newly created post has a job description to ensure best practice. During the registration of the

service this was an area where the provider declared non compliance this was considered minor but has been fully resolved.

The provider stated in the PCA that "There are sufficient recourses available within the training budget and the cleaning budget to implement an effective Infection control regime to reduce the risk to residents. Training on infection Control is undertaken by the Lead Nurse and is also available to staff through E-Learning. Infection Control transfer sheets are used with each transfer of a resident. Infection Control audits have taken place and action taken to replace equipment as a result. Risk assessments are in place both within the residents care plans and within the general environment of the Home. Consultation is taken from the GP's and the PCT Infection Control team when required".

The service has robust infection control procedures in place. Staff are provided with protective clothing and equipment such as latex/non latex gloves, aprons and foot covers. This was confirmed by discussion with two members of staff. Staff are also provided with infection control training.

The provider stated that staff should adhere to the organisation's hand washing policy and ensure that their hands are thoroughly washed and dried after providing care.

Our judgement

The service is maintained at a high level of cleanliness by a team of domestic staff. People who use the service are protected by their infection control policies and practices.

Overall we found that Belvedere House was meeting this essential standard.

Outcome 9: 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 9: People should be given the medicines they need when they need them, and in a safe way

What people who use the service experienced and told us
One person who lives at the service stated that "They give me my tablets when I need them, I can't do it myself".

Other evidence
We observed that nurses were following the medication policy as stated in the Provider Compliance Assessments document. The service requires each Registered Nurse (RN) to sign to say they have read the medication policy to ensure that they understand and will adhere to the guidelines set in it. In addition the service accesses The Nursing and Midwifery Council (NMC) guidelines on The Administration of Medication and the Royal Pharmaceutical Society professional guidance, within the Medication folder and the current version of the BNF. Only RN's handle medication within the Home and each one has a yearly medication competency form to complete"

We witnessed the nurses on duty administrating medicine to people living on both floors of the home. The nurses were seen to be following the guidance stated in the homes policies and procedures.

Staff record the medicines they have given people on printed Medicines Administration Records (MAR) sheets provided by the pharmacy. A random review of the MAR sheets was undertaken the records seen had been completed by an appropriately trained member of staff and indicated that people have been given their medicines as prescribed.

A review of how medicines are stored and the records made of the receipt administration and disposal of medicines was conducted. We found that the storage of medicines was satisfactory and followed the service policies and procedures and current guidance for the safe storage of medications.

Where controlled drugs are concerned the policy of the service is that two RGN's sign to indicate that the medication has been given and by whom. A review of the controlled drugs book and the MAR sheets demonstrated that the staff follow the procedures correctly.

The manager has instigated a system to highlight that a person using the home has been prescribed a controlled drug, the introduction of this is to minimise the possibility of medication errors in the future.

Some people are prescribed medicines to be given "when required". We saw sheets in place giving information for staff to help make sure these medicines are given consistently and appropriately. There was evidence that these sheets had been completed at all times.

Our judgement

The service has appropriate arrangements in place for the recording handling, safekeeping, safe administration and disposal of medicines.

Overall we found that Belvedere House was meeting this essential standard.

Outcome 10: Safety and suitability of premises

What the outcome says

This is what people should expect.

People who use services and people who work in or visit the premises:

- Are in safe, accessible surroundings that promote their wellbeing.

What we found

Our judgement

The provider is compliant with outcome 10: Safety and suitability of premises

Our findings

What people who use the service experienced and told us
One person who uses the service stated that the all areas of the home are open to us, the floors are all flat and there is a lift to help me visit my friend on the first floor.

Other evidence
The tour of the premises demonstrated that the home appeared safe, secure, clean and presentable and that relevant safety checks take place. "The Home has facilities appropriate for the resident group.

The service maintains its heating, lighting and other equipment regularly to ensure that the people who use the service are safe. A review of the maintenance log and programme demonstrated that the service act promptly to any issue concerning maintenance within Belvedere House.

The service is accessible to all the people who use it and meets the requirements of Disability Discrimination Act 1995".

Staff informed us that they complete a health and safety training during there initial induction when starting to work at the service.

The service has a contract for the disposal of clinical waste, the contract is compliant and meets current legislation.

The service has Control of Substances Hazardous to Health (COSHH) system in place to identify risks with any products used within Belvedere House. Members of staff stated that they understood COSHH and if they were unsure of a product they demonstrated that they knew where to access the information to ensure that the product was suitable to be used at the service.

The provider stated that monthly health and safety monitoring and checks take place throughout the service to ensure that the people who use the service are safe and secure.

Fire training takes place and both staff and people that use the service are aware of the correct procedures to be used.

Systems in place to carry out tests for legionella and policies in place including Personal Emergency Evacuation Plans (PEEP) to ensure that evacuation of premises carried out safely.

Our judgement

The service ensures that people who receive the service and staff are protected against the risks of unsafe or unsuitable premises.

Overall we found that Belvedere House was meeting this essential standard.

Outcome 11: Safety, availability and suitability of equipment

What the outcome says

This is what people should expect.

- People who use services and people who work in or visit the premises:
- Are not at risk of harm from unsafe or unsuitable equipment (medical and non-medical equipment, furnishings or fittings).
 - Benefit from equipment that is comfortable and meets their needs.

What we found

Our judgement
The provider is compliant with outcome 11: Safety, availability and suitability of equipment

Our findings
<p>What people who use the service experienced and told us We did not, on this occasion speak to people regarding this outcome so cannot report what the people using the service said.</p> <p>Other evidence The provider told us that us that the people who use the service have access to a range of equipment to ensure that they can remain as mobile and active as possible. The service has a range of items including hoists and slings, bath chairs and commodes for the use of the people who live at the service. There is clear documentation in place to show that the equipment at Belvedere House is regularly serviced by appropriate contractor. Staff training records seen indicate that they have been trained to use all the equipment currently used by the people who use the service. If during the assessment or a review of a person to use or how uses the service staff feels further equipment may be necessary to deliver care safely, an occupational therapy assessment will be requested. Systems are in place to ensure that any incident or accident while using equipment</p>

must be reported immediately.

Our judgement

People who use the service are protected, specialist advice and equipment will be sourced to meet their needs and that a risk assessment assessment will be completed to ensure that they are continually protected.

Overall we found that Belvedere House was meeting this essential standard.

Outcome 12: Requirements relating to 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 staff who are fit, appropriately qualified and are physically and mentally able to do their job.

What we found

Our judgement

The provider is compliant with outcome 12: Requirements relating to workers

Our findings

What people who use the service experienced and told us
We did not, on this occasion speak to people regarding this outcome so cannot report what the people using the service said..

Other evidence
Recruitment procedures were discussed with the staff, the four staff spoken with said that they had to wait until their CRB came through prior to starting at the service and that their references were in place.

A random sample of staff recruitment records was undertaken. Information seen demonstrated that a full employment history had been requested for applicants and written references had been obtained. Interview notes were also available. Checks had been carried out with the Independent safeguarding authority (ISA) and Criminal Records Bureau (CRB) checks had been conducted.

The registered manager informed us that staff are only allowed to work at the service when this information has been received. This ensures that people who use the service are safe and that their health and welfare needs are met by staff that are fit and appropriately qualified.

New staff receive Induction training, which is based on recognised good practice. Induction training uses a variety of teaching methods.

Staff induction also covers information and training about the services policies and procedures, equality and diversity, safe and sound, principles of care, health and safety (including fire safety), moving and handling, food hygiene, medication, catheter care, dementia awareness, bed care and strip wash plus introduction to pressure sores must be passed.

The home has a programme of planned training in place and all members of staff have an individual training record. The home has a good commitment to the National Vocational Qualification (NVQ) at the time of the visit 07/12/2009 64% of the staff had obtained an NVQ.

Two members of staff confirmed to us that they had received induction when they first commenced employment at Belvedere House.

Our judgement

The people who use the service are supported by staff that are fit and appropriately qualified. The service has effective recruitment procedures in place and they ensure that they carry out relevant checks when they employ staff.

Overall we found that Belvedere House was meeting this essential standard.

Outcome 13: Staffing

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 sufficient numbers of appropriate staff.

What we found

Our judgement

The provider is compliant with outcome 13: Staffing

Our findings

What people who use the service experienced and told us
One person who uses the service stated that "It's alright they are all very caring and they show me a lot of respect when they are helping me".
Another person living in the service told us that "Staff look after me, there are lots of us but they made sure my move into the home was done at my pace".
One carer visiting the home stated that "Staff here are kind, they are always very busy but never too busy to reassure the residents and to take time to just chat to them when they are distressed or feeling insecure".

Other evidence
The service has a clear management structure, which includes a manager, RGN's care staff and a team of ancillary workers.
The provider stated that the service is always adequately staffed at all times and if at any time more staff are required to ensure that the people who use the service are appropriately looked after this will be arranged.
A review of the staff rota on the day of the site visit demonstrated the number and grade of staff on duty to provide care to the people who live at the home was sufficient to meet their assessed care needs.
The service has demonstrated that they have taken steps to continue recruiting new staff and that the recruitment is improving.

Our judgement

People using the service are supported by sufficient numbers of staff to meet their needs.

The service continue to demonstrate that there is enough staff on duty who know the needs of people who live at Belvedere House.

Overall we found that Belvedere House was meeting this essential standard.

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, on this occasion speak to people regarding this outcome so cannot report what the people using the service said.

Other evidence
The provider stated in the PCA that the service ensures that regular supervision and appraisal are provided to all staff working at this location. The PCA indicates that appropriately qualified managers undertake the supervision of all staff.

The service ensures that training is updated regularly including, required training, which was confirmed by four members of staff that we spoke with and from training records that we looked at .

A random sample of staff training schedules, confirmed that these are kept up to date and demonstrated the commitment to the welfare of staff in their role of supporting the people who use the service..

The service demonstrated that staff had received a range of training specialist including medication Administration ,contenance catheter care, dementia awareness, Mental Capacity Act

and equality and diversity.

Members of staff also confirmed to us that a good range of training is available .

Staff confirmed that they receive both regular formal supervision and random checks while working in the home.

Our judgement

People using the service are supported by staff team who are encouraged and supported to improve their learning and development. Staff receive regular supervision and appraisal to ensure that they deliver care safely and to an appropriate standard.

Overall we found that Belvedere House 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 did not, on this occasion speak to people regarding this outcome so cannot report what the people using the service said.

Other evidence
Belvedere House has demonstrated that they it has systems in place for monitoring the quality of the service that people who use the service receive.
This includes monitoring of staff and monthly auditing systems to monitor and reduce potential risks to people.
We were informed by the provider that they carry out feedback surveys from people who use the service or where appropriate their representatives or careers. The information the service receives from the surveys is analysed and a report is produced and any points raised are used to improve the service.
A review of the most recent quality audit demonstrated that the service values feedback and uses it as a tool for improvement.
The service undertake four weekly reviews, this involves the people how use the service and or their representatives.
The series of reviews provides further opportunity to gain the people who use the

service feedback and views.

Our judgement

Belvedere House has systems in place to monitor the quality of the service's it is providing to the people who use the service.

Overall we found that Belvedere House was meeting this essential 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
The four people who use the service who talked to us all knew and understood how to make a complaint and to whom they should make the complaint to.
One visiting carer stated that they never had to make a complaint but that they and their relative knew where the complaints policy was and felt sure that if they had make a complaint it would be listened to.

Other evidence
There has been no complaints received by CQC since the registration of this location under the new legislation.

The service has a complaints procedure in place. During this visit we looked at the services complaints register. Clear information was recorded about any complaints, when they were received, investigated and any action that had been taken as a result of this information.
The manager and staff are however very prompt at reporting any incidents or concerns affecting the locations or the people who use the service.
The Provider sated in the PCA that the service has a robust complaint process that is open and accessible to the people who live their and the families and or

representatives. A copy of the complaint's procedure is provided with the people who use the service in their service user guide and in addition the service has copies of the complaint process on notice boards throughout the building.

Our judgement

Complaints and concerns will be listened to effectively the service has systems in place to deal with comments and complaints. The complaints policy is easily accessible throughout the service and is written in a way that is open and clear. Overall we found that Belvedere House was meeting this essential standard.

Outcome 21: Records

What the outcome says

This is what people who use services should expect.

People who use services can be confident that:

- Their personal records including medical records are accurate, fit for purpose, held securely and remain confidential.
- Other records required to be kept to protect their safety and well being are maintained and held securely where required.

What we found

Our judgement

The provider is compliant with outcome 21: Records

Our findings

What people who use the service experienced and told us
We did not, on this occasion speak to people regarding this outcome so cannot report what the people using the service said.

Other evidence
Belvedere House is registered with the Information Commission Office under the Data protection Act The service has systems in place ensuring that the records of the people who use the service and staff are up to date, held securely and that their confidentiality is maintained.
All information regarding the people who use the service and staff is maintained in secure and lockable cabinets to ensure that only those people who need access can gain access.

The service has a comprehensive range of policies and procedures, which are updated and reviewed regularly. A random sample of the policies and procedures highlighted review dates and changes if any.

Our judgement
The personal records of both the people who use the service and staff and other

records are maintained regularly and held securely in order to remain confidential.
Overall we found that Belvedere House 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 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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