

Review of compliance

Sisters of Nazareth Nazareth House - Lancaster	
Region:	North West
Location address:	Nazareth House Ashton Road Lancaster Lancashire LA1 5AQ
Type of service:	Care home service with nursing
Date of Publication:	September 2011
Overview of the service:	<p>Nazareth House is registered to accommodate 41 people in need of nursing and personal care. Accommodation is provided over three floors with 39 single rooms and 1 double room, all with en-suite facilities.</p> <p>Established in 1899 by the Sisters of Nazareth, the home is set in beautifully landscaped gardens, which includes a</p>

	wildlife pond. There is also a greenhouse for residents who may be interested in gardening.
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Summary of our findings for the essential standards of quality and safety

Our current overall judgement

Nazareth House - Lancaster 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.

What people told us

We spoke to a number of people living at the home, a director, area manager, acting manager, a number of staff, and a visiting practitioner. We also received comments from other professional agencies including social services and Lancashire Council's Contracts Monitoring Team, who told us they currently have no issues with the service.

Responses we received from people were very positive and included:

"Staff are wonderful, they can't do enough" .

"I had to wait some time before I could be offered a place".

" I have everything I need, you only have to look around to see that".

"I like everything about living her there is never a dull moment".

Staff we spoke to told us they enjoy their jobs and feel it is very rewarding.

Comments included, "I have worked here for some time and feel we work well together as a team".

"We get to know the needs of people using the service and we work well with them".

"I am very satisfied with every aspect of my care".

" I have everything I need, you only have to look around to see that".

"I like everything about living her there is never a dull moment".

What we found about the standards we reviewed and how well Nazareth House - Lancaster 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 the manager and staff make sure they take into account people preferences, and that this information is clearly recorded to encourage people who use the service to be involved in their care and treatment.

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

We found evidence the home delivers care treatment and support to people using the service by making sure their welfare is protected and their needs are met.

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

The service makes sure people are protected by providing access to training for all staff members.

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

Staff have access to a good range of training opportunities in order to carry out their roles effectively.

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 the service has systems in place which monitor the quality of service they receive.

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

People who use the service told us staff treat them with dignity and respect. They told us staff have time to spend with them and help them with personal tasks. One person told us, "The staff are always there for you they are so patient; nothing seems to be too much trouble".

Staff told us that they listen to people so they feel respected and their wishes are acknowledged. They told us they act in people's best interest. "Its important people feel listened to".

Two people we spoke to told us they had been involved in their care planning and review of their care. "I always feel involved, they tell me everything about my care and ask my opinion", "I feel they tell me about anything I need to know about my treatment"

Other evidence

We saw there is a range of information available to people using the service, which gives them advice and guidance about what they can expect if they choose to use the service.

During the site inspection some people came to view the home. They initially spent time

with the acting manager before being introduced to a resident who likes to be involved in showing people around the home and talking to them about the services it provides. The acting manager told us they find this useful because they are being told about the service by somebody who uses it.

Care plans we looked at have recently been reviewed and changes made. They contain a full range of assessment information gathered from various sources, as well as taking into account what people feel they need.

Two records we looked at showed us they were set out in a way which informed staff of people's needs and choices. As this home is based upon the principles of the Catholic faith they take into account people's spiritual needs as well. However, people of other denominations or none at all are welcome to live at the home. Comments included, "It's nice to be able to practice my faith here, with the sisters being available and the chapel on the premises", "I don't believe in any faith and it's not a problem here". Sisters of the Catholic order live within the grounds of the home and people told us they find their presence in the home of great comfort to them. "The sisters are always available to speak to, they were so good to my late wife".

Our judgement

We found the manager and staff make sure they take into account people's preferences, and that this information is clearly recorded to encourage people who use the service to be involved in their care and treatment.

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

People we spoke to told us they were very satisfied with the level of care they receive from staff. Comments included, "I am very satisfied with every aspect of my care", "I have everything I need, you only have to look around to see that", "I like everything about living here there is never a dull moment".

Staff we spoke to told us they enjoy their jobs and feel it is very rewarding. Comments included, "I have worked here for some time and feel we work well together as a team". "We get to know the needs of people using the service and we work well with them".

We spent time with a number of people using the service. They told us they like the fact they can call upon staff if they need to and feel secure in the knowledge there are always staff available to help them.

People we spoke to told us they think staff respect their privacy and dignity, by always calling or knocking on doors before entering. We saw this occur during the site inspection.

Some people told us they like the activities available to them, Comments included, "I like to go out and they often have runs around the local area, I like going around where I used to live it brings back many happy memories".

Other evidence

This home provides residential and nursing care to people who have a range of needs,

which staff were knowledgeable of and were seen to be able to respond to.

Information included in the care planning records was seen to be person centred, by focusing on the individuals needs both medically, socially and spiritually. There was evidence people living at the home are central to the operation of the service, and there was evidence in records we looked at that they contribute to the care planning process which is pivotal in how care is delivered.

We saw there are good staffing levels throughout the day and night-time periods. There is a good staff mix so that people are receiving care from people who are qualified and skilled in their individual roles.

Staff have access to training at all levels so that peoples health and welfare needs can be met by a trained and competent workforce.

We looked at some records used to record people's health and social care needs. We saw on the care planning records that risk is assessed and takes account of health, social and environmental risk, so that it can be managed safely and effectively for the person. We saw people using the service have their weight monitored on a monthly basis so that any changes can be noted and actioned. We saw evidence of peoples healthcare needs being met by trained staff and also good liaison with local Doctors and District Nurses. During the inspection a local doctor visited to hold a small surgery for a number of people living at the home.

The records we looked at indicated reviews are held with people in order to adapt care to meet current needs. In two instances we saw care plan records have reviews in place and recorded, however they did not appear to be held regularly. We spoke about this to the acting manager and the area manager. They agreed there may be some gaps due to the current manager vacancy and more probably due to the current transition from paper records to Computer based records. Whilst it is acknowledged there has been some interruption to the care plan reviews there must be some consistent ways of recording changes so that staff are informed of the current needs of people living at the home. By talking to a number of care staff they acknowledged there had been some interruption during in the transition period, but they did feel they are made aware of any changes in residents care because of the good communication system including day to day information cascaded by senior staff.

The activity coordinator told us they like their job as they get such a good response for most activities and people living there are keen to try most things. We saw a morning exercise activity taking place, it was well attended and people were seen to be enjoying the session. Other comments included, " There is always something going on, and you have the choice whether to join in or not".

Our judgement

We found evidence the home delivers care treatment and support to people using the service by making sure their welfare is protected and their needs are met.

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 did not receive any comments from people using the service about how they felt protected.

Lancashire safeguarding authority did not have any issues regarding protecting people at this home.

Other evidence

By talking to staff and looking at training records we saw the home has safeguarding policies, procedures and training programmes in place for all staff. The acting manager told us the training record has recently been reviewed. We received a copy of this which showed thirty eight of the sixty five staff members have received safeguarding training, and some staff are to attend the next safeguarding training course in the near future. This will ensure all staff have the knowledge and understating of current good practice in protecting people.

We saw there was evidence the home takes the Deprivation Of Liberty Safeguards (DOLS) seriously so peoples right to liberty are not compromised without good reason. The home has recently introduced an assessment format for staff to use in order to identify the level of capacity.

Our judgement

The service makes sure people are protected by providing access to training for all staff members.

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

People we spoke to told us "the staff are dedicated to what they do, and they all do it well".

They told us they liked the fact there are not many changes to the staff team so that they can get to know them. "Some of them have been here for years, and that speaks for itself".

Other evidence

We observed staff working closely together and communicating with people. We saw they were respectful and took time to sit down with people and listen to them.

Staff we spoke to said they felt there is a strong staff team. They said each shift has a good skills mix, and that the communication between them is good. "We are encouraged to share information so that we know if there are any changes in peoples needs". Some said they will be glad when the new computer system is fully functional because at the moment some of the information is in different places and this can sometimes mean it takes time to find the information they need. We spoke to managers about this and they are aware of the issues and are working with the staff to make sure the transition is smooth and timely.

Some staff told us they have regular meetings others said it can be a bit 'hit and miss' at the moment. Managers told us they try and make sure the staff are fully informed of what's going on, however due to there being a current manager vacancy there has

been some disruption. They told us organising staff meetings will be high on the new managers agenda.

Staffing levels we saw showed a good skills mix on each shift, and that staff are flexible so that they can be used where they are most needed.

Staff training is seen as essential for all levels of staff. The senior management team told us this has recently been reviewed and the training records we saw demonstrated the service is committed to ensuring the workforce is qualified in a range of care practices. All staff were seen to carry out mandatory training including Health and Safety, Moving and Handling and first aid. There has been some recent dementia training available to staff so they are aware of current good practice in caring for people with dementia conditions.

Our judgement

Staff have access to a good range of training opportunities in order to carry out their roles effectively.

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 talked to a number of people using the service who told us they are asked about their care and treatment. "We are always being asked if everything is OK or if there is anything we might need".

"I know if I am not happy about something I can talk to them about it"

The staff told us they informally get the views of people by talking to them. "People will always tell you what they think and if they want anything to change".

Other evidence

Senior staff and managers we spoke to told us they think it is important to take the views of people and they have systems in place both formally and informally including feedback forms and resident meetings, as well as gaining information by just chatting to people.

They told us they see monitoring quality of the service as a major part of the business planning process, so they can target areas which have been identified by people who use the service.

Our judgement

We found the service has systems in place which monitor the quality of service they receive.

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
Author	Care Quality Commission
Audience	The general public
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