

# Review of compliance

## Bupa Care Homes (ANS) Limited Meadbank Nursing Centre

<b>Region:</b>	London
<b>Location address:</b>	Parkgate Road Battersea London SW11 4NN
<b>Type of service:</b>	Care home service with nursing
<b>Date of Publication:</b>	September 2011
<b>Overview of the service:</b>	Meadbank Nursing Centre provides accommodation for up to 176 people. The home is close to local shops and services. Battersea Park and the River Thames are nearby. There is a courtyard garden. All of the bedrooms are single and many have en suite bathroom facilities. Communal lounges, dining areas and bathrooms are available on each floor. The home is divided into units, each with an allocated

	manager. There is a dedicated dementia unit on the third floor.
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# Summary of our findings for the essential standards of quality and safety

## Our current overall judgement

**Meadbank Nursing Centre was meeting all the essential standards of quality and safety but, to maintain this, we have suggested that some improvements are made.**

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 14 July 2011, checked the provider's records, observed how people were being cared for, looked at records of people who use services, talked to staff, reviewed information from stakeholders and talked to people who use services.

### What people told us

Comments we received from people who live at Meadbank included: 'I couldn't be happier' and 'I have no complaints'.

One person said about the staff – 'they couldn't be kinder' and another said that staff asked how she wanted to be cared for.

Another person said to us that 'the food is good and you can choose what you want – they come around and ask you.'

A relative told us that: 'staff are kind and caring, I feel confident that they keep me informed in any changes that arise in my mother's condition.'

Staff told us that they enjoy their work at Meadbank and that they had opportunities to do a range of training courses that assisted them in their work

### What we found about the standards we reviewed and how well Meadbank Nursing Centre 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 at Meadbank are treated with respect and concern for their dignity. Wherever

possible people are supported to be involved in decisions about their care. In cases where they are unable to do so there are good arrangements to involve their relatives or advocates to ensure that decisions are made in their best interests.

Overall, we found that Meadbank was meeting this essential standard.

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

People receive personalised care which takes into account their needs and preferences.

Overall, we found that Meadbank was meeting this essential standard.

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

There are effective procedures in place to contribute to the protection of people who live at Meadbank.

Overall, we found that Meadbank was meeting this essential standard.

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

On the basis of the evidence provided we found shortcomings which, if they continue, may place people at risk.

Overall, we found that Meadbank was meeting this essential standard but, to maintain this we suggested some improvements were made.

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

Staff are well supported and trained to maintain and develop skills from which people who use the service benefit.

Overall, we found that Meadbank 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**

There are a range of effective systems to monitor the quality of the service.

Overall, we found that Meadbank was meeting this essential standard.

#### **Actions we have asked the service to take**

We have asked the provider to send us a report within 14 days of them receiving this report, setting out the action they will take to improve. We will check to make sure that the improvements have been made.

Where we have concerns we have a range of enforcement powers we can use to protect the safety and welfare of people who use this service. Any regulatory decision that CQC takes is open to challenge by a registered person through a variety of internal and external appeal processes. We will publish a further report on any action we have taken.

## **Other information**

Please see previous reports for more information about previous reviews.

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

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

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

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

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

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

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

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

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

## Outcome 01: Respecting and involving people who use services

### What the outcome says

This is what people who use services should expect.

People who use services:

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

### What we found

#### Our judgement

The provider is compliant with Outcome 01: Respecting and involving people who use services

#### Our findings

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

One person told us that they had been asked by staff how they wanted to be cared for. Another person said that they are asked to choose their meals. At lunchtime some people told us they could not remember the menu for the day and they could not see the menu on the wall. One person suggested that the menus 'should be on the table' so that they could have a reminder.

We observed that people were treated with respect and listened to by staff. Staff were respectful and warm when talking to us about people's needs. All of the people we saw were well dressed and looked well cared for.

##### Other evidence

Evidence submitted by the provider shows us that they have assured themselves that they are fully compliant with this essential outcome area. We were told that people are encouraged to be involved in developing and reviewing their personal plans and staff ensure that they have information and support to do so. If people are not able to participate in decision making regarding their care, then their advocate or relative is invited to take on this role.

Staff have training on the Mental Capacity Act 2005 and Deprivation of Liberties

safeguards, ensuring that they understand how to work in the best interests of people who do not have capacity to participate in decision making. We saw that appropriate referrals had been made and records maintained of situations when the Deprivation of Liberty safeguards have been used.

We heard from staff that they work closely with people, their relatives and friends to learn their life histories and interests. This assists them to provide care which is individual to the person and reflects their culture and background. Each person has a 'memory box' fixed by the door to their bedroom. The boxes contain items such as photographs and ornaments which stimulate memories for the person and also give others a sense of their history and interests. When we were talking to people in the home staff often told us about the work these people did when they were younger, this demonstrated respect for the person, their history and previous achievements. Staff showed understanding and care about people's individual needs and how best to meet them.

People's interests and hobbies are used to develop the activity programme, for instance several people have participated in a gardening project at nearby Battersea Park and we heard how much enjoyment they have from their visits there. Meadbank's own sensory garden is also an important resource for people, it is a safe and secure place to enjoy outdoor activities.. A reminiscence kitchen on the third floor allows people to maintain their practical skills. A care coordinator trained by the Alzheimer's Society told us of the varied activities in place to offer mental and physical stimulation. She also told us of the activities in place for those that choose to remain in their bedrooms. Volunteer visitors are assigned to give comfort and support.

### **Our judgement**

People at Meadbank are treated with respect and concern for their dignity. Wherever possible people are supported to be involved in decisions about their care. In cases where they are unable to do so there are good arrangements to involve their relatives or advocates to ensure that decisions are made in their best interests.

Overall, we found that Meadbank was meeting this essential standard.

## Outcome 04: Care and welfare of people who use services

### What the outcome says

This is what people who use services should expect.

People who use services:

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

### What we found

#### 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

The comments that we received from people who live at Meadbank were positive. One person told us that they 'couldn't be happier' and that they 'had no complaints'. When asked about the staff a person told us that 'they couldn't be kinder', and told us about the assistance that a staff member had given that morning to find something important to her.

Relatives also spoke positively of the care and support delivered at the home and of their own experiences and support received from staff. They said that staff are professional in their approach and that people receive the care they require.

We heard from a family member how the care plan was adapted for her relative's circumstances as she has become more frail and unwell. A relative who visits the service frequently said 'staff are kind and caring, I feel confident that they keep me informed in any changes that arise in my mother's condition.'

##### Other evidence

An assessment tool called Quest is used to record all the information on each person's needs. Care plans are developed from thorough assessments and they record the care and treatment that people require. Records showed that care needs were reviewed regularly every month and more frequently if required because of changes in a person's condition.

Assessments are included in the records to ensure that any risk is managed

appropriately. The records we saw included detailed information about people's physical, medical and social care needs. Plans include the views and wishes of those people who are able to make their views known and relatives also have input to the planning process.

We came across one aspect of care during our visit which indicated a need for improved recording and practice. We raised this with the manager who looked into the matter. We have been informed since our visit that staff have received further training and guidance in this area and this has led to improvements.

We observed and talked to staff and relatives about how individuals are supported and cared for. A visitor told us that their relative now needs help with eating and that she prefers to stay in her room for meals. Staff support her to do so and sensitively assist her at mealtimes. Another person whose condition had deteriorated was supplied with a pressure relieving mattress, had their mouth care attended to and their daily fluid intake and output monitored. Their relative told us that staff were vigilant in making the person comfortable, supporting her with taking drinks and keeping her free from pain.

Meadbank uses the Gold Standard Framework (GSF) which aims to ensure that people nearing the end of their lives receive a consistently high quality of care. They have been awarded beacon status which recognises excellence in this area. A professional told us that the service is totally committed to giving the best possible end of life care. We observed a weekly meeting held in accordance with GSF practice guidelines. Detailed discussions took place regarding the welfare and care needs of people in the home. We saw good communication between staff and senior managers and effective systems to follow up previous decisions so that people receive appropriate and consistent care which meets their changing needs.

We shared lunch in the dining rooms and this gave the opportunity to observe care practice. Tables were attractively prepared for the meal, with people sitting at their preferred table. The environment was calm and staff sat with people who required support and assisted them discreetly. There was good eye contact with staff who were jovial and encouraging. People told us that they enjoyed the meals and cultural and vegetarian options were available.

The staff team is stable, with many members having worked there for several years. They are familiar to and with the needs of the people who live at the service, who benefit from the consistency this allows. The team has built up skills in the specialist needs of the people who live at Meadbank and has effective contacts with other health and social care professionals. Thorough verbal and written handovers at each change of shift promote consistency in care throughout the day and night. We heard from a professional involved with the home that staff are committed to providing good care and have had training in specialist procedures to assist with pain control from which people benefit. They have seen many letters of thanks written by relatives about the care provided by the home. Another professional said that someone they recently assisted to move to Meadbank has 'blossomed' since being there.

The home has two GPs who visit people at the home, visits are made on five days a week so medical advice can be easily sought. We heard from a visiting GP that the quality of care at the home has improved as the staff team has become more consistent.

We talked to a range of professionals about the service provided at Meadbank. We were told by several professionals involved with the service that staff follow their advice and implement their recommendations. We were told that people received a good service although one person felt that the quality was not consistent throughout the home. This view was not shared by any other people who contributed their opinions to the review of compliance. All professionals who gave feedback spoke of the improvements that have been made to the service since the current manager has been in post and the good work that has been done in applying the GSF.

**Our judgement**

People receive personalised care which takes into account their needs and preferences.

Overall, we found that Meadbank was meeting this essential standard.

## Outcome 07: Safeguarding people who use services from abuse

### What the outcome says

This is what people who use services should expect.

People who use services:

\* Are protected from abuse, or the risk of abuse, and their human rights are respected and upheld.

### What we found

#### 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

People told us that they felt able to raise concerns with staff.

##### Other evidence

Evidence submitted by the provider shows us that they have assured themselves that they are fully compliant with this essential outcome area.

Staff are trained from induction to listen to any concerns expressed by people who use the service. They are trained in safeguarding issues and on the Mental Capacity Acts and the Deprivation of Liberty Safeguards. The BUPA safeguarding policy and that of the local authority are available in the home for reference. Staff are informed of the whistle blowing policy which contains contact details for external agencies to whom concerns can be reported. The manager stated that an individual who makes an allegation under the whistle blowing policy is protected and no employee will suffer any detriment for reporting an allegation under the policy.

We heard from professionals who deal with safeguarding for the local authority that the service seeks advice and guidance to ensure that appropriate referrals are made. They have found them open and cooperative.

The BUPA financial advisory team carries out regular audits on how the service manages financial matters, including those of people who live at Meadbank. BUPA have a policy which prohibits staff from benefiting financially or inappropriately gaining from a person using the service. Staff are not permitted to engage in writing wills for

people, nor are they allowed to borrow or lend money or property to them.

**Our judgement**

There are effective procedures in place to contribute to the protection of people who live at Meadbank.

Overall, we found that Meadbank was meeting this essential standard.

## 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

There are minor concerns with Outcome 09: Management of medicines

#### Our findings

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

People told us "Staff are very helpful" "I always get my tablets on time" "I don't have to wait for my painkillers".

From discussions with people living at the home, staff, and our review of medicines records and care plans, we saw that the majority of people were receiving their medicines safely, on time and as prescribed. All prescribed medicines were available and were being stored securely. Medicines were being reviewed regularly by the GP who visits daily. We observed medicines being given to people, and this was done safely.

We saw that some areas of medicines management need to be improved so that people are not placed at risk.

The provider has a protocol which must be completed for people who are on medicines prescribed on an "as needed" or "PRN" basis, such as medicines for pain relief or agitation. These protocols are needed so that staff are given clear instructions on when and how often these medicines should be used e.g. if a person has communication difficulties and may not be able to tell staff if they are in pain. These templates have not been updated, so out of date "PRN" protocols for medicines no longer prescribed were being kept with medicines records, some of which had been stopped in 2010. There were either no, or incomplete protocols for a significant number of currently prescribed medicines. Lack of detailed up-to-date instructions for these medicines could put people

at risk of receiving medicines inappropriately.

A significant number of people with dementia have been prescribed antipsychotic medicines for the management of challenging behaviour. Staff told us that these have been prescribed by the GP. Clinical guidance for the use of these medicines state that these medicines should only be used if the person is severely distressed or at immediate risk to themselves or others because of the risk of serious side effects. When we reviewed people's medicines records we saw that these were being given regularly, up to four times a day, and there were often no entries made in daily notes to show why these had been given. Recent guidance from the Department of Health and the Dementia Action Alliance advises that all people with dementia who are receiving antipsychotic drugs should receive a clinical review from their doctor to ensure that their care is compliant with current best practice and guidelines, and that alternatives to medication have been considered by 31 March 2012.

### **Other evidence**

Some medicines requiring refrigerated storage 2°- 8°C, such as insulin, had not been stored at the correct temperatures for several days. These medicines had been stored at temperatures ranging from 13°C to minus 1°C. If insulin is frozen, the effectiveness is significantly reduced, which could have put people at risk of having poor control of their diabetes.

The home keeps non-prescribed medicines to treat minor ailments. These are called Homely Remedies. We looked at the records for one person who had been given several doses of a Homely Remedy over the past 5 days. Staff were recording these medicines in three different places; on the medicines record, on a PRN chart and on a Homely Remedies stock sheet. It was unclear how many doses had been given on some days e.g. for July 10th 2011, the medicines record showed that two doses of paracetamol had been given, the stock sheet showed that only one dose had been given and the PRN chart did not have any entries on that date.

We noted from someone's care plan that they need a 3-monthly injection for anaemia. This had been crossed off their current medicines record however this injection had not been stopped by the GP. This person could have been placed at risk of missing this injection.

One person had been prescribed an antibiotic, and the instructions on the medicines record stated that this should be given three times a day however staff had been giving this four times a day for 7 days. When we queried this, staff told us that they had written the wrong instructions on the medicines record, and this error had not been picked up by other members of staff giving medicines.

### **Our judgement**

On the basis of the evidence provided we found shortcomings which, if they continue, may place people at risk.

Overall, we found that Meadbank was meeting this essential standard but, to maintain this we suggested some improvements were made.

## 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

We did not discuss this outcome with people who use the service.

##### Other evidence

Evidence submitted by the provider shows us that they have assured themselves that they are fully compliant with this essential outcome area.

The nursing staff on duty when we visited had a variety of skills, ranging from qualified psychiatric nurses to registered general nurses. The clinical nurse manager has worked with the nurses in the home to establish lead specialist roles including continence management; wound care; diabetes; assessment and care planning; the Gold Standards Framework and nutrition. Specialist training for these areas is arranged so that the nurses' knowledge and skills are updated.

New staff undertake training called 'Personal Best' which helps them to understand the BUPA vision that a personal service is the best that can be offered. The induction training undertaken by new staff also covers all essential training such as health and safety, personal care and safeguarding. The manager stated that this helps to ensure that new employees have the key skills necessary to support people safely and with dignity and respect.

Staff have undergone training in palliative care as part of the Gold Standard Framework programme. We heard from a professional involved with this work that people coming to end of their lives at Meadbank have benefited from the skills that staff have developed in this area. An example we were given is that many staff now know to set up and

change equipment to assist with pain control.

Staff confirmed that they have supervision from senior members of staff and are able to approach them with issues of concern. In addition, a confidential counselling service is available. An annual appraisal system allows senior staff to assess performance and training needs.

**Our judgement**

Staff are well supported and trained to maintain and develop skills from which people who use the service benefit.

Overall, we found that Meadbank 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

People who use the service and their relatives confirmed that they are asked their opinion of the service offered by Meadbank. The customer satisfaction survey results for 2010 showed high levels of satisfaction in the areas about which respondents were questioned.

##### Other evidence

Evidence submitted by the provider shows us that they have assured themselves that they are fully compliant with this essential outcome area.

BUPA has a structured quality assurance model which includes audits carried out by the home; regional management visits and surveys and reviews. Regular audits of care records are conducted and identified shortfalls are addressed through supervision and team meetings.

Information from the manager showed that when any issues of concern are raised practice is reviewed and areas which need improvement are highlighted and action is taken to address them.

##### Our judgement

There are a range of effective systems to monitor the quality of the service.

Overall, we found that Meadbank was meeting this essential standard.

## Action we have asked the provider to take

### Improvement actions

The table below shows where improvements should be made so that the service provider **maintains** compliance with the essential standards of quality and safety.

Regulated activity	Regulation	Outcome
Treatment of disease, disorder or injury	Regulation 13 HSCA 2008 (Regulated Activities) Regulations 2010	Outcome 09: Management of medicines
	<p><b>Why we have concerns:</b> On the basis of the evidence provided we found shortcomings which, if they continue, may place people at risk.</p>	
Accommodation for persons who require nursing or personal care	Regulation 13 HSCA 2008 (Regulated Activities) Regulations 2010	Outcome 09: Management of medicines
	<p><b>Why we have concerns:</b> On the basis of the evidence provided we found shortcomings which, if they continue, may place people at risk.</p>	
Diagnostic and screening procedures	Regulation 13 HSCA 2008 (Regulated Activities) Regulations 2010	Outcome 09: Management of medicines
	<p><b>Why we have concerns:</b> On the basis of the evidence provided we found shortcomings which, if they continue, may place people at risk.</p>	

The provider must send CQC a report about how they are going to maintain compliance with these essential standards.

This report is requested under regulation 10(3) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010.

The provider's report should be sent within 14 days of this report being received.

CQC should be informed in writing when these improvement actions are complete.

# What is a review of compliance?

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

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

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

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

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

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

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

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

## Information for the reader

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