

***We are the regulator:** Our job is to check whether hospitals, care homes and care services are meeting essential standards.*

Thorpe House Nursing Home Limited

20-22 Finthorpe Lane, Almondbury, Huddersfield,
HD5 8TU

Tel: 01484300385

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November 2013

We inspected the following standards as part of a routine inspection. This is what we found:

Care and welfare of people who use services	✓	Met this standard
Meeting nutritional needs	✓	Met this standard
Safety and suitability of premises	✓	Met this standard
Supporting workers	✓	Met this standard
Complaints	✓	Met this standard

Details about this location

Registered Provider	Thorpe House Nursing Home Limited
Registered Manager	Mr. James Lockwood
Overview of the service	Thorpe House Nursing Home Limited is registered to provide accommodation/nursing care for people with mental health problems.
Type of service	Care home service with nursing
Regulated activities	Accommodation for persons who require nursing or personal care Diagnostic and screening procedures Treatment of disease, disorder or injury

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Summary of this inspection

Why we carried out this inspection

This was a routine inspection to check that essential standards of quality and safety referred to on the front page were being met. We sometimes describe this as a scheduled inspection.

This was an unannounced inspection.

How we carried out this inspection

We looked at the personal care or treatment records of people who use the service, carried out a visit on 17 October 2013, talked with people who use the service and talked with carers and / or family members. We talked with staff.

What people told us and what we found

We spoke with two people who lived at the home and they both told us they were happy at the home and that they felt safe. They also told us the staff were very nice and they enjoyed the activities at the home. We also spoke with the relatives of another person and they told us "We can't say enough good things about the place. We are always kept up to date with how our relative is doing. We are really happy with the care our relative receives and think the number of qualified staff on duty here is really reassuring. We give it ten out of ten".

You can see our judgements on the front page of this report.

More information about the provider

Please see our website www.cqc.org.uk for more information, including our most recent judgements against the essential standards. You can contact us using the telephone number on the back of the report if you have additional questions.

There is a glossary at the back of this report which has definitions for words and phrases we use in the report.

Our judgements for each standard inspected

Care and welfare of people who use services

✓ Met this standard

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

Our judgement

The provider was meeting this standard.

Care and treatment was planned and delivered in a way that was intended to ensure people's safety and welfare.

Reasons for our judgement

People's needs were assessed and care and treatment was planned and delivered in line with their individual care plan.

We looked at three sets of care records for people who lived at the home and we saw people's needs were assessed and each person had their own care and treatment plan. All three records included the details of any contact that people had with other healthcare professionals. These included visits by GP's, social services and community nursing staff.

Care plans provided the staff with clear guidance on how to meet people's safety and welfare needs. We saw evidence of formal reviews and evaluations of each of the care plans we looked at. We also saw evidence of involvement of people who lived at the home.

All of the care files we looked at contained detailed risk assessments which had been developed in relation to people's safety and welfare. These included risk of suicide/self harm, neglect, falls and violence and aggression. This meant that any risks relating to the environment in which the care was to be supplied or any equipment needed had been assessed. Also actions put in place to reduce any perceived risks to either the person who lived at the home or the staff member.

We spoke with three members of staff and they told us that they worked well as a team and felt that they provided people living at the home with a good standard of care.

Food and drink should meet people's individual dietary needs

Our judgement

The provider was meeting this standard.

People were protected from the risks of inadequate nutrition and dehydration.

Reasons for our judgement

People were provided with a choice of suitable and nutritious food and drink.

On the day of our inspection we observed lunch being served to people who lived at the home. We saw that everyone ate their meals in the dining room in two sittings. Staff were present to offer support to people if they required it. We saw that people received the meals they had chosen from the menu available.

We saw there were four weekly menu's in place which were rotated on a seasonal basis. We saw people had a choice of two meals at each meal time. We also saw there was an additional menu in place which offered people 'healthy options' for each meal.

We saw people had equipment in place to enable them to eat independently for example plate guards and adapted cutlery.

We found that one person required their meals to be fortified as they had recently lost weight. We saw this person's care records contained guidance for staff to follow to ensure the person received an adequate level of nutrition. We spoke with the cook who showed us how they fortified this person's food and evidence which showed they offered them extra snacks throughout the day to aid their weight gain. We saw documentation in place which showed staff were recording the person's food intake. This meant that this person's level of nutritional intake was being monitored appropriately.

Safety and suitability of premises

✓ Met this standard

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

Our judgement

The provider was meeting this standard.

People who use the service, staff and visitors were protected against the risks of unsafe or unsuitable premises.

Reasons for our judgement

When we visited the home in January 2013 we saw that a Legionella risk assessment had been completed for the service in 2009. It was recommended that the risk assessment was reviewed every two years. We saw that this had not been carried out as per recommendations. We also saw that the lift used by people who lived at the home also had a maintenance contract and that several repairs had taken place in 2012. A full upgrade of the existing installation had been recommended on four occasions during 2012. We were concerned as this had not taken place nor did the service have any plans to carry out this work.

We said we were concerned about this and improvements needed to be made.

We returned to the home in October 2013 to check whether improvements had been made we found that a Legionella risk assessment had been carried out in June 2013 and that the recommended tests for the manager to complete were been carried out. We were also shown evidence which demonstrated that the lift had undergone a number of repairs. There was a certificate in place to show that the lift had 'passed' on inspection in June 2013.

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

Our judgement

The provider was meeting this standard.

People were cared for by staff who were supported to deliver care and treatment safely and to an appropriate standard.

Reasons for our judgement

Staff received appropriate professional development.

We spoke with three members of staff on duty at the time of our visit and all three told us that on-going update training opportunities were provided and further personal development was encouraged. They said they felt positively supported by their managers and actively involved in the care provided at the home.

The manager told us that all of the staff were up to date with their core essential and refresher-training programmes. This training included health and safety, fire, infection control, basic food hygiene, mental health, safeguarding adults, mental capacity and moving and handling.

The manager showed us the attendance records for staff training for staff who worked at the home. We saw that all staff were up to date with their core and refresher training programmes.

We also looked at the records in place to show how often staff who worked at the home received supervision from their manager. We saw evidence of people receiving supervision in April 2013 and the manager told us that supervisions had been carried out in August 2013 although records for this were not available to us at the time of the inspection. The manager also told us that they had recently found it difficult to maintain the regularity of staff supervision as they often worked as a nurse alongside the staff on duty. We discussed this with one of the directors who told us they were aware of this and were addressing the issue.

Complaints

✓ Met this standard

People should have their complaints listened to and acted on properly

Our judgement

The provider was meeting this standard.

There was an effective complaints system available.

Reasons for our judgement

People were made aware of the complaints system. This was provided in a format that met their needs.

We saw there was an up to date complaints policy in place and the procedure for making complaints was displayed in the reception area of the home. The information regarding making a complaint was clear and easy to understand giving details of a telephone number people could use and an address to use when making formal complaints.

We saw the service had not received any complaints in the 12 month period before our inspection. We spoke with two people who lived at the home and they told us they knew how to make a complaint though they had never needed to.

About CQC inspections

We are the regulator of health and social care in England.

All providers of regulated health and social 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 essential standards are described in the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009. We regulate against these standards, which we sometimes describe as "government standards".

We carry out unannounced inspections of all care homes, acute hospitals and domiciliary care services in England at least once a year to judge whether or not the essential standards are being met. We carry out inspections of other services less often. All of our inspections are unannounced unless there is a good reason to let the provider know we are coming.

There are 16 essential standards that relate most directly to the quality and safety of care and these are grouped into five key areas. When we inspect we could check all or part of any of the 16 standards at any time depending on the individual circumstances of the service. Because of this we often check different standards at different times.

When we inspect, we always visit and we do things like observe how people are cared for, and we talk to people who use the service, to their carers and to staff. We also review information we have gathered about the provider, check the service's records and check whether the right systems and processes are in place.

We focus on whether or not the provider is meeting the standards and we are guided by whether people are experiencing the outcomes they should be able to expect when the standards are being met. By outcomes we mean the impact care has on the health, safety and welfare of people who use the service, and the experience they have whilst receiving it.

Our inspectors judge if any action is required by the provider of the service to improve the standard of care being provided. Where providers are non-compliant with the regulations, we take enforcement action against them. If we require a service to take action, or if we take enforcement action, we re-inspect it before its next routine inspection was due. This could mean we re-inspect a service several times in one year. We also might decide to re-inspect a service if new concerns emerge about it before the next routine inspection.

In between inspections we continually monitor information we have about providers. The information comes from the public, the provider, other organisations, and from care workers.

You can tell us about your experience of this provider on our website.

How we define our judgements

The following pages show our findings and regulatory judgement for each essential standard or part of the standard that we inspected. Our judgements are based on the ongoing review and analysis of the information gathered by CQC about this provider and the evidence collected during this inspection.

We reach one of the following judgements for each essential standard inspected.

✓ Met this standard This means that the standard was being met in that the provider was compliant with the regulation. If we find that standards were met, we take no regulatory action but we may make comments that may be useful to the provider and to the public about minor improvements that could be made.

✗ Action needed This means that the standard was not being met in that the provider was non-compliant with the regulation. We may have set a compliance action requiring the provider to produce a report setting out how and by when changes will be made to make sure they comply with the standard. We monitor the implementation of action plans in these reports and, if necessary, take further action. We may have identified a breach of a regulation which is more serious, and we will make sure action is taken. We will report on this when it is complete.

✗ Enforcement action taken If the breach of the regulation was more serious, or there have been several or continual breaches, we have a range of actions we take using the criminal and/or civil procedures in the Health and Social Care Act 2008 and relevant regulations. These enforcement powers include issuing a warning notice; restricting or suspending the services a provider can offer, or the number of people it can care for; issuing fines and formal cautions; in extreme cases, cancelling a provider or managers registration or prosecuting a manager or provider. These enforcement powers are set out in law and mean that we can take swift, targeted action where services are failing people.

How we define our judgements (continued)

Where we find non-compliance with a regulation (or part of a regulation), we state which part of the regulation has been breached. Only where there is non compliance with one or more of Regulations 9-24 of the Regulated Activity Regulations, will our report include a judgement about the level of impact on people who use the service (and others, if appropriate to the regulation). This could be a minor, moderate or major impact.

Minor impact - people who use the service experienced poor care that had an impact on their health, safety or welfare or there was a risk of this happening. The impact was not significant and the matter could be managed or resolved quickly.

Moderate impact - people who use the service experienced poor care that had a significant effect on their health, safety or welfare or there was a risk of this happening. The matter may need to be resolved quickly.

Major impact - people who use the service experienced poor care that had a serious current or long term impact on their health, safety and welfare, or there was a risk of this happening. The matter needs to be resolved quickly

We decide the most appropriate action to take to ensure that the necessary changes are made. We always follow up to check whether action has been taken to meet the standards.

Glossary of terms we use in this report

Essential standard

The essential standards of quality and safety are described in our *Guidance about compliance: Essential standards of quality and safety*. They consist of a significant number of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009. These regulations describe the essential standards of quality and safety that people who use health and adult social care services have a right to expect. A full list of the standards can be found within the *Guidance about compliance*. The 16 essential standards are:

Respecting and involving people who use services - Outcome 1 (Regulation 17)

Consent to care and treatment - Outcome 2 (Regulation 18)

Care and welfare of people who use services - Outcome 4 (Regulation 9)

Meeting Nutritional Needs - Outcome 5 (Regulation 14)

Cooperating with other providers - Outcome 6 (Regulation 24)

Safeguarding people who use services from abuse - Outcome 7 (Regulation 11)

Cleanliness and infection control - Outcome 8 (Regulation 12)

Management of medicines - Outcome 9 (Regulation 13)

Safety and suitability of premises - Outcome 10 (Regulation 15)

Safety, availability and suitability of equipment - Outcome 11 (Regulation 16)

Requirements relating to workers - Outcome 12 (Regulation 21)

Staffing - Outcome 13 (Regulation 22)

Supporting Staff - Outcome 14 (Regulation 23)

Assessing and monitoring the quality of service provision - Outcome 16 (Regulation 10)

Complaints - Outcome 17 (Regulation 19)

Records - Outcome 21 (Regulation 20)

Regulated activity

These are prescribed activities related to care and treatment that require registration with CQC. These are set out in legislation, and reflect the services provided.

Glossary of terms we use in this report (continued)

(Registered) Provider

There are several legal terms relating to the providers of services. These include registered person, service provider and registered manager. The term 'provider' means anyone with a legal responsibility for ensuring that the requirements of the law are carried out. On our website we often refer to providers as a 'service'.

Regulations

We regulate against the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009.

Responsive inspection

This is carried out at any time in relation to identified concerns.

Routine inspection

This is planned and could occur at any time. We sometimes describe this as a scheduled inspection.

Themed inspection

This is targeted to look at specific standards, sectors or types of care.

Contact us

Phone: 03000 616161

Email: enquiries@ccq.org.uk

Write to us
at: Care Quality Commission
Citygate
Gallowgate
Newcastle upon Tyne
NE1 4PA

Website: www.cqc.org.uk

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