

## Findings of CQC visit 22<sup>nd</sup> July 2014

What have CQC told us?	What have we said we will do?
<ul> <li>Is the service safe?</li> <li>The service was not always found to be safe at the time of inspection.</li> <li>There was not always the number of skilled and experienced staff available, required to meet people's needs in a timely way. Staff were not always familiar with how people preferred their care to be provided.</li> <li>People told us they felt safe.</li> <li>The provider was meeting the requirements of the Deprivation of Liberty Safeguards (DoLS). Staff had received appropriate training in DoLS and the Mental Capacity Act 2005 (MCA) and had a good understanding of them.</li> <li>Staff were trained and understood their responsibility to safeguard people. Staff were recruited safely to ensure they were suitable to work with vulnerable adults.</li> </ul>	<ul> <li>Making the service safe</li> <li>We will continue to recruit permanent staff to prevent the use of agency staff where possible.</li> <li>We will continue to complete staff surveys and take into consideration staff views to aid retention.</li> <li>We will continue to train and develop our staff.</li> <li>We will ensure staff are informed of our benefits and advice schemes provided by the organisation.</li> </ul>
Is the service effective?	Making the service effective
<ul> <li>The service was effective. People received effective care and support to meet their needs. Staff had the skills needed to meet people's needs.</li> <li>Appropriate induction and training of staff was in place to ensure they could meet people's needs effectively.</li> <li>People had their healthcare needs met. Other health and social care professionals were brought in to help meet people's needs as required.</li> </ul>	<ul> <li>We will continue to recruit suitably qualified and skilled staff.</li> <li>We will continue to train and develop our staff team. We will continue to coach and mentor our teams to support them to deliver care and treatment safely and to an appropriate standard.</li> <li>We will continue to work in partnership with other care professionals to help meet people's needs as required.</li> </ul>



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Is the service caring?	Making the service caring
<ul> <li>The service was caring. People who lived in Hillside, their relatives and visiting health professionals said the service was caring and that people received appropriate support in a sensitive and respectful manner.</li> <li>Staff treated people with respect and understood the need to protect people's dignity whilst providing care.</li> <li>People were involved in decisions about their care and support.</li> </ul>	<ul> <li>We will continue to work in this manner and respect people's privacy, dignity and independence.</li> <li>We will continue to take people's views and experiences into account in the way our service is provided.</li> <li>We will continue to ask people for their consent to care or treatment in accordance with their wishes. Where people do not have the capacity to consent we will continue to source best interest decisions or Dols approvals in line with legal requirements.</li> </ul>
Is the service responsive?	Making the service responsive
<ul> <li>The service was responsive. People received care and support which took account of their individual needs and preferences and was responsive to them. Individualised care plans recorded how needs should be met. These were reviewed to make sure they were still responsive when people's needs changed.</li> <li>There was a range of activities available for people, although these did not always extend into the weekend. People told us they had enjoyed different people coming into the home to provide entertainment, including animals for them to stroke and musical entertainers.</li> <li>People were informed of the home's formal complaints procedure but felt they could raise any concerns informally.</li> </ul>	<ul> <li>We will continue to involve people at the centre of their care.</li> <li>We will continue to review care plans to ensure they are still responsive to people's current needs.</li> <li>We will continue to expand on the range of activities available to people and the times they are available.</li> <li>We will continue to gain feedback through the complaints procedure, comment cards, meetings and reviews etc.</li> </ul>



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<ul> <li>Is the service well led?</li> <li>The home was well-led. People were asked for their views about the way the service was led and managed. Suggestions for change were acted on where possible.</li> <li>Staff and people said the registered manager and their team were accessible and they were able to talk to them freely. Senior managers of the provider carried out regular visits and audits on the service to assess how it was performing. Action plans addressed any areas which required improvement.</li> <li>Health and social care professionals received good levels of cooperation and communication from the home's management team.</li> </ul>	<ul> <li>Making sure the service is well led</li> <li>There is a new Home Manager in place.</li> <li>The Home Manager has an open door policy.</li> <li>The Home Manager will conduct walk the floor observations.</li> <li>Senior Managers will continue to complete regular visits and audits on the service to assess how it is performing with action plans to address areas which require improvement.</li> <li>We will continue to work in partnership with health and social care professionals.</li> <li>The Home Manager will hold regular meetings with residents.</li> <li>Surveys will continue to be used to gain further feedback.</li> </ul>
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