

Random inspection report

Care homes for adults (18-65 years)

Name:	The Cedars (8)
Address:	The Cedars (8) Ashbrooke Sunderland SR2 7TW

The quality rating for this care home is:	two star good service
The rating was made on:	

A quality rating is our assessment of how well a care home, agency or scheme is meeting the needs of the people who use it. We give a quality rating following a full review of the service. We call this review a 'key' inspection.

This is a report of a **random inspection** of this care home. A random inspection is a short, focussed review of the service. Details of how to get other inspection reports for this care home, including the last key inspection report, can be found on the last page of this report.

Lead inspector:	Date:							
Hilary Stewart	1	9	0	5	2	0	1	0

Information about the care home

Name of care home:	The Cedars (8)
Address:	The Cedars (8) Ashbrooke Sunderland SR2 7TW
Telephone number:	01915679753
Fax number:	01915637711
Email address:	lesley.lane@espa.org.uk
Provider web address:	

Name of registered provider(s):	Education and Services for People with Autism Limited	
Name of registered manager (if applicable)		
Mr Anthony Reineck		
Type of registration:	care home	
Number of places registered:	8	

Conditions of registration:		
Category(ies) :	Number of places (if applicable):	
	Under 65	Over 65
learning disability	10	0

Conditions of registration:							
The maximum number of users who can be accommodated is: 10							
The registered person may provide the following category of service only: Care home only - Code PC To service users of the following gender: Either Whose primary care needs on admission to the home are within the following categories: Learning Disability - Code LD, maximum number of places, 10							
Date of last inspection							
Brief description of the care home							
8 the Cedars is a detached five-floor house that has been adapted to provide a care service. The home provides personal care for 8 adults who fall within the Autism Spectrum. This house has eight bedrooms and is divided into two units of four. In the downstairs unit the cellar has been converted to provide a bedroom, shower and office.							

Brief description of the care home

A mezzanine landing contains the dining room and steps, which lead to the kitchen. Both units have their own entrance. Steps lead up to the main entrance for the first unit. The second unit's separate entrance has a level access but internally stairs lead up to the unit. Neither unit would be suitable for someone with a physical disability. The home is located in Ashbrooke and is walking distance from Villetta Road shopping area. There is a range of shops on this busy parade, which include a post office, greengrocer, supermarket, chemist and newsagents. A pleasant park is easy to access. Bus stops can be found on the main road and have routes that go to the city centre and Durham. The home charges from £48,715.15p to £77,001.69p per year.

What we found:

The reason for this inspection was to check the following.

1. That there are sufficient staff employed at the home who are trained and supported to provide the people who live there with good care. Also that all staff are thoroughly vetted before they start to work at the home.
2. That the home has arrangements in place to safeguard the people who live there.
3. That the care plans are clear, accurate and contain enough detail to inform staff about how they must meet the needs of the people who live at the home and provide them with good care.
4. The home has adequate arrangements in place to protect the people at the home if there is a fire.

We then told the manager what we had found:

The outcome was as follows.

1. Staff said that they receive training, which helps them with their work. The manager said that all staff receive the training and support they need. Staff said and records showed that they all have mandatory training such as first aid food hygiene and safeguarding adults training. Sufficient staff were on duty at the time of the visit. Staff said and records showed that sufficient staff had been on duty in the home the previous week. The manager said that there are enough staff to cover sickness and holidays. One member of staff said "yes we have enough staff".

The manager said that all staff have been CRB Criminal Records Bureau checked at an enhanced level to make sure they are suitable people to work at the home. All staff go through a recruitment process and they cannot start to work at the home until this is completed. They are interviewed and are only successful when they have two satisfactory references. Copies of staff records showed that checks had been carried out. Some records did not show that gaps in a person's work history had been explored during the recruitment process.

2. Copies of the home's complaints procedure are in the information about the home. The manager and staff said that the people who live at the home and their relatives know how to make a complaint. One complaint was recorded in the complaints record but was more of a concern or informal complaint about the lounge. The manager said that they are looking into ways of making the complaints process more accessible for the people who live at the home.

The manager said that all staff have had training in how to safeguard the people they care for. There is a copy of the Local Authority procedures and the home has copies of their own adult protection procedures for staff. Staff said that they have had the training and they could describe what they needed to do if someone disclosed abuse to them. All staff have had training on the home's whistle blowing policy and procedure.

Staff have received training in how to use physical intervention safely. The manager said that only staff who have been assessed as being competent can use this technique. It is only used as a last resort. Records showed that any incidents of physical intervention are recorded and kept in each person individual care plan file. There is not a central record kept as advised by the "Department of Health Guidance on Restrictive Physical Interventions".

3.The manager said that the people who live at the home are consulted as much as possible about their care plans. Records showed that each person has a care plan. Each person's care plan contained information for staff about areas such as the person's physical health personal care needs social skills and daily activities. The care plans contained a communication profile and support plans. some did not have the date on so it was not clear if they were up to date or not. One was dated 14.5.08. The manager said that they intend to improve the plans by making them more accessible, for example visual and pictorial types of care plan. They intend to have them all updated and improved by the end of august 2010. The staff could describe how they work consistently with the people.

4.Safety checks have been carried out on the equipment in the home such as testing electrical equipment and servicing the central heating boiler. Fire safety risk assessments had been completed. The fire logbook showed that the last fire drill had taken place on the 20th September 2009, the manager and senior member of staff said that there had been a fire drill the previous week but in hadn't been written down. Staff and the manager said that some of the people who live at the home find it difficult to tolerate the noise of the fire alarm or people in uniform. Consequently this causes difficulties if there is a fire drill or a visit from the fire brigade. The manager agreed to contact the fire authority to seek guidance with regard to the management of the people at the home if their is a fire. If they decide that fire drills will cause too much distress this needs to be risk assessed.

What the care home does well:

The home continues to meet the National Minimum Standards in other areas.

What they could do better:

If the home had a central record for any incidents of physical intervention this would demonstrate that they are following the "Department of Health Guidance on Restrictive Physical Interventions for People with Autistic Spectrum Disorder".

If all of the care plans had sufficient detail and all parts of the plan were completed with the date, staff would know that the information in them was up to date and correct. This would mean that they would be sure they were providing the people at the home with the support and care they need.

Robust recruitment procedures and records would show that all of the staff have been properly vetted and this would demonstrate that the organisation have made sure that they only employ suitable people to work at the home and therefore safeguard the people who use the service.

If the homes fire procedures were risk assessed to take into account the peoples needs at the home this would make sure that any risk of harm has been minimised as much as possible.

If you want to know what action the person responsible for this care home is taking following this report, you can contact them using the details set out on page 2.

Are there any outstanding requirements from the last inspection?

Yes

No

Outstanding statutory requirements

These are requirements that were set at the previous inspection, but have still not been met. They say what the registered person had to do to meet the Care Standards Act 2000, Regulations 2001 and the National Minimum Standards.

No.	Standard	Regulation	Requirement	Timescale for action

Requirements and recommendations from this inspection:

Immediate requirements:

These are immediate requirements that were set on the day we visited this care home. The registered person had to meet these within 48 hours.

No.	Standard	Regulation	Requirement	Timescale for action

Statutory requirements

These requirements set out what the registered person must do to meet the Care Standards Act 2000, Regulations 2001 and the National Minimum Standards. The registered person(s) must do this within the timescales we have set.

No.	Standard	Regulation	Requirement	Timescale for action
1	6	15	<p>Each person's individual care plan must contain enough detail, be up to date and accurate.</p> <p>This will mean that staff have the information they need so they know how to meet the needs of the people who live at the home and provide them with good care.</p>	31/08/2010
2	23	13	<p>The registered manager must follow the Department of Health Guidance on restrictive interventions.</p> <p>This will show that they are following approved guidance and therefore safeguarding the people they care for.</p>	30/06/2010
3	34	19	<p>The registered manager must make sure that all staff have any gaps in their work history explored and a record kept of this information.</p> <p>This will demonstrated that the organisation check people thoroughly to make</p>	30/06/2010

Statutory requirements

These requirements set out what the registered person must do to meet the Care Standards Act 2000, Regulations 2001 and the National Minimum Standards. The registered person(s) must do this within the timescales we have set.

No.	Standard	Regulation	Requirement	Timescale for action
			sure that they are suitable people to work at the home.	
4	41	23	The homes fire procedure should be risk assessed to take into account the peoples needs at the home. This would make sure that any risk of harm, has been minimised as much as possible.	30/06/2010

Recommendations

These recommendations are taken from the best practice described in the National Minimum Standards and the registered person(s) should consider them as a way of improving their service.

No	Refer to Standard	Good Practice Recommendations

Reader Information

Document Purpose:	Inspection Report
Author:	Care Quality Commission
Audience:	General Public
Further copies from:	0870 240 7535 (telephone order line)

Our duty to regulate social care services is set out in the Care Standards Act 2000. Copies of the National Minimum Standards –Care Homes for Adults (18-65 years) can be found at www.dh.gov.uk or got from The Stationery Office (TSO) PO Box 29, St Crispins, Duke Street, Norwich, NR3 1GN. Tel: 0870 600 5522. Online ordering from the Stationery Office is also available: www.tso.co.uk/bookshop

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Email: enquiries@cqc.org.uk

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