



Making Social Care
Better for People

Inspecting for better lives

Key inspection report

Care homes for older people

Name:	Easthill Home For The Deaf
Address:	Ashey Road Ryde Isle Of Wight PO33 3EB

The quality rating for this care home is:

two star good service

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 assessment of the service. We call this a 'key' inspection.

Lead inspector:	Date:
Annie Kentfield	2 3 0 4 2 0 0 9

This is a report of an inspection where we looked at how well this care home is meeting the needs of people who use it. There is a summary of what we think this service does well, what they have improved on and, where it applies, what they need to do better. We use the national minimum standards to describe the outcomes that people should experience. National minimum standards are written by the Department of Health for each type of care service.

After the summary there is more detail about our findings. The following table explains what you will see under each outcome area.

Outcome area (for example Choice of home)

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

This box tells you the outcomes that we will always inspect against when we do a key inspection.

This box tells you any additional outcomes that we may inspect against when we do a key inspection.

This is what people staying in this care home experience:

Judgement:

This box tells you our opinion of what we have looked at in this outcome area. We will say whether it is excellent, good, adequate or poor.

Evidence:

This box describes the information we used to come to our judgement.

Copies of the National Minimum Standards – Care Homes for Older People can be found at www.dh.gov.uk or bought 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

The Commission for Social Care Inspection aims to:

- Put the people who use social care first
- Improve services and stamp out bad practice
- Be an expert voice on social care
- Practise what we preach in our own organisation

Our duty to regulate social care services is set out in the Care Standards Act 2000.

Reader Information

Document Purpose	Inspection report
Author	CSCI
Audience	General public
Further copies from	0870 240 7535 (telephone order line)
Copyright	Copyright © (2009) Commission for Social Care Inspection (CSCI). This publication may be reproduced in whole or in part, free of charge, in any format or medium provided that it is not used for commercial gain. This consent is subject to the material being reproduced accurately and on proviso that it is not used in a derogatory manner or misleading context. The material should be acknowledged as CSCI copyright, with the title and date of publication of the document specified.
Internet address	www.cqc.org.uk

Information about the care home

Name of care home:	Easthill Home For The Deaf
Address:	Ashey Road Ryde Isle Of Wight PO33 3EB
Telephone number:	01983564068
Fax number:	01983811857
Email address:	
Provider web address:	

Name of registered provider(s):	The Hampshire, Isle of Wight and Channel Islands Association for the Deaf People
Type of registration:	care home
Number of places registered:	15

Conditions of registration:		
Category(ies) :	Number of places (if applicable):	
	Under 65	Over 65
sensory impairment	15	0

Additional conditions:

The maximum number of service users who can be accommodated is 15

The registered person may provide the following category of service only: Care home only -PC to service users of the following gender: Either: Whose primary needs on admission to the home are within the following category Sensory Impairment (SI)

Date of last inspection	2	9	1	0	2	0	0	8
-------------------------	---	---	---	---	---	---	---	---

Brief description of the care home

Easthill is a specialist home providing care and support for up to 15 people who have a sensory loss or impairment. Staff in the home receive training in British Sign Language and qualified interpreters are available when needed. The home is a spacious two storey detached building in it's own grounds, offering a dining room, two lounges and an activities room, a conservatory, and outside seating for residents. The bedrooms vary in size and are single occupancy and the bathrooms are shared with one bedroom having en-suite facilities. The home has developed a two bedroom flat with kitchen, sitting room and shower/toilet, within the home aimed at providing semi independent living for two residents. The building is accessible and has a passenger lift and some internal stair lifts. Residents also have access to a mini bus and driver for trips outside

Brief description of the care home

of the home and the home owns a beach hut in Ryde for residents to use.

The weekly fees vary according to the level of care required and the bedroom to be occupied. There are additional charges for chiropody, toiletries and any personal items.

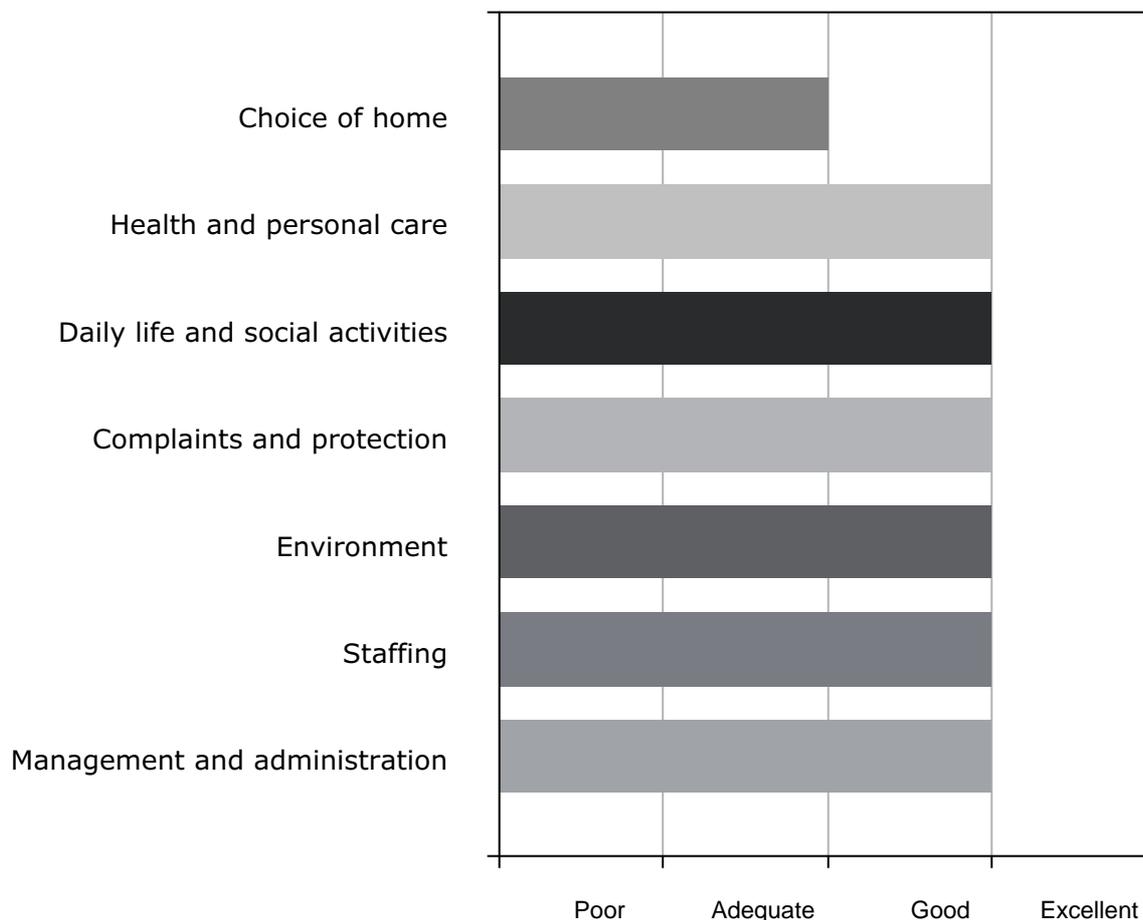
Summary

This is an overview of what we found during the inspection.

The quality rating for this care home is:

two star good service

Our judgement for each outcome:



How we did our inspection:

We made an unannounced visit to the service on 23 April 2009. The visit lasted for 6 hours and was with one inspector (Annie Kentfield). Three hours were spent with the residents accompanied by a British Sign Language Interpreter. During the visit we also spoke to the manager and some of the staff and the Responsible Individual for the home. We looked at some of the home's records including care plans and medication records, health and safety records and staff training and recruitment records. Before the visit we received surveys from 4 service users, 7 staff and 2 health and social care professionals who visit the home. Comments in the surveys were positive about the service provided.

What the care home does well:

Residents live in a spacious and comfortable home that is well maintained and decorated. The service places emphasis on making the environment homely and personal for the residents who live there.

Residents enjoy opportunities for outings and excursions as well as regular holidays both in England and abroad, accompanied by staff from the home.

Comments received included:

'I like living at Easthill. I can receive phone calls from my family and staff will sign their words to me and tell my family what I have said.'

'The home offers a friendly, homely environment and it is always clean, and staff are helpful.'

What has improved since the last inspection?

Following the last inspection the service sent us an improvement plan when we asked for it and have taken action to meet regulatory requirements in key areas that affect the health and well being of the residents:

Individual plans of care have been reviewed and updated and are person centred.

The procedures for the safe administration of residents' medication have been reviewed and improved. The home has complied with legal requirements for the storage of controlled drugs.

Staff training has improved to demonstrate that staff have the skills and knowledge to meet the specific needs of the residents.

Systems for maintaining records in the home have improved and records were available for inspection.

What they could do better:

The service should develop suitable formats for providing residents with information about the home and the services provided. This will demonstrate that the organisation is committed to providing a person centred and comprehensive statement of purpose and service user guide that is very specific to the resident group and considers the specialist services required to meet the needs of people who use the service.

The service needs to further develop effective quality assurance and quality monitoring systems that measure success in meeting the home's stated aims and objectives and how well they are providing good outcomes for people using the service.

The service must ensure that recent improvements are sustained and embedded in practice in the home to ensure good outcomes for people using the service.

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 4.

The report of this inspection is available from our website www.cqc.org.uk. You can get printed copies from enquiries@cqc.org.uk or by telephoning our order line –0870 240

7535.

Details of our findings

Contents

Choice of home (standards 1 - 6)
Health and personal care (standards 7 - 11)
Daily life and social activities (standards 12 - 15)
Complaints and protection (standards 16 - 18)
Environment (standards 19 - 26)
Staffing (standards 27 - 30)
Management and administration (standards 31 - 38)
Outstanding statutory requirements
Requirements and recommendations from this inspection

Choice of home

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

People are confident that the care home can support them. This is because there is an accurate assessment of their needs that they, or people close to them, have been involved in. This tells the home all about them and the support they need. People who stay at the home only for intermediate care, have a clear assessment that includes a plan on what they hope for and want to achieve when they return home.

People can decide whether the care home can meet their support and accommodation needs. This is because they, or people close to them, have been able to visit the home and have got full, clear, accurate and up to date information about the home. If they decide to stay in the home they know about their rights and responsibilities because there is an easy to understand contract or statement of terms and conditions between them and the care home that includes how much they will pay and what the home provides for the money.

This is what people staying in this care home experience:

Judgement:

People using this service experience **adequate** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

The service provides basic information about the home and this is available in a standard written format.

Evidence:

When we inspected the home in October 2008 we said that information about the home and the services provided should be up to date and easily accessible. We also said that information about the home should be available in suitable formats to meet the specific communication needs of the residents.

The written information about the home has been reviewed and updated since the last inspection. However, the service indicated that the organisation is currently looking at reviewing all of their publicity material and it is therefore likely that further changes will be made to the statement of purpose and other information about the service. The manager told us that the service is aware that they could be more innovative in how

Evidence:

information is produced for residents about the service and also the complaints procedure, and plan to look at other ways of communicating information that meets the specific needs of the residents.

There are currently 12 residents in the home and no new residents have moved into the home since the last inspection. We therefore did not look at what procedures the home has for assessing the needs of prospective and new residents.

Health and personal care

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

People's health, personal and social care needs are met. The home has a plan of care that the person, or someone close to them, has been involved in making. If they take medicine, they manage it themselves if they can. If they cannot manage their medicine, the care home supports them with it, in a safe way. People's right to privacy is respected and the support they get from staff is given in a way that maintains their dignity.

If people are approaching the end of their life, the care home will respect their choices and help them feel comfortable and secure. They, and people close to them, are reassured that their death will be handled with sensitivity, dignity and respect, and take account of their spiritual and cultural wishes.

This is what people staying in this care home experience:

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

Each resident has a person centred plan of care that is regularly reviewed and updated. There are systems in place for the safe administration of medication to ensure residents receive their medication as prescribed, at all times. Privacy and dignity is promoted and respected.

Evidence:

At the last inspection we found that some individual care plans were not up to date and the home had not fully developed person centred care planning. The home sent us an improvement plan with details of what they were doing to improve outcomes for residents in the home.

We looked at three records of care/support for residents and these have been revised by staff and demonstrate a person centred approach that outlines the support and care needed and preferred by each resident. Care staff told us that they have received some training in developing person centred care planning. Where risks to residents have been identified, a separate risk assessment and risk management plan has been

Evidence:

recorded. The manager and responsible individual told us that staff are encouraged to review the care plans in their key worker role and to make the review a meaningful activity as part of their regular consultation with the residents. The improvement plan told us that key workers will review care/support plans monthly and any changes or amendments will be approved by the deputy manager who will review all plans every six months. All residents will have an annual care plan review with their care manager or social worker and there will be periodic spot checks by the manager or responsible individual.

At the last inspection we found that there were gaps in the daily medication records so that it was not clear if residents had received their medication or not. Staff did not have clear guidance on what they must do to ensure that all medication is safely stored and dispensed. The home provided us with an improvement plan on what action they have taken to improve medication procedures in the home. The medication policy and procedures have been reviewed and a copy is available for staff. The medication recording sheets are regularly checked and any omissions or errors are followed up. An update of medication training has been arranged for care staff with a pharmacist. New guidance has been written for care staff on how to dispense medication that is prescribed to be given as and when needed (PRN). Training has been arranged for staff in the safe practice for using eye drops and ear drops, with a community nurse. The manager told us that she has requested a review of residents' medication with the relevant GP's and this is partly completed.

The home has purchased a cupboard that meets the legal requirements for the safe storage of controlled drugs. At the moment the home does not have any controlled drugs. The cupboard has been installed in the ground floor bathroom. The manager should ensure that if this cupboard is used, that the risk of heat and humidity affecting some medicines is considered.

The home are now keeping nutritional records of particular dietary requirements of residents and also recording choices and preferences for meals and food.

Comments received from health and social care professionals who visit the home were generally positive and one person said that the service has done well to improve the support, independence and communication for one service user. One person commented that staff occasionally need reminding about appointments. This was addressed with the manager and responsible individual who said they would take prompt action to look at this. They said that the home is committed to ensuring that residents' health care needs are always met and appointments attended.

During the visit we observed practice in the home that respects dignity and privacy -

Evidence:

there is a flashing light system that staff use if they need to go into a bedroom or bathroom. Bedroom and bathroom doors are lockable. Comments received from residents and visitors in the surveys confirmed that care staff are always or usually responsive to the needs and preferences of the residents for how care is provided.

Daily life and social activities

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

Each person is treated as an individual and the care home is responsive to his or her race, culture, religion, age, disability, gender and sexual orientation. They are part of their local community. The care home supports people to follow personal interests and activities. People are able to keep in touch with family, friends and representatives. They are as independent as they can be, lead their chosen lifestyle and have the opportunity to make the most of their abilities. People have nutritious and attractive meals and snacks, at a time and place to suit them.

There are no additional outcomes.

This is what people staying in this care home experience:

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

Residents are offered the opportunity to take part in a range of activities and social events to meet all choices, preferences and abilities.

Meals are freshly prepared and served in an attractive dining room and residents are offered daily menu choices and special dietary needs are met.

Evidence:

The home is spacious enough to offer residents a wide choice of lounge or sitting areas and also has a separate dining room, computer and activity room and a large garden. Residents that we spoke to told us that they have their favourite sitting areas and could choose whether they take part in activities and social events, or not. The home has a beach hut for residents to use and a trip there was planned on the day we visited.

One resident told us that they like to go shopping and a member of staff will come with them. Another resident told us that staff are very supportive and 'they help me as sometimes I find it hard to make decisions.'

Evidence:

A resident told us that they are being supported by staff to be more independent and more confident about going out and doing daily living activities. Another resident said 'The staff help me when I need it. I like to laugh and joke with them.'

Some of the residents have planned a trip on a cruise ship in October. Some of the staff will accompany the residents on the cruise.

Residents told us that the food in the home is good and there is a menu choice for the main meal each day. Residents make active choices about what they would like to eat from the available menu. The kitchen has a separate area for residents to make drinks or snacks if they want to.

One of the health and social care professionals who visit the home commented that staff could wear name badges. This was discussed with the manager and responsible individual and it was suggested that the issue of name badges be decided by the residents at the next residents meeting.

A community club for deaf people is being developed and some of the residents thought this was a good idea. Another resident did not feel that the club offered enough activities that they liked. During the visit we spoke to eight residents with the sign language interpreter and overall residents indicated that they were happy and could not think of anything that could be better or changed.

Complaints and protection

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

If people have concerns with their care, they or people close to them know how to complain. Any concern is looked into and action taken to put things right. The care home safeguards people from abuse and neglect and takes action to follow up any allegations.

People's legal rights are protected, including being able to vote in elections.

This is what people staying in this care home experience:

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

The service demonstrates that they value feedback, comments or complaints about the service.

Policies and procedures for protecting residents from the risk of harm or abuse have been reviewed. The service is aware that they need to ensure that improvements are sustained and become part of practice in the home.

Evidence:

At the last inspection we found that the home had not sustained recommended improvements to practice following a safeguarding investigation in 2008 into allegations of poor practice in the home. A further safeguarding meeting was held and additional recommendations were made. One of the issues of concern was the arrangements in place to protect residents' financial and legal affairs. The manager has developed a new protocol so that it is clearly agreed, recorded and signed between the home, the resident and the relevant care manager, how finances are managed and whether residents have capacity or need support to manage their financial and legal affairs. The policy of the home is that the manager and staff do not hold appointeeship or power of attorney for residents and this has to be arranged independently. The manager told us that the organisation would like to arrange independent advocacy for the residents. The home looks after small amounts of personal monies for residents and these are safely and securely held and accounted for. The safeguarding meeting

Evidence:

also highlighted the need for better communication between care managers and the home and for all stakeholders to be involved in regular care reviews. The manager told us that this has improved.

Another issue of concern from the previous safeguarding meeting was the need to ensure that staff are supported in their professional practice with regular supervision and training and development. Improvements have been made and staff confirmed that they are receiving regular supervision and appraisals. One member of staff said that communication in the home has improved and also training opportunities for staff. We saw evidence of a communication/handover record for staff to ensure that all relevant and important information is communicated to staff each day.

When we spoke to residents they told us that if they had any concerns or complaints they would speak to their keyworker or the manager or their family.

We spoke to three members of staff who confirmed that they had done safeguarding training and would know what to do if they had concerns or suspicions that a resident was at risk of harm or abuse. Since the last inspection records of staff training and supervision have been organised and updated and these were available for inspection. The home told us in their improvement plan that staff will receive six supervision sessions including staff meetings each year. The improvement plan also stated that the manager, responsible individual and the staff team will work together to identify good working practice and ensure this is sustained.

Environment

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

People stay in a safe and well-maintained home that is homely, clean, pleasant and hygienic.

People stay in a home that has enough space and facilities for them to lead the life they choose and to meet their needs. The home makes sure they have the right specialist equipment that encourages and promotes their independence. Their room feels like their own, it is comfortable and they feel safe when they use it.

This is what people staying in this care home experience:

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

Residents live in a well maintained, comfortable and homely environment and have access to a wide range of communal space and outside garden and seating areas.

Evidence:

We spoke to some of the residents in their own rooms and in the communal areas. All of the residents have their own bedroom with a nearby shared bathroom and toilet or shower. The communal areas are personal and homely and the aim of the service is to provide a comfortable, attractive and personalised home environment for the residents. All of the comments that we received from residents and visitors confirmed that the home is clean and pleasant at all times. Equipment is available for residents who need support with mobility. The home has a passenger lift and internal stair lifts and the building is accessible. Bedrooms are well furnished and comfortable and residents told us that they had everything they need and want.

The home is well heated and ventilated and residents can control the temperature of the heating in their rooms.

Staff have received training in good practice in the control of infection and bathrooms and toilets have suitable hand washing facilities.

Staffing

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

People have safe and appropriate support as there are enough competent staff on duty at all times. They have confidence in the staff at the home because checks have been done to make sure that they are suitable to care for them. Their needs are met and they are cared for by staff who get the relevant training and support from their managers.

There are no additional outcomes.

This is what people staying in this care home experience:

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

The needs of the residents are met by staff who receive the relevant training and support from the managers of the service.

Evidence:

The home has not employed any new staff since the last inspection. Following concerns raised at the last inspection that the service were not operating robust and thorough recruitment procedures - the service have told us in their improvement plan that they have reviewed and amended their procedures to comply with regulatory requirements and that in future, all recruitment checks on new staff will be dealt with by the human resources department of the Hampshire Deaf Association. All recruitment records for new staff will be available for inspection at the HDA office in Southampton.

At the last inspection the service told us in the Annual Quality Assurance Assessment that there is a staff training programme that includes all mandatory health and safety training, National Vocational (NVQ) training, as well as specific training in British Sign Language (BSL) and mental health care. However, the records of staff training did not support this and not all records were available for inspection. The home has taken action to improve and update their record keeping so that evidence of staff training is available. This demonstrates that there is an ongoing plan to ensure that staff have the

Evidence:

knowledge, skills, and competencies to meet the needs of people using the service. We spoke to three members of staff who confirmed that training opportunities for staff had improved in the last six months. Two people told us that they were doing training in Maketon to help them support a resident who uses Maketon. We spoke to another member of staff who confirmed that they had achieved an NVQ in care at level 3, and had also completed training in health and safety, first aid, mental health care, fire safety, infection control, safe moving and handling, dementia care, autism, medication, dealing with challenging behaviour, safeguarding, mini-com training, mental capacity act and level 1 signing.

The improvement plan also confirmed that the policy of the home is to ensure that staff receive supervision six times per year which will include staff meetings. The home also stated that supervision will be recorded to ensure that staff receive the necessary support and feedback for the work they do.

The service must ensure that these improvements are sustained and embedded into practice in the home.

Feedback from residents and visitors to the home confirmed satisfaction with the care and support provided by staff in the home. One resident told us 'staff understand when I am upset or happy and help me'. One visitor told us 'most of the staff are very good at signing skills, but some of the carers need better signing skills'. Another visitor said 'communication skills are generally good and staff are helpful'.

Generally, feedback from residents and staff was positive. One resident said that sometimes staff 'are very busy'. Some of the staff told us that it would be nice to have more staff so that residents can go out more and more funding for activities. However, all of the staff indicated that they liked working at Easthill and were positive about the recent improvements and two people told us that communication within the home had improved.

Management and administration

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

People have confidence in the care home because it is led and managed appropriately. People control their own money and choose how they spend it. If they or someone close to them cannot manage their money, it is managed by the care home in their best interests. The environment is safe for people and staff because appropriate health and safety practices are carried out.

People get the right support from the care home because the manager runs it appropriately with an open approach that makes them feel valued and respected. The people staying at the home are safeguarded because it follows clear financial and accounting procedures, keeps records appropriately and ensures their staff understand the way things should be done. They get the right care because the staff are supervised and supported by their managers.

This is what people staying in this care home experience:

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

The service understands the importance of person centred care planning and providing effective outcomes for people who use the service. The manager is improving and developing systems that monitor practice and compliance with the policies and procedures of the home. More work is needed in this area.

Evidence:

Since the last inspection action has been taken to comply with regulatory requirements in all areas of practice in the home. The manager is supported by the responsible individual (who represents the Hampshire Deaf Association), in the running of the home. The responsible individual makes regular inspections of the service. The improvement plan sent to us by the service states that the responsible individual and the Easthill team will work together in identifying and complying with good working practice. The manager and responsible individual are both aware that the service must sustain the improvements they have made and continue to improve the service in the best interests of people using the service.

Evidence:

Record keeping in the home has improved and the manager told us that since the home appointed an administrator, she has been able to concentrate on staffing and management issues. The manager is aware that residents receive the right care when staff are supervised and supported by their managers.

The manager has developed a clear and accountable system for ensuring that residents financial interests are safeguarded.

Health and safety policies and procedures have been reviewed and the manager confirmed that the home now has efficient systems in place to ensure that all fire safety checks are carried out at the required intervals.

The service has some quality monitoring systems in place and there is an understanding of the need to regularly incorporate feedback from people using the service into their overall development plan. The manager and responsible individual told us that they are looking at introducing an accredited and professional quality assurance system, but have not yet started this. At the moment, residents and visitors are asked to complete customer satisfaction questionnaires but the home have not summarised the feedback to show what the outcomes are or what changes have been made as a result of the feedback.

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, Care Homes 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, Care Homes 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
-----	----------	------------	-------------	----------------------

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
-----	-------------------	-------------------------------

Helpline:

Telephone: 03000 616161 or

Textphone: or

Email: enquiries@cqc.org.uk

Web: www.cqc.org.uk

We want people to be able to access this information. If you would like a summary in a different format or language please contact our helpline or go to our website.

Copyright © (2009) Commission for Social Care Inspection (CSCI). This publication may be reproduced in whole or in part, free of charge, in any format or medium provided that it is not used for commercial gain. This consent is subject to the material being reproduced accurately and on proviso that it is not used in a derogatory manner or misleading context. The material should be acknowledged as CSCI copyright, with the title and date of publication of the document specified.