



Making Social Care  
Better for People

Inspecting for better lives

# Key inspection report

## Care homes for adults (18-65 years)

<b>Name:</b>	Treefields Resource Centre
<b>Address:</b>	1 Treefields Close Wingfield Rotherham South Yorkshire S61 4AB

The quality rating for this care home is:

three star excellent 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.

<b>Lead inspector:</b>	<b>Date:</b>
Ramchand Samachetty	0 5 0 6 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 Adults (18-65 years) can be found at [www.dh.gov.uk](http://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](http://www.tso.co.uk/bookshop)

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- 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

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## Information about the care home

Name of care home:	Treefields Resource Centre
Address:	1 Treefields Close Wingfield Rotherham South Yorkshire S61 4AB
Telephone number:	01709551325
Fax number:	01709559885
Email address:	ss.treefields@rotherham.gov.uk
Provider web address:	

Name of registered provider(s):	Rotherham Metropolitan Borough Council (LDS)
Type of registration:	care home
Number of places registered:	6

Conditions of registration:		
Category(ies) :	Number of places (if applicable):	
	Under 65	Over 65
learning disability	6	0
Additional conditions:		
One specific service user over the age of 65, named on the variation received at this office on 8 August 2006, may reside at the home.		

Date of last inspection								
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Brief description of the care home
<p>Treefields Resource Centre is a six-bedded residential facility, which provides respite care for adults with a learning disability. The service is managed by the Rotherham Learning Disability Service, which in turn is jointly provided by Rotherham Metropolitan Borough Council's Social Services Department and the Rotherham Primary Care Foundation Trust.</p> <p>Treefields is a detached two-storey house, situated on the Wingfield estate, about three miles from Rotherham town centre. It is accessible by public transport and is within reach of local amenities.</p> <p>The accommodation is offered in single bedrooms, five on the first floor and one on the ground floor. Access to the first floor is only by stairs. There is a lounge, a dining room, a kitchen and a small laundry area on the ground floor. There is an office at the side of the main entrance, which also serves as a reception point.</p>

### Brief description of the care home

There are garden areas at the front and back of the house. The side and rear grounds are fenced off. The back garden provides a patio area with garden furniture.

The service has produced a statement of purpose and a service user guide. The fees charged at 5 June 2009, were £1,405.60 per week and the cost of respite stays depended on the number of nights required and on a financial assessment. Further information can be obtained from the Centre.

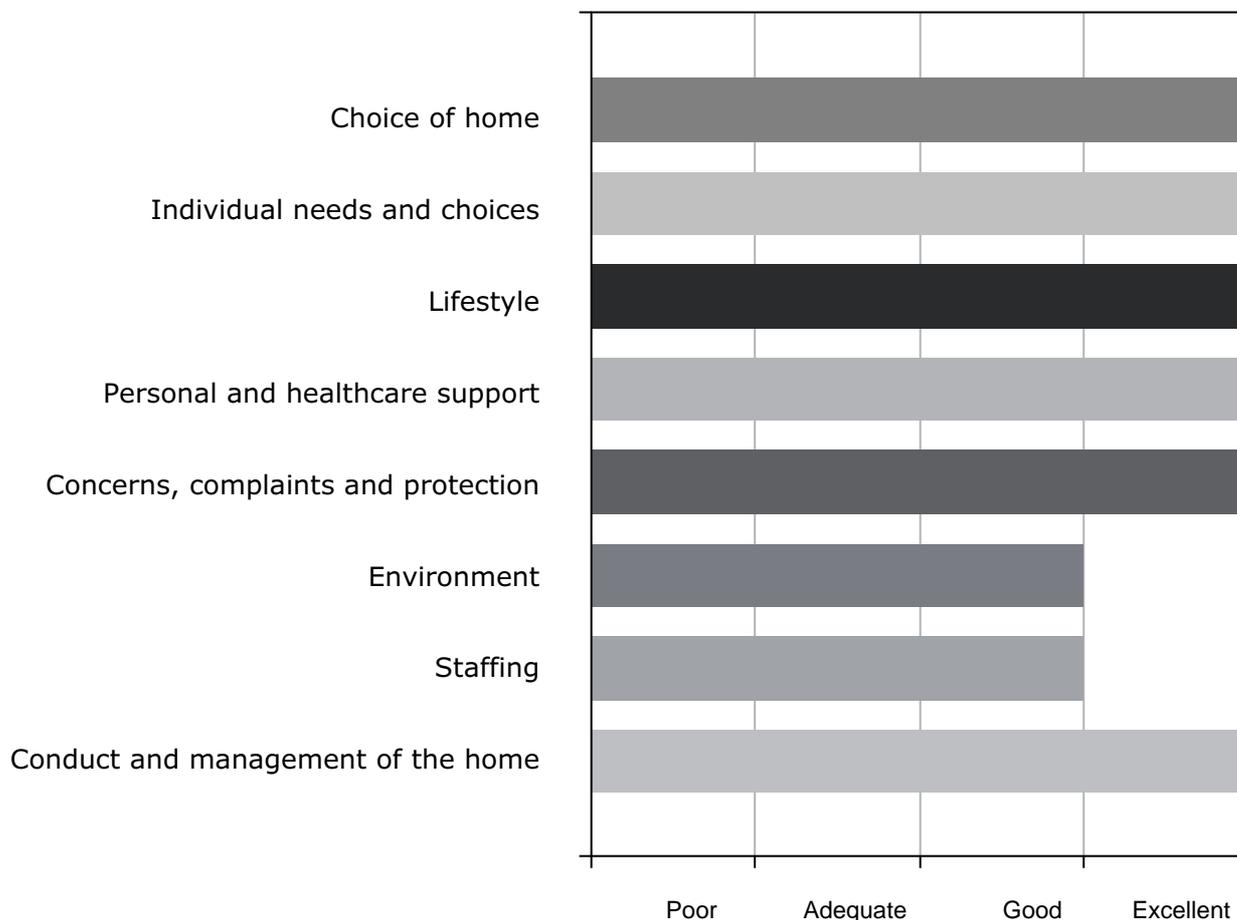
## Summary

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

The quality rating for this care home is:

three star excellent service

### Our judgement for each outcome:



### How we did our inspection:

This key unannounced inspection was carried out on 5 June 2009, starting at 10.00 and finished at 16.30 hours. The registered manager, Mr Caroll Elliss was present throughout the inspection.

The service is registered to provide respite care for up to 6 younger adults with learning disabilities. There were six people receiving respite care at the time of our visit.

All the key national minimum standards for 'Care Homes for Adults 18-65' were assessed. The inspection included a visual check of the premises, examination of care documents and other records, including information about the service, complaints

information, staff records, medicines, maintenance of equipment and quality assurance documents. We looked at the information contained in the 'Annual quality Assurance Assessment' document that was submitted to us before this inspection. We considered the views of people who were using the service and of their carers. We also spoke to staff who provided care and support to the people who were in residence at the time of this visit. We gave feedback about our initial findings to the manager and other senior staff.

We have reviewed our practice when making requirements, to improve national consistency. Some requirements from previous inspection reports may have been deleted or carried forward into this report as recommendations, but only when it is considered that people who use the services are not being put at significant risk of harm. In future, if a requirement is repeated, it is likely that enforcement action will be taken.

## **What the care home does well:**

People who used the service and their carers expressed their full satisfaction with the care and support that was provided at the home. Management and staff were praised on the way respite care was organised and provided for the people concerned, which ensured that individual needs were fully met. Staff provided care and support in a way that promoted the dignity and rights of people in their care.

Staff communicated well with people who used the service and in particular with their carers and made good efforts to involve them in their care. This ensured that peoples' choices and independence could be respected, encouraged and enhanced.

The service is jointly provided by the local Social Services department and the Primary Care Foundation Trust. In this respect and beyond, staff were working well with other agencies and professionals for the benefit of people who used the service. Staff showed a good understanding of the values and principles relating to the 'Valuing People Now' policy framework. We also noted that this service has consistently provided good outcomes for people who use it.

There was a good, competent and committed staff team in place, which worked well together to provide a very good standard of care to people who used the service. Staff were provided with good training and development opportunities to make sure that they had the relevant knowledge and skills to meet the needs of the client group, which very often, were complex and challenging.

## **What has improved since the last inspection?**

Since our last inspection (6 June 2007), the service has improved its provision of information to people who use it. Staff have reviewed various documentation, including the service user guide and the complaints procedures to make them more user-friendly and more accessible by using pictures and makaton signs.

A new policy has been developed to guide staff and people who use the service on personal and sexual relationships, in relation to people who have learning disabilities and who require residential care.

The physical environment has been upgraded. Communal areas and bedrooms have been decorated and new furniture, equipment, including television sets have provided. these have made the home more comfortable and more pleasant.

## **What they could do better:**

There was a good staff recruitment and selection procedure in place. However, there is a need for the service to ensure that consistent efforts are maintained so that the staff deployed in the service reflect the diversity of the local population.

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](http://www.cqc.org.uk). You can get printed copies from [enquiries@cqc.org.uk](mailto:enquiries@cqc.org.uk) or by telephoning our order line –0870 240 7535.

## Details of our findings

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## 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, what they hope for and want to achieve, and the support they need.

People can decide whether the care home can meet their support and accommodation needs. This is because they, and people close to them, can visit the home and get full, clear, accurate and up to date information. 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 the person 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 **excellent** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

People who used the service were provided with appropriate information, which was specific and accessible to them. This helped to make sure that they could make informed choices about their care.

People's needs were comprehensively assessed and reviewed, with their involvement, before they were admitted for respite care.

Evidence:

Copies of the statement of purpose and service user guide were available to people who were staying at the home and to those who were interested in using the service. These documents had been revised and improved to make them more easily accessible to people who use the service. We noted that a copy of the complaints procedure had been presented in pictorial form and included in the service user guide. Other information was provided in 'easy read' format and in some ethnic minority languages. These initiatives were taken to improve and ensure equality of access to the service. Relatives told us that they were provided with adequate and relevant information about the service and this helped them make a positive choice for it.

## Evidence:

We looked at the care records of two people who had more recently started using the respite service. Their needs had been appropriately assessed and this made sure that staff were able to meet their needs, before they were offered the service. In addition, staff would also check before planned admissions, the care needs of people who used the service on a regular basis. This helped to make sure that staff were aware of any changes in care and support needs that may have taken place in between respite stays. Relatives told us that they valued the telephone calls that staff make to them and their loved ones before the start of their respite stays and these helped to maintain effective communication.

## Individual needs and choices

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 needs and goals are met. The home has a plan of care that the person, or someone close to them, has been involved in making. People are able to make decisions about their life, including their finances, with support if they need it. This is because the staff promote their rights and choices. People are supported to take risks to enable them to stay independent. This is because the staff have appropriate information on which to base decisions.

People are asked about, and are involved in, all aspects of life in the home. This is because the manager and staff offer them opportunities to participate in the day to day running of the home and enable them to influence key decisions. People are confident that the home handles information about them appropriately. This is because the home has clear policies and procedures that staff follow.

This is what people staying in this care home experience:

Judgement:

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

People using the service were provided with well developed care and support plans, which ensured that their identified needs were met, in a manner which enhanced their independence and choice and helped them to live fulfilling lives.

Evidence:

We checked the care plans of two people who were living at the home. They were appropriately developed from comprehensive assessment of their individual needs, risks, preferences and aspirations. We noted that each care plan had been developed with the involvement of the person using the service and their carers. Staff were using a 'person-centred' approach in care planning and the principles of service provision as outlined in the 'valuing people now' strategy. This ensured that the care and support provided to people who used the service, was in accordance with what they wanted and their developmental needs.

The care plans were written in plain English and various pictures were used to convey

## Evidence:

information. This helped people using the service to better understand their care plans, in particular when these were developed and reviewed. Staff explained that they would review a person's care plan at the start of each respite session, which was usually within six months.

The care plans showed that the aims, goals, risks and support needs of each person and actions to meet them, were clearly stated and were followed. People who used the service indicated that they were encouraged to make decisions about their daily activities. Risk assessments were put in place to support them in various aspects of daily living. This helped to make sure they had some control and independence in their activities. Staff explained that where people were not able to make decisions and had no capacity to do so, they were working with relatives and other people who were involved in the person's life, to take appropriate actions. Their welfare and wellbeing were therefore promoted. This was confirmed by the records of care that was contained in individual care plans.

People who used the service and their relatives told us that they were very satisfied with the care and support that was provided at Treefields. One relative said that the respite care provided to his son 'helped him to meet people and develop his social skills', whilst also giving the family a necessary break from caring.

## Lifestyle

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 can take part in activities that are appropriate to their age and culture and 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 and the home supports them to have appropriate personal, family and sexual relationships. People are as independent as they can be, lead their chosen lifestyle and have the opportunity to make the most of their abilities. Their dignity and rights are respected in their daily life. People have healthy, well-presented meals and snacks, at a time and place to suit them.

People have opportunities to develop their social, emotional, communication and independent living skills. This is because the staff support their personal development. People choose and participate in suitable leisure activities.

This is what people staying in this care home experience:

Judgement:

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

People who lived at the home were encouraged and supported to take part in a range of social and recreational activities, which helped them maintain their preferred lifestyles and achieve their goals, whilst enjoying their rights.

Evidence:

People who used the service and their relatives told us that the home provided good opportunities for both personal development and social interactions. Also, they were satisfied that staff made every effort so that people who used the service could continue with their usual activities, as they would if they were at home.

Staff described a wide range of leisure and social activities that people using the service could participate in, both at the home and in the local community. People told us that they were attending day centres, local college and social clubs. They also spent

## Evidence:

time at the home, watching films and television, playing board games, shopping and going for walks. A few people would spend time practising particular skills. These were included in their care and support plans and records, and on occasions photographs, were kept to show their participation and achievement. We noted that people using the service had opportunities to make friends and develop relationships with other people of their choice. It is commendable that the service has developed a 'Personal Relationship' policy to guide staff in handling issues regarding personal and sexual relationships of people who use the service. This policy was also very helpful for people who use the service and their relatives, as it sought to protect the rights and welfare of vulnerable people.

People who used the service said that staff always helped them to keep in touch with their relatives and friends. They also said that staff treated them in a 'friendly and courteous way'. Relatives commented that their loved ones always 'looked forward to their respite stays' and added that they were always welcomed at the home. We observed some interactions between staff and people who lived at the home. These were based on respect for the individual and issues of privacy and dignity were well addressed. The manager explained that staff were actively encouraging and supporting people to start carrying and using their bedroom door keys, if they were able to do so. This was being done in order to promote their rights and independence.

Most people who used the service had day time activities or occupations outside the home and this meant that they would have their lunch where they were, for example at day centres. Some people were provided with 'packed lunches' to take to their place of activity. However, they were all provided with other meals, which included breakfast, an afternoon meal and supper. Staff explained that all the meals at weekends were prepared at the home. People who were in residence would often join the staff team in preparing the meals. People who lived at the home told us that they liked the meals and snacks that were provided to them. On occasions, some people would help staff to prepare meals as a way of developing their living skills. We noted that people who used the service were encouraged to express their food preferences. They said that they would often do that by going on shopping trips and by helping staff to buy the food items they liked best. Care records showed that staff were aware of the nutritional needs of people in their care and took appropriate action to ensure they were met.

## Personal and healthcare support

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 receive personal support from staff in the way they prefer and want. Their physical and emotional health needs are met because the home has procedures in place that staff follow. If people 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.

If people are approaching the end of their life, the care home will respect their choices and help them to 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 **excellent** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

The personal and health care needs of people who used the service were appropriately identified and were well met during their respite stays. This helped to ensure their continued wellbeing.

Evidence:

The individual care and support plans that we checked contained the necessary information about what personal, health care and psychological support was required for the people concerned. The plans included a section on 'health' as part of the person-centred approach. This contained the relevant information about the individual's GP, dentist, community nurses and other specialist health professionals. This ensured that people using the service could continue accessing community health care services as necessary. Records showed that people were encouraged and supported in keeping the appointments they had with health care and other professionals.

In discussion, we noted that care and support staff were very knowledgeable about the specific needs of each person who was using the respite service and were therefore

## Evidence:

able to provide a very 'personalised' service. People who used the service also told us that their personal and health care needs were always provided to them in private. Staff confirmed that discussions with people in their care were held in confidence and that they were aware when to share important information.

People told us that the service was very flexible and responsive. Their need for respite was always well handled. One relative said that he was 'very relieved' that the service was able to provide an additional respite session for his son, at short notice, in order to cope with an emergency and that ensured the wellbeing of both his son and the family. He added that staff were also good at listening and providing support to meet their emotional needs as necessary. Some daily activities which took place outside the home, for example, attendance at day centres meant that some routines were needed, but people felt that these were well managed.

We checked the way medicines were managed. The records regarding the receipt and administration of medicines were examined. These were satisfactory. The manager said that the service had taken part in a 'pilot scheme' for a new medication policy, developed by Rotherham Borough Council. Staff had successfully implemented the policy. We noted that staff were appropriately guided on issues regarding non secondary dispensing and administration of medicines. These procedures were helpful to ensure the welfare and safety of people who had to be administered medicines while they were away from the home. None of the people who were in for respite care at the time of this inspection were self-medicating. The manager said that staff who administer medicines had received the appropriate training to do so and this was confirmed by information contained in training records.

## Concerns, 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. Their concern is looked into and action taken to put things right. The care home safeguards people from abuse, neglect and self-harm and takes action to follow up any allegations.

There are no additional outcomes.

This is what people staying in this care home experience:

Judgement:

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

People who used the service were provided with appropriate information, about how to express their concerns, in a way that was easier for them to understand. There were also appropriate procedures in place to safeguard and protect people who lived at the home. These ensured that people's safety and wellbeing were promoted at all times.

Evidence:

The service had use of the corporate complaints procedure of the social services department of Rotherham Borough Council. A copy of the procedure was available at the home and a summary was included in the statement of purpose. Also, the complaints procedures had been produced in pictorial form together with makaton signs in order to ensure people who use the service could use it.

People who used the service told us that they knew they could talk to the staff or the manager if they were not happy about something or somebody. Relatives said that they had received information about the complaints procedure but did not think they would have to use it because staff would always listen to their concerns and address them in a prompt manner.

The manager had stated in the 'Annual Quality Assurance Assessment' document, which was provided to us, that the service had not received any complaints in the last twelve months. The manager explained that a recent 'customer survey' had shown

## Evidence:

that a number of people who used the service were unsure about how to make a complaint. As a result, staff had reviewed the procedures, simplified and presented it in a pictorial form to make it more 'user friendly'. The manager stated that the use of this new version of the complaints form would be monitored and reviewed as required.

Adult safeguarding procedures were in place at the home and were used to protect and safeguard people who used the service. The manager confirmed that there had been one adult safeguarding concern and that it had been referred to the local safeguarding team. This issue had been investigated and satisfactorily concluded.

We spoke to a few members of staff and they confirmed that they had received training and guidance on adult safeguarding policy and procedures and on the use of restraint and its alternatives. We noted that the service had introduced an on-going programme of e-learning on a number of topics, including adult safeguarding. This helped members of staff to update and refresh their knowledge and care practices with regards to the protection of vulnerable adults. In discussion, staff also showed that they had a good understanding of adult safeguarding issues and were able to effectively protect people in their care.

## 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, comfortable, 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. People have enough privacy when using toilets and bathrooms.

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 home was well maintained and clean. It provided a pleasant, comfortable and safe environment for people who lived in it. People who used the service found it to be 'very homely'.

Evidence:

Treefields provides its accommodation and services in an ordinary two- storey detached house located in a residential area. It displays no sign or notices that it is a residential care home and this ensured that it was not portrayed as an institution. There was one bedroom on the ground floor and this was often used for people who had mobility problems. The five other bedrooms were on the top floor. Access between them was provided by stairs only. The communal areas included a dining room and a lounge. The kitchen and laundry were located on the ground floor and were 'domestic' in character.

The building was in good state of repair. The manager stated that there was an on-going programme of refurbishment and decoration. There were also plans for upgrading the building by adding a conservatory area and therefore increase the communal areas, for the benefit of people who use the service. We noted that all the bedrooms had been recently decorated and new furniture, including some larger beds

## Evidence:

had been provided. New wide screen television sets had been provided in both the communal areas and in bedrooms and people were very happy with them. People who used the service commented that they liked their bedrooms and found them to be 'very comfortable'. Toilets and bathrooms had also been upgraded and made more pleasant. The manager said that regular checks and risk assessments regarding the environment were carried out to make sure all aspects of health and safety were adhered to. Maintenance and other records showed that the environmental checks were appropriately undertaken.

The home was found to be clean and tidy. There was an infection control policy in place and staff were aware of it and were able to implement it. The garden areas were well maintained. There was a range of garden furniture, which enabled people to enjoy the weather outdoors.

People who used the service and their relatives commented that they were 'happy' with the environment, which they described as 'safe, comfortable and like home'.

## 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, qualified 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. People's needs are met and they are supported because staff get the right training, supervision and support they need from their managers.

People are supported by an effective staff team who understand and do what is expected of them.

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.

There was a good, competent and committed staff team in place and it was well able to meet the needs of people who were currently using the service.

Evidence:

On the day of this inspection, six people were in residence for respite care. Besides the registered manager, there were three support workers and a senior care officer on duty. The manager explained that there was a senior care officer on duty at all times and this ensured that support workers had appropriate guidance and assistance as necessary. There was one waking staff, a support worker and a sleep-in staff, a care officer, at night. The manager stated that more support staff were deployed when people with high dependency needs were receiving respite care. This was confirmed from information contained in the duty rota.

People who used the service and their relatives told us that there were always sufficient staff to provide all the help and support that were needed. They said that they were fully satisfied with the services being provided.

The home had use of the Rotherham Council's recruitment and selection policy. This included guidelines on the practice of equal opportunities and of anti-discrimination.

## Evidence:

However, information from the ' annual Quality assurance assessment showed that the current staffing profile did not adequately reflect the ethnicity and diversity of the local population group. The manager explained that efforts were being made to attract interest in the service from a wide range of people. We checked the files of two members of staff who had recently been recruited. The recruitment procedures had been appropriately followed. All the pre-employment checks had been carried out and were satisfactory. The new members of staff had been provided with the appropriate induction and training to make sure they could meet their responsibilities.

Staff told us that they had received training on a number of topics. These included the appropriate refresher courses in health and safety, first aid and food hygiene. Other training courses included the mental capacity act, deprivation of liberty safeguards and adult safeguarding. staff stated that they had been provided with training to use computers and were therefore able to undertake e-learning on a number of topics. We noted that all the support staff who worked at the home had achieved their 'National Vocational Qualification' (NVQ) level 2 in care.

The manager stated that all staff were receiving regular supervision, on a 6-8 weeks period. Furthermore, they had to undertake a 'Personal and Development Review' bi-annually. Staff confirmed that they had received supervision at regular intervals and that there were regular staff meetings, which helped them to improve their care practices. They said that they felt positive about their contribution to the service and to the welfare of people in their care.

## Conduct and management of the 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 have confidence in the care home because it is run and managed appropriately. People's opinions are central to how the home develops and reviews their practice, as the home has appropriate ways of making sure they continue to get things right. The environment is safe for people and staff because 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. They are safeguarded because the home follows clear financial and accounting procedures, keeps records appropriately and makes sure staff understand the way things should be done.

**This is what people staying in this care home experience:**

Judgement:

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

Appropriate management arrangements were in place to ensure the proper running of the service. Good quality monitoring methods were being used to continually improve the service for the benefit of people who used it. This helped to promote the welfare and safety of people who lived and worked at the home.

Evidence:

The registered manager has wide experience of working and managing care services for people with learning disabilities. He is qualified at level 4 in care and management. The manager has shown a high level of skills and commitment in his work. He has taken part in various working groups within the local 'Learning Disability' service, which is a joint service led by Rotherham Council and the Rotherham NHS Foundation Trust.

Staff told us that they were satisfied with the way the home was managed. They described the manager as being 'very supportive' and 'approachable'. This view was also confirmed by people who used the service and relatives we met on the day of our

## Evidence:

visit. In discussion, the manager commented on his work with regards to the development of the service, within the framework of 'Valuing People Now' policy initiatives and his efforts to seek additional resources for the service. Staff told us that they appreciated the manager's efforts and his leadership skills.

The manager informed us that he had carried out regular 'user satisfaction surveys' regarding the quality of the service being provided. The last survey was carried out in April 2009 and the results showed that people were highly satisfied with it. Staff were able to use the information gathered from the survey to initiate further improvement in the way complaints could be handled. This has led to the production of an 'improved and user friendly' version of the complaints documents.

The manager stated that other quality monitoring tools were in use at the home. These included regular health and safety checks and the monthly unannounced visits by the provider. The manager also submitted regular progress reports to senior managers in the service. Records relating to these checks and copies of the provider monthly reports were checked and they were satisfactory. The manager stated that staff would also use the regular 'residents' meetings to obtain feedback on the quality of the service and to take any remedial action as necessary.

The manager had confirmed in the 'Annual quality assurance Assessment' document that was sent to us, that appropriate health and safety policies were in place. Risk assessments about the environment, fire safety and various work practices had been developed and regularly reviewed. Records showed that equipment and utilities in use at the home had been checked and serviced as required. These actions helped to ensure the safety and welfare of people who lived and worked at the home.

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
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## 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
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### 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
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### 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
1	34	Consistent efforts should be made to ensure that the care and support staff who work at the centre, reflect the ethnicity and diversity of the population it serves. This will ensure that the service is well equipped to meet diverse cultural needs of people.

## Helpline:

**Telephone:** 03000 616161 or

**Textphone:** or

**Email:** [enquiries@cqc.org.uk](mailto:enquiries@cqc.org.uk)

**Web:** [www.cqc.org.uk](http://www.cqc.org.uk)

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