



Making Social Care
Better for People

Inspecting for better lives

Key inspection report

Care homes for older people

Name:	Grange Cottage Residential Home
Address:	6 Grange Road Sutton Surrey SM2 6RT

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:
Michael Williams	0 7 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

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- 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

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Internet address	www.cqc.org.uk

Information about the care home

Name of care home:	Grange Cottage Residential Home
Address:	6 Grange Road Sutton Surrey SM2 6RT
Telephone number:	02086422721
Fax number:	02086422721
Email address:	grangecottage@blueyonder.co.uk
Provider web address:	

Name of registered provider(s):	Grange Cottage Limited
Type of registration:	care home
Number of places registered:	11

Conditions of registration:		
Category(ies) :	Number of places (if applicable):	
	Under 65	Over 65
dementia	0	11
mental disorder, excluding learning disability or dementia	0	11
Additional conditions:		
A variation has been granted to allow four specified service users under the age of 65 to be accommodated until such time that the home is unable to meet their assessed needs or their placement terminates.		

Date of last inspection								
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Brief description of the care home
Grange Cottage is a limited company, Grange Cottage Ltd, owned and run by Mrs and Mrs Halkoree. Mrs Halkoree is also registered as the manager. It is a small residential home currently registered for eleven older service users, who suffer from long-term mental health problems including dementia. But the home has been extended and if the additional services and facilities are registered by the Commission the home will cater only for older people with dementia in future. As part of the improvement to the premises new bedrooms have been added, these plus several existing bedrooms now have ensuite toilets. The accommodation is provided over two floors, there is no passenger lift but stair lift has been installed. Ramps, handrails and doors have been widened to give easier access to people with mobility problems. There is very limited parking to the front of the property and a small garden to the rear. The home is well

Brief description of the care home

served by public transport since it is near Sutton railway station. The range of weekly fees is between 500 and 600 pounds as at April 2009.

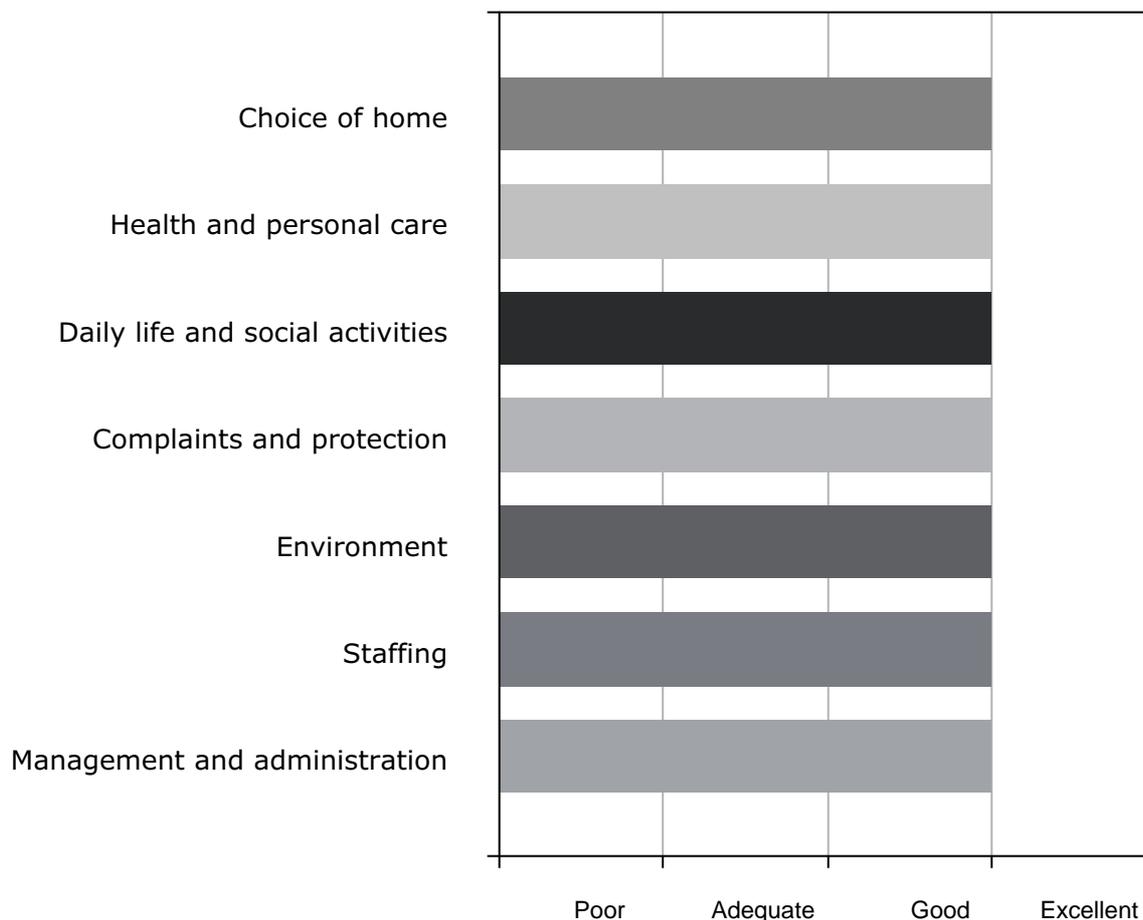
Summary

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:

To monitor all aspects of this service we tracked the care provided to a sample number of residents and cross checked the information by speaking to or observing the residents, and where possible meeting with their visitors, by examining the documentation supporting care, by observing the meals provided, by checking the arrangements for administering medication, handling money, records of complaints and accidents. Staff providing care were interviewed including, carer and ancillary staff as well as the owners and manager. Questionnaires were also distributed to residents, visitors, staff and owners and feedback has been noted. In compiling this report the Commission has also taken account of any other information such as the incident reports sent to the Commission and the AQAA, Annual Quality Assurance Assessment, the self auditing tool each home is required to complete.

What the care home does well:

This is a small family run care service, there is a predictable and regular routine for residents and a friendly atmosphere prevails. Visitors to the home confirm that the odour free atmosphere and family like environment attracted them to this service and they have been very pleased with the way their relative is being cared for. The improvements to the premises offer much better facilities including ensuite facilities that residents and visitors appreciate. The home is close to the town centre and those able to walk into town can enjoy the local resources of Sutton shopping centre.

What has improved since the last inspection?

We confirmed that the improvements we saw last time have been sustained such that the staff records are now well organised and the procedures for recruiting staff, including police checks, now appears to be much safer for residents. Mr Halkoree again told us that he is no longer working excessively long hours in two different jobs, instead the duty rosters shows that he works a standard shift pattern, as a care worker, and was supervising the building works to his home. In 2007 we identified 26 requirements and in 2008 just 9 were issued at the last inspection and these have all been addressed

What they could do better:

We recommend that the statement of purpose and guide, which gives information about the home, is further amended to make clear the criteria for admission, in particular the client group to be catered for. The owners tell us this will be a service providing personal care but not nursing care for older people with dementia. Any reference to mental illnesses such as schizophrenia should therefore be removed. The owners advise us that when they achieve fuller occupancy they will employ a dedicated activities coordinator and we endorse this as a recommendation. We checked staff recruitment in some detail and noted that in one instance the application form was quite poorly presented making the work history unclear and details such as immigration status, previous employers details and address information all uncertain. The owners had failed to note these problems so we require improvements in the vetting of applicants, their applications forms and their explanation for these matters. The owners gave an undertaking not to employ anyone until all their details have been clarified and it was safe to employ them.

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

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

The home can assess prospective the needs of residents and works with placing authorities to ensure assessments are undertake and available to the home at the time of admission so as to ensure residents will know their needs can be met.

Evidence:

We checked a sample of three of the residents case files, we spoke to the manager, to staff and to the residents and some visitors. We also checked the statement of purpose and resident guide. The documentation used to assess and record information about residents is adequate although some forms had been headed nursing notes these headings have now been removed since the home does not offer nursing care. The assessments cover the usual range of care needs including mobility, disabilities, specific health matters, skills for daily living such as the ability to climb stairs or make a cup of tea. The assessments also include known risks such as the risk of falling or getting lost if the resident is very forgetful. The statement of purpose and resident

Evidence:

guide are now to an acceptable standard and provide information that would be helpful to a prospective resident and their representatives. However, these two documents are being revised as part of the application to registered extra rooms and change the physical layout of the premises, the owners are also likely to revise their scale of charges to reflect improved facilities and this must be made clear in their documentation. We checked the revised version and recommended that any reference to mental illnesses such as schizophrenia be removed since the owners will no longer admit people with mental illness as their primary diagnosis. In future the home will specialise in the care of older people with dementia.

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.

Residents can be assured that this service can now meet their health and personal care needs.

Evidence:

During our visit in 2009 we had the opportunity to meet with one family who reported how pleased they were with the care and attention provided by this care home. They advised us that they had visited during the time the house was being modernised but recognised the service had a good atmosphere and elected to have a trial stay. They advise us that their mother has made tremendous progress and now walking again and is settled well in her new home. They commended the owners for providing information and promises of good care and have met those commitments were told. The also commended the kind and caring attitude of staff. Residents have access to personal care within the home and receive health care support from the local community services such as the Community Nurse and General Practitioner services and well as hospital services and specialist support from Opticians and Dentists. Health needs are monitored and appropriate action and intervention taken for example the

Evidence:

General Practitioner is consulted if residents fall ill and the Community Nurse is consulted about wound care. We have spoken to a visiting Community Nurse who confirm that she was happy with the way health care was managed so far as she could judge by her regular visits to individual residents. We were advised the Community Psychiatric Nurses also visit the home as necessary. Since our previous visit in 2008 the premises have been much improved, the wider doorways, ramps, handrails and a stair lift, so the home is now better able to support residents with some mobility problems. There is evidence in the care plans of general health care needs. We examined a number of care plans and the assessments. Care planning is also better than it was in 2008, it covers a range of need both health and social. During my examination of documentation it was evident that the manager has improved personal details available and this includes information about last wishes and the Rights and Customs the residents wish to be observed at the end of their life. Details of family and representatives are included and details such as preferred disposal and beliefs if any. Since staff were unfamiliar with the care plans when we visited in 2008 we recommend that a copy of the plans be left with residents in their bedrooms, so that the care plans will be accessible to the resident to whom they refer, to their visitors and to key workers and other care staff. The views of residents are sought, for example resident meetings are held but as most residents have dementia there is little scope for them to plan ahead and make clear their wishes and preferences, this relies upon staff knowing their residents better than they demonstrated when we visit. For this reason we have emphasised the need for residents to be offered choices at the appropriate time e.g. choice of meals just prior to service of the meal and this is now the case. The home has a medication policy which is accessible to staff. The medication records were checked on this occasion and we found the medicine charts and storage of medicines to be satisfactory. Both owners of Grange Cottage, Mr & Mrs Halkoree, have a nursing background and understand the need to comply with the administration, safekeeping and disposal of drugs including controlled drugs. A simplified monitored dosage system is in use and seems to be well managed.

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.

This home can now provide the lifestyle, including meals, that residents might expect and they can be supported in maintaining contact with family and friends.

Evidence:

The home was registered to provide care for two distinct groups of residents, those with dementia and those with mental health problems, but the owners have now decided they tell us to restrict admissions in future to a single client group, older people with dementia.

As we have noted before in our reports, one resident has for a long time assisted with laundry tasks and tells us she enjoys doing so. Residents have in the past told us that life in Grange Cottage can be a bit boring, However, table top games such as bingo, dominoes and cards are available and were underway when we visited in April. We commend the owners aim to employ a member of staff who will be appointed at alter date to lead in coordinating activities.

As we have noted in previous visits that some staff have a poor grasp of spoken English and little knowledge of English culture and history and therefore their communication skills with English speaking residents is inevitably compromised. Communication was limited to basic aspects of care. It remains the case that not all

Evidence:

staff share a common culture, background or history with residents and so staff are not in a position to prompt residents memories about every day events as they unfold around them. We remain concerned reminiscence and reflection is hardly possible if staff do not know the history and background of what residents might reminisce about. However, we acknowledge that recruitment of staff is dependent upon the range of applicants who reflect the available workforce. It will therefore be for the owners to support staff training in the language and cultural background of residents. The midday meal was home made meat lasagne. Meals we were told are now more often home-made. As another improvement the home now provides at least two distinct choices for the main meal of the day and as residents have very poor memories the two choices are available just prior to service so they can see and choose at the table. The dining area is also much improved. The Freezer has finally been removed from the dining room and the dining area expanded to accommodate more residents. It is a much more congenial setting than before. The residents said they like the new dining room and enjoyed their dining so this indicates residents appreciate the improvements made by the owners, and the cook.

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 owners have in place a suitable complaints process and are clear about the local authority's procedures for dealing with allegations of poor care practices or abuse so residents can feel protected by these procedures.

Evidence:

This service achieved a good rating in this section of the report when we last visited in 2008 and so this section remains met as before. As a demonstration of the homes wish to make the information clearer to all there was a sign in the hall that is translated in picture form to assist those who may have lost the skills to read. Although pictures are of more value to learning disabled people than older people with dementia or mental health problem it is commendable that the home is considering alternate methods of communicating with residents and visitors. Large formats and short simple wording may be of more value to the current client group. No specific complaints were drawn to the attention of the Commission whilst we inspected the home. Information about how to complain is contained in the residents guide. Staff we interview do now have copy of the GCSS General Social Care Council Code of Practice are now clear about the term whistle-blowing, that is, reporting abuse in an effective manner to the appropriate authorities. As the homes procedures for dealing with complaints and safeguarding adults are acceptable and as staff were well aware of their responsibilities to safeguard residents and report abuse this section is again assessed as good. We note the fact that the owners have information about the new Mental capacity Act

Evidence:

including the deprivation of liberty safeguards so as to ensure the rights of residents are protected in law.

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.

After recent refurbishment the environment is much improved so residents can be accommodated in a safe, secure and comfortable setting.

Evidence:

It is in respect of the environment that the improvements to this home are most obvious. The premises have been extended to provide more bedrooms. These and several of the existing bedrooms have been modernised and have ensuite facilities including toilet and in some rooms as shower as well. The residents and visitors told us how pleased they were with the improvements. The garden still needs to be landscaped and the owners also intend adding a canopy over the patio area to the rear of the premises, this will provide a safe and pleasant seating area for residents and their visitors. The visitors are looking forward to this and have agreed to help with some of the gardening. All doorways have been widened to 900mm we are told so that it will be easier for residents with walking frames to move about the home. Handrails and ramps are in place and the home also has a stair lift. The home has assisted baths and walk in showers and adapted toilets so facilities for the less mobile are much improved. There are now two lounge areas so residents have some choice about where and with whom they sit during the day. Whilst we saw no obvious hazards during our visit the manager has agreed to deal with several matters in connection with the registration of the extra rooms so as to ensure there will be no hazards when

Evidence:

registered and this includes door locks, window restrictors and compliance with water regulations.

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.

Recruitment practices have improved and are now safer for residents, staffing levels and the deployment of ancillary staff is now also safer for residents, the skills mix of staffing is also improving so residents can now be confident staffing in this care home has improved.

Evidence:

Staff recruitment practices now seem safer, all necessary checks have been made before staff are being employed and that includes references and police checks as well as checks about identity and permits to work. We did however find in one case that the recruitment process was not as thorough as might be. The person concerned is not yet employed by the home but the application form in this instance has anomalies that need to be thoroughly checked including employment history, timescale of employment, reference, addresses and immigration status. This must be done before employment is considered. Staff are now either training to achieve NVQ National Vocational Qualification or will be booked to do so. This commitment to training is very laudable. The staff we spoke to during our visit were well informed and thoughtful about care practices. Our observations were endorsed by visitors who said staff were very good and commended the owners for the overall running of the home. We have in the past been very concerned that staff were undertaking domestic cores at the expense of time with residents. We also found in the past that staff were working excessive

Evidence:

hours. The staff roster suggests staff are no longer working excessive hours. The regulations require that the home employ enough staff, including ancillary staff, to meet residents needs and not to curtail activities for want of adequate numbers of staff. Although the current team of staff does not reflect the cultural diversity of the residents, who are European, the improvements to staffing is noted and we acknowledge that recruitment is dependent upon the available workforce. Not all staff have had fire drill training so this will be required particularly as the home has a new layout. We also recommend greater scrutiny of application forms.

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.

Residents can now be confident that the providers of this care home are running the home safely and in the best interests of the residents.

Evidence:

The main emphasis of this visit by the Commission was to observe how the owners, Mr and Mrs Halkoree, have improved the services. We also wished to continue monitoring what improvements have been made to the management of staffing in particular recruitment and the deployment of staff, that is, how many hours they work in the course of a week or month and what their duties are. Recruitment is now much improved and staff are being properly vetted before being employed. We confirmed this by checking the documentation for a number of applicants seeking employment in Grange Cottage. We also checked by speaking to existing staff to recheck their employment documentation and permits to work. We checked the procedures for handling residents money in 2008 and found the arrangements satisfactory so they were not checked this time. Other records we checked included the visitors book,

Evidence:

menus, staff records, residents case files, accidents, complaints records. No hazards were identified on this occasion but we make recommendations about door locks, water regulation checks and window restrictors. We also noted that member of staff who is part time has yet to be involved in a fire drill so the home ensure all staff including part time, weekend and night staff all have suitable fire training drill.

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
1	37	17	Records: food and complaints records must be maintained with greater detail so residents are protected by records that can be used to evaluate food and complaints.	30/06/2008

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
1	38	23	<p>Fire safety, Staff must receive periodic fire training by fire drills to familiarise themselves with the new layout of the home.</p> <p>So that residents will know staff can respond appropriately in the event of fire.</p>	30/07/2009

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	2	Statement of purpose and resident guide, it is recommended that they be amended to reflect the new client group. So prospective residents will have the correct information.

Helpline:

Telephone: 03000 616161 or

Textphone: or

Email: enquiries@cqc.org.uk

Web: www.cqc.org.uk

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