

# Key inspection report

## Care homes for older people

<b>Name:</b>	Kenyon Lodge
<b>Address:</b>	99 Manchester Road West Little Hulton Manchester M38 9DX

<b>The quality rating for this care home is:</b>	two star good service
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A quality rating is our assessment of how well a care home is meeting the needs of the people who use it. We give a quality rating following a full review of the service. We call this full review a 'key' inspection.

<b>Lead inspector:</b>	<b>Date:</b>
Elizabeth Holt	0 7 0 5 2 0 1 0

This is a review of quality of outcomes that people experience in this care home. We believe high quality care should

- Be safe
- Have the right outcomes, including clinical outcomes
- Be a good experience for the people that use it
- Help prevent illness, and promote healthy, independent living
- Be available to those who need it when they need it.

The first part of the review gives the overall quality rating for the care home:

- 3 stars - excellent
- 2 stars - good
- 1 star - adequate
- 0 star - poor

There is also a bar chart that gives a quick way of seeing the quality of care that the home provides under key areas that matter to people.

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.

We review the quality of the service against outcomes from the National Minimum Standards (NMS). Those standards are written by the Department of Health for each type of care service.

Copies of the National Minimum Standards – Care Homes for Older People 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)

The mission of the Care Quality Commission is to make care better for people by:

- Regulating health and adult social care services to ensure quality and safety standards, drive improvement and stamp out bad practice
- Protecting the rights of people who use services, particularly the most vulnerable and those detained under the Mental Health Act 1983
- Providing accessible, trustworthy information on the quality of care and services so people can make better decisions about their care and so that commissioners and providers of services can improve services.
- Providing independent public accountability on how commissioners and providers of services are improving the quality of care and providing value for money.

## Reader Information

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## Information about the care home

Name of care home:	Kenyon Lodge
Address:	99 Manchester Road West Little Hulton Manchester M38 9DX
Telephone number:	01617904448
Fax number:	
Email address:	sandram@abbeyhealthcare.org.uk
Provider web address:	

Name of registered provider(s):	Trees Park (Kenyon) Ltd
Name of registered manager (if applicable)	
Ms Carol Lambert	
Type of registration:	care home
Number of places registered:	60

Conditions of registration:		
Category(ies) :	Number of places (if applicable):	
	Under 65	Over 65
old age, not falling within any other category	0	60
physical disability	60	0

### Additional conditions:

The registered person may provide the following category of service only: Care home with nursing - Code N. To service users of the following gender: Either. Whose primary care needs on admission to the home are within the following categories: Old age, not falling within any other category - Code OP. Physical disability - Code PD. The maximum number of service users who can be accommodated is: 60

Date of last inspection

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### Brief description of the care home

Kenyon Lodge is a registered care home providing nursing care and personal care and accommodation for up to 60 older people. Care is provided to 30 residents assessed as needing personal care only and 30 people who require nursing care. All personal care beds are located on the first floor. The home is set in its own grounds with a designated parking area and a large secure garden area to the rear with patio area.

#### Brief description of the care home

The home is situated on a main route in Little Hulton enabling easy access to Manchester, Salford and Bolton. The current scale of charges at the home is GBP355.52 -GBP525.00 per week. Costs in addition to the fee are hairdressing GBP3.50-GBP16.00, Chiropodist GBP10.00 per visit, newspapers-varied and toiletries which are charged on an individual needs basis.

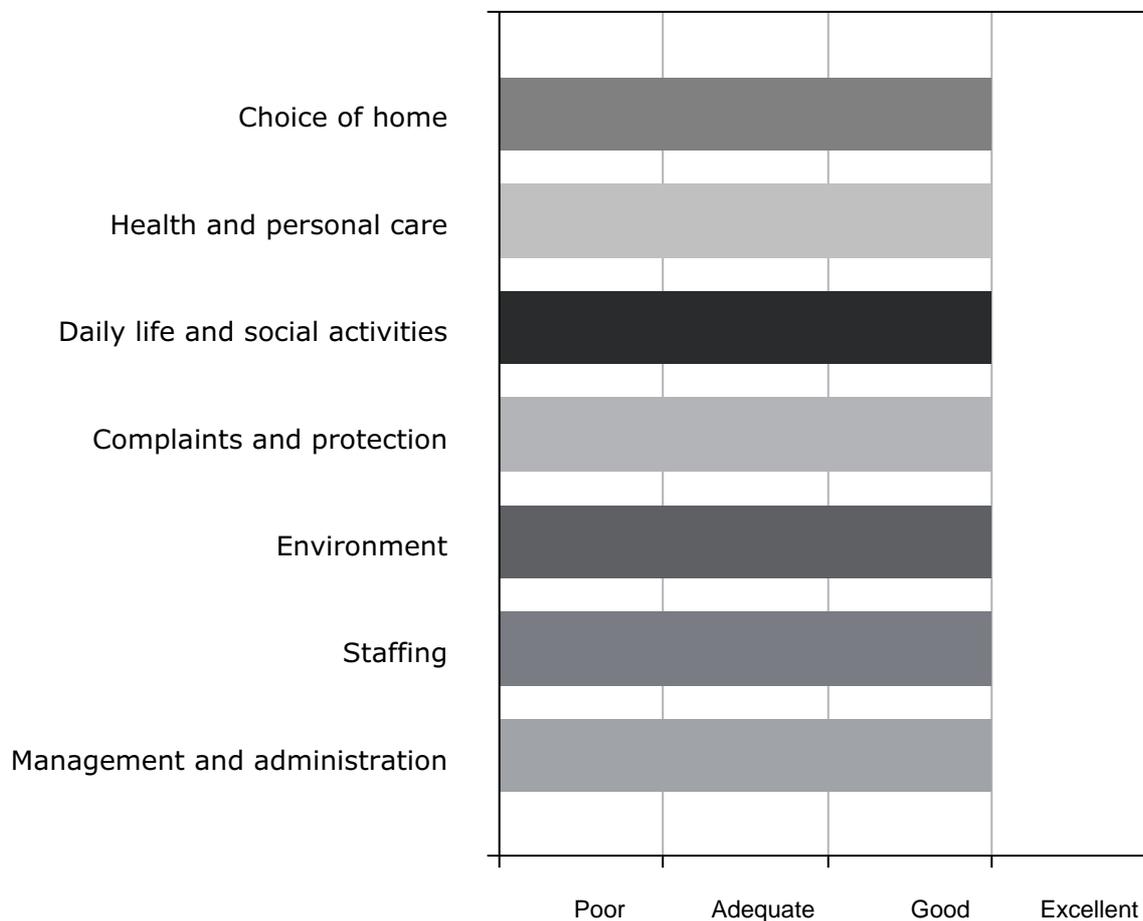
## Summary

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:

The visits took place over two days and were undertaken as part of a key inspection, which includes an analysis of information received since the last key inspection, completed in August 2009. This site visit was unannounced which means the manager and staff were not told that we were visiting.

During our visits we spoke to people living in the home, the manager, visitors and members of the staff team. We looked at various records relating to the care that was being provided and at recruitment practices. We walked around the home to see if it was clean and a safe place to live.

An improvement plan, completed by the manager was submitted in August 2009 and an update from January 2010 was given during this visit. This described the action being taken to make improvements and to address the requirements made following the site visit in August 2009.

Since the last inspection there have been changes to the management arrangements for the home, the home had a new manager in place during this visit who was in his first weeks in this position. It was evident there had been improvements made to improve the quality of the service provided in the home and improvements were seen in a number of areas, a period of management stability and leadership is needed to develop this further.

Service user and staff surveys were distributed before this visit, four were returned from people who live at Kenyon Lodge and two from staff members. Comments from these surveys have been included in this report where possible.

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

People were given information about the service and their needs were assessed before they moved in. This meant people knew their needs could be met. People spoken to and two relatives who expressed a view were pleased with the standard of care at the home. Four people who filled in a survey said the staff usually listened and acted on what they said and they always received the medical support they needed.

Some people said they liked their bedrooms particularly following the improvements made with soft furnishings and bright painting of their bedroom walls.

Systems were in place to support people living at the home or relatives to raise any concerns and the four people who returned surveys were aware of how to make a complaint.

The home has an open and flexible policy for visitors and people spoken to say they are always made to feel welcome. people made positive comments about the staff being friendly and supportive. One person said, "They are very good to us and they do come and have a chat." Relatives said they are encouraged to visit and are made to feel welcome.

people were supported with dignity and people said their need for privacy was respected.

Health and safety checks were regularly maintained so that people's safety and welfare was protected.

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

Since the last visit there have been improvements made to the record keeping. The way that the staff record the nutritional needs of people has improved since the last visit. There has been an increase in the training provided for staff.

People living at Kenyon Lodge live in a clean and comfortable environment. Improvements to the decor in the home have made Kenyon Lodge more homely. Improvements to the patio area to make this area safe for people to sit out have been made.

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

The manager had been in post for a short time at the time of these visits. We require managers to submit an application to register with the Care Quality Commission so they can be assessed as competent to manage a service. The manager told us he planned to apply within the next few months.

There have been improvements in the quality of the record keeping provided. A requirement was made for effective audit checks to be maintained in relation to care plans, medication and recruitment practices.

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 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 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.

People are given information about the home and have their care needs assessed before the offer of a place is made, so they know their needs can be met.

Evidence:

A statement of purpose and a service user guide was available in the reception area and a copy of the Service user's guide was available in each person's bedroom. One person spoken to during the visit and four people who returned surveys said they had received enough information about the home before they moved in to help them make their decision. The manager, who was new in post said the statement of purpose would be updated to show the recent change in management.

Since January 2010 there have been some new admissions to the home. We looked at the pre admission assessments for three people, two of these contained detailed information about each individual's health and personal care needs and risks to their safety had been recorded in the care plan. Copies of assessments from social services

Evidence:

were held on the person's file and the information was used to form the care plan. For one person, they had transferred from another care home and the assessment information did not include a full picture of the person. The manager said he was reviewing the admission process and did plan to take a lead role in this.

It was encouraging to see the staff had painted a person's bedroom in a colour of their choice to make Kenyon Lodge feel homely and personal to them on admission.

Kenyon Lodge did not provide an intermediate care service.

## 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.

Peoples' personal, health care and social needs were met due to improvements in the monitoring systems in place. Improvements need to continue to be addressed.

Evidence:

We were told by senior management that all care plans had been reviewed since our last visit and we were told staff had been trained in a more person centered way of writing these. We made three recommendations for improvements to the record keeping at the last key inspection and the staff had recorded more detailed information since the last visit.

We looked at four care plans in detail and most information were in place and included a lot of information about three of the four people accommodated. We found that regular monitoring of care plans were in place including regular evaluations where changes were needed. One shortfall seen was for one person where the care plan for nutrition stated they were on a pureed diet and normal fluids. Although a copy of the dietician's letter was in place, the care plan had not been updated to show the changes. Staff spoken to were clearly aware this person was at nutritional risk and

## Evidence:

they could explain what support they provided for them and the type of diet they were on.

We asked three staff members if they felt they received enough information about people to enable them to provide appropriate support. Staff confirmed that communication was better in the home and one person added, "I think we are good at meeting a person's needs in the way they want." For one person the care plan stated the staff were to ensure they were offered a bath or shower at least once a week and they required assistance with hygiene and dressing. This does not show the person's particular preferences and whether they can carry out any activities for themselves. The care plans looked at showed information about a person's physical and mental health, mobility, nutritional needs and a range of risk assessments and there were improvements seen. While care plans had improved overall, we found some shortfalls that needed to be addressed. The care plans did not always give the likes and dislikes of the person or the preferred way they would like their care. We discussed the need to make the care plans more person centered to show what actions the staff need to take to support the person.

For one person the care plan showed the person's needs had been identified, associated risks were recorded and the ways the care should be carried out. The daily record did not show clearly that the care was being carried out in line with the planned care. This was brought to the attention of the nurse in charge and the manager who said they would review this. A discussion with the manager showed he had plans to monitor the outcomes of the care and support provided. Care plans showed evidence of involvement of family to discuss care and included where they had spoken to someone in relation to changes in a person's healthcare needs. Care plans included information to show that referrals had been made to other health care professionals for advice and support. Referrals were seen to have been made to speech and language therapists, dieticians, tissue viability nurses.

We looked at some of the food and fluid records, there was evidence to show the daily food eaten although on some occasions staff had missed recording whether anything was offered. We discussed the need to make sure staff are only recording for those people who have been assessed as being nutritionally at risk. For one person the care plan showed the advice from the dietician highlighted they may eat better when on their own. This person was seen to be eating lunch in the communal dining room and the care plan did not reflect this was suggested or tried out in practice.

Staff were observed transferring one person from a lounge chair to a wheelchair using a hoist in a satisfactory manner. During this process the staff did talk to the person to

Evidence:

explain what they were doing.

As part of this visit we looked at how medicines were being handled. we checked a sample of medication administration records (MARS) and the blister pack of medicines.

Checks of a sample of current stocks and records showed these were usually being given to people correctly. There was some shortfalls in the numbers of food supplements and the manger stated he would introduce a better system for checking these were given as prescribed following this visit.

We checked how Controlled Drugs, medicines that can be misused were handled. The register was in line with the stock levels and all entries were properly witnessed. The storage of these was in line with the requirements.

## 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.

Social, cultural and recreational activities meet the expectations of people living at the home.

Evidence:

The home continues to employ an activities organiser who is clearly developing this role. Improvements were seen to the social histories recorded in the care plans and there some records of activities people had joined in. Recent events had included a visit to a local pub for St George's day and photographs were on display to show the event. One person said there had been activities around the home's licensed bar and they had enjoyed a drink with their family.

Four recommendations were made at the last inspection to review the menus at the home, to improve the meal provided for vegetarians, to make sure clothing is marked discreetly and to start a resident's group so people can have a view about moving the home forward. From discussions made and information given these recommendations have been addressed.

People spoken to said they feel the home meets their expectations. One person was seen enjoying doing some craft work on a one to one basis with the activities

## Evidence:

organiser. From people who returned surveys, three people said, the home always arranged activities they could take part in. One person added, "In Mum's condition activities are very difficult." For one person, improvements have been made and they were pleased they have been supported to communicate with their relative overseas.

Lunch was served in the dining rooms on each floor. The menu showed people were offered a choice of nutritious meals and tables were pleasantly laid. Staff were seen supporting people to eat in a dignified way and the mealtime experience was seen to be pleasurable. Some attention should be given to the timing of the serving of the food and the quantity served. Some people were seen to wait a period of time for their meal and one person was worried she had been forgotten because the two people she was sitting with had been served. Another person said, "Do you really expect me to eat all that!"

The home has a policy on open visiting and visitors can visit the home at any time during the day. Special arrangements are made for night time visits. A few members of one person's family were visiting on the day of this visit to celebrate a special occasion. One person commented, "They are always warm and welcoming to my family here."

The new manager valued the role of activities and he said he would be developing this to include more trips and social events.

## 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.

People living at the home and relatives were confident their complaints will be taken seriously and staff were confident in how they would deal with an allegation of abuse.

Evidence:

The complaints procedure was available and information on how to make a complaint was included in the Service user guide. All four people who returned surveys said they knew who they would speak to if they had any concerns and they knew the process to make a complaint. One person said, "This new manager seems approachable and I think he will iron out any issues."

There was a record for any complaints made and the outcome of the complaint was recorded. There was a copy of the policy on the protection of vulnerable adults and this was available for staff. Three staff spoken to showed an understanding of how to safeguard people from abuse and the manager was in the process of identifying the staff who had not recently had safeguarding training so he could plan for this.

Since the last inspection in August 2009 some concerns have been raised under Salford Council's safeguarding team, one referral has highlighted the need for staff to have training in challenging behaviour, another investigation showed a need for an improvement in communication between staff and people must be able to access the nurse call or be monitored appropriately. Two concerns were still being investigated under local authority procedures at the time of this visit. Following earlier

Evidence:

investigations under adult safeguarding, the manager showed a commitment to addressing any shortfalls identified and a commitment to training and developing the staff team.

## 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.

People living at Kenyon lodge live in a clean and comfortable environment. Improvements to the decor in the home have made Kenyon Lodge more homely.

Evidence:

A partial tour of the home showed that areas of the home had been redecorated including people's bedrooms, one of the bathrooms and the corridors to make the environment more homely and pleasant for the people living there. One person said, "Look at my room, I really like it, the colour is great." Another person said they liked their bedding and a number of new duvets and curtains were seen to have been provided as part of the improvement programme. Some people had recently been out enjoying the garden area.

The home employed domestic and laundry staff and the home was seen to be clean and clothes well laundered.

The AQAA told us that all staff had received training in infection control and requirements made in the infection control improvement plan had been met in full.

## 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.

People receive care and support from staff who have the skills to support them, further improvements to recruitment and training will ensure people are safe.

Evidence:

On the first day of this visit there were 20 people accommodated on the first floor in receipt of personal care and 17 people in receipt of nursing care on the ground floor. All staff on duty in the home were members of the permanent staff team and there had been minimal shifts covered by agency staff over recent months.

The staffing levels were sufficient to meet the needs of the people accommodated. From discussions with staff members and from observations made during the visit, the staff were meeting the needs of people living at the home.

The duty rotas were looked at for 2 weeks in May 2010. There was some use of bank staff however we were told the staff knew people well because they worked regularly at the home. The manager stated he did plan to recruit a permanent team so people received continuity of care.

Surveys were returned from four people who use the service, one person added, "They are very caring and have looked after us very well since we came here in 2008, they also arrange entertainers to come in fairly regularly which we enjoy very much.

## Evidence:

The four people who responded in the surveys stated the staff "Always" or "usually" listened and acted on what they said and responses were the same to "Do you receive the care and support you need?"

A requirement made at the last inspection for a full audit of all staff files to be carried out so people are protected by the home's recruitment policy and practices. We looked at a sample of three staff files to assess the way staff are recruited at Kenyon Lodge. There were a number of improvements seen in the way staff were recruited. Although files were organised there was a shortfall in the detail provided in the employment history for one person. We discussed the need to show a person's employment history, other shortfalls identified were a lack of recent photographs for two people and no interview notes. We were told these shortfalls would be addressed following this visit. Discussion with staff members, visitors and people who could express a view, people valued the staff members. Examples of comments made were, "The staff are always polite and listen to me", "The staff are always helpful and kind." Staff were seen chatting to people and it was clear they knew their needs well.

The management showed a commitment to staff training. The home employed 24 permanent care workers and 20 members of staff have successfully completed the National Vocational Qualification level 2 or above award. Two surveys were returned from staff members, both staff added that the home provides "plenty of training for the job I do." One staff member said, "although staff changes make it difficult I think the home is getting better all the time, we are getting more support and training." The manager was in the process of reviewing and updating the training staff have done in the last twelve months and where the gaps are to address this.

## 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.

Work needs to continue to ensure the systems in place to monitor care practices, staff competencies, recruitment practices and record keeping to ensure the health and welfare of people are promoted and protected.

Evidence:

The manager has been in post for only a few weeks at the time of this site visit. He had been in post as the deputy manager since March 2010, he is not yet registered with the Commission but plans to submit his application. The manager has a number of years experience in a managerial position in the care sector and he showed enthusiasm to improve and develop the service to make the outcomes better for people who live at Kenyon Lodge.

The day before this visit the manager held a staff meeting to show staff what he expected of them and vice versa.

An action plan was received in July 2009 and we were given a copy of an updated

## Evidence:

action plan dated January 2010. During this visit there were some shortfalls identified that would be picked up if the manager had been in post long enough to carry out audits of the care plans and medication.

The unit manager on the first floor has remained in post and has maintained some stability on this unit. There was evidence of improvements to the reviews of the care plans although we discussed the need to make these more person centered. We discussed the AQAA, the home's self assessment with the area manager, this form had not been completed with all the appropriate information telling us clearly what the service was doing well and what they could do better. We were told this had been filled in by the former manager and it was the first time she had filled one in.

We looked at the audit of accident and incidents that had occurred over the last four months. It was clear the manager had a system in place to review each accident to make plans to minimise the risk of any future accidents or incidents. We discussed it would be good practice to keep the record of the accident or incident in the person's care file so staff could readily review the risk assessments and care plans.

The Commission continue to be notified under regulation 37 of the Care Homes Regulations of notifiable incidents/accidents that have taken place in the home.

Systems are in place for the safekeeping of people's money. A sample of these were looked at and found to be satisfactory during this visit. Receipts for money spent were available.

The home have a quality monitoring survey to include professionals. The manager stated that he planned to arrange a resident's and relatives meeting to gain the views of any changes they wanted in the running of 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

## 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
1	31	9	<p>The manager must submit an application for registration with the care quality Commission.</p> <p>In order to assess that the manager is a fit and competent person to manage a care home for older people.</p>	30/07/2010

### Recommendations

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

No	Refer to Standard	Good Practice Recommendations
1	7	Care plans should be person centered and individualised to reflect the individual needs of people so the staff know how to support people to meet their needs and maintain their health and well being.
2	15	Some attention should be given to the timing of the serving of the food to minimize the length of time people have to wait for their meal and to the portion sizes so people are not over faced.
3	33	Effective systems should be in place to monitor and check the care practices in the home. This is to make sure any shortfalls are identified and improvements are made

## 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
		particularlry in relation to care plans, medication and recruitment.

## Helpline:

**Telephone:** 03000 616161

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

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

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