# Key inspection report

## Care homes for older people

<table>
<thead>
<tr>
<th>Name:</th>
<th>Homestead House</th>
</tr>
</thead>
</table>
| Address:      | 281 St Faiths Road  
                | Catton  
                | Norwich  
                | Norfolk  
                | NR6 7BQ |

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.

<table>
<thead>
<tr>
<th>Lead Inspector:</th>
<th>Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ruth Hannent</td>
<td>2 0 0 2 2 0 0 9</td>
</tr>
</tbody>
</table>
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.

<table>
<thead>
<tr>
<th>Outcome area (for example Choice of home)</th>
</tr>
</thead>
<tbody>
<tr>
<td>These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:</td>
</tr>
</tbody>
</table>

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

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

This is what people staying in this care home experience:

Judgement:

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

Evidence:

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

Copies of the National Minimum Standards – Care Homes for Older People can be found at www.dh.gov.uk or bought from The Stationery Office (TSO) PO Box 29, St Crispins, Duke Street, Norwich, NR3 1GN. Tel: 0870 600 5522. Online ordering from the Stationery Office is also available: www.tso.co.uk/bookshop

The Commission for Social Care Inspection aims to:

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

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

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

<table>
<thead>
<tr>
<th>Name of care home:</th>
<th>Homestead House</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address:</td>
<td>281 St Faiths Road</td>
</tr>
<tr>
<td></td>
<td>Catton</td>
</tr>
<tr>
<td></td>
<td>Norwich</td>
</tr>
<tr>
<td></td>
<td>Norfolk</td>
</tr>
<tr>
<td></td>
<td>NR6 7BQ</td>
</tr>
<tr>
<td>Telephone number:</td>
<td>01603486098</td>
</tr>
<tr>
<td>Fax number:</td>
<td>01603484464</td>
</tr>
<tr>
<td>Email address:</td>
<td></td>
</tr>
<tr>
<td>Provider web address:</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of registered provider(s):</th>
<th>Homestead House Ltd</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of registered manager (if applicable)</td>
<td>Mrs Patricia Kpodo</td>
</tr>
<tr>
<td>Type of registration:</td>
<td>care home</td>
</tr>
<tr>
<td>Number of places registered:</td>
<td>19</td>
</tr>
</tbody>
</table>

### Conditions of registration:

<table>
<thead>
<tr>
<th>Category(ies):</th>
<th>Number of places (if applicable):</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Under 65</td>
</tr>
<tr>
<td>dementia</td>
<td>19</td>
</tr>
<tr>
<td>old age, not falling within any other category</td>
<td>0</td>
</tr>
</tbody>
</table>

Additional conditions:

The maximum number of service users who can be accommodated is: 19

The registered person may provide the following category of service only: Care Home Only - Code PC to service users of the following gender: Either whose primary care needs on admission to the home are within the following categories: Old age, not falling within any other category - Code OP Dementia - Code DE

<table>
<thead>
<tr>
<th>Date of last inspection</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

Brief description of the care home
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:

[Diagrams showing ratings for each category]

How we did our inspection:

The quality rating for this service is two stars. This means the people who use this service experience good quality outcomes.

This was an unannounced inspection undertaken on the 20th February 2009 and started at 10.30am. The focus of this inspection was on the previous requirements, on the core national minimum standards and on the quality of life for people who receive support in the home.

The methods used to complete this inspection consisted of looking at the care a resident receives and the records that support this. Information was provided to us by the home on an assessment form known as an Annual Quality Assurance Assessment.
(AQAA). During the visit to the home we spoke to the staff team, two visitors and four residents. These methods, observations and previous findings all inform the outcomes of this report.
What the care home does well:
The home is welcoming and has a relaxed atmosphere with staff supporting people in an appropriate manner with due consideration for choice and dignity.

Care plans have full information that is regularly reviewed to inform staff of how a person should be supported and how they wish this to be undertaken.

One person visiting the home said their relative was 'happy and well cared for'. Staff were friendly and gently encouraging people where necessary.

What has improved since the last inspection?
A previous requirement to replace carpet in the dining room has been completed and many areas of the home now have new flooring and carpets. The home also now has two new en suite rooms and a wet room, enabling those wishing to have a shower to do so.

Visitors and residents stated that the staff are 'always helpful' and 'there to assist when needed'.

The environment has been altered by the addition of an extension to the home that was completed in August 2008.

What they could do better:
During meal times residents would benefit from having a choice of drinks available, especially when food does not have gravy or sauce. Although drinks are offered a little after meal times, soft drinks or water should be available with meals.

Some rooms have toiletries that may present a risk in some circumstances. Care plans do have risk assessments but not any that assess the use of toiletries and where these are stored. Personal care plans must have risk assessments completed to identify if any resident is at risk and how this can be minimised.

The kitchen area is used as a main working area for preparing meals, storing medication and records and the telephone is also situated in the kitchen area. This means that the kitchen is not kept clear during meal times and on the day of our inspection the cook was handling hot fat and meals while staff had to try and get records and answer the phone around her. These duties would be better placed elsewhere in the home, leaving the catering staff to cook and serve meals in the kitchen. There is currently no area used as a staff room.

If you want to know what action the person responsible for this care home is taking following this report, you can contact them using the details set out on page 4.

The report of this inspection is available from our website www.cqc.org.uk. You can get printed copies from enquiries@cqc.org.uk or by telephoning our order line – 0870 240 7535.
Details of our findings

Contents

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

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

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

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

This is what people staying in this care home experience:

Judgement:

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

People are provided with the appropriate information and support before making any decision to move into the home.

Evidence:

Visits and assessments are undertaken by the home to ensure all needs can be met before an offer to move into the home is made. Records and discussions at this time showed this is the routine and one person newly admitted was being supported by staff and family members were kept informed by phone of how the person was settling in.
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.

Care plans do reflect the needs of the individual and any support required, providing staff with the relevant information to meet needs. However, some areas would benefit from further detail.

Evidence:

The care plan format has detailed sections of information that shows both doctors and district nurses provide support and other health care services are accessed when necessary. Files were orderly, information is easily found and records had sections for how the person was feeling.

While health care needs are being met, staff do not currently have a section on care plans to monitor nutrition. Food choices are made daily, however, the amount eaten and what has been chosen is not recorded and this vital information that would inform the development of any menu plan or nutritional intake is then lost.

Person centred care plans have been developed and these contained risk assessments.
Evidence:

However, with toiletries being left available in individual rooms, a risk assessment to cover such items must be completed and kept on care plans to fully support the well being of those residents who may have some memory loss and identify any risks that may occur.

The medication trolley was found fixed to the wall and locked at this inspection. Records of the administration of medication were clearly completed, up to date and medication was in date and stored in an orderly way. We saw that the temperature of the area around the medication trolley is taken and recorded regularly. However, medication is stored in the kitchen area where temperatures may vary dramatically according to mealtimes.

Care plans show that people regularly have their medication reviewed and adjusted as necessary.
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.

People are supported to take part in leisure activities and to maintain contact with family and friends and are offered a variety of healthy meals that they have chosen.

Evidence:

The meal at this inspection was fish, chips and peas. People ate their lunch and discussed what the meal was to be and the food looked and smelt appetising. However, there was no drink available on tables at this time and no person was offered a drink with their meal.

The cook was aware of what meals people enjoy and two residents confirmed this. However, the diabetic option for dessert was jelly and when asked what alternative there was for those not wishing to have jelly, there was no alternative as staff said they enjoy jelly.

The home has told us that they have annual meetings with relatives and residents to gain the views of people and to inform developments in the home. Daily contact is also possible when visitors are in the home and people can discuss matters as they arise.
Evidence:

There are regular activities offered in the home that include an organist and singer, bingo, trips to the shops and walks outside when the weather permits. Staff explained that relatives regularly take residents out when they visit. When asked about those people who do not have any visitors, staff said they do not monitor trips out to make sure everyone has an opportunity to go out of the home. Further discussions identified those residents who do not go out for trips.
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:

<table>
<thead>
<tr>
<th>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.</th>
</tr>
</thead>
<tbody>
<tr>
<td>People’s legal rights are protected, including being able to vote in elections.</td>
</tr>
</tbody>
</table>

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 and visitors know who to complain to and feel they will be taken seriously.

Evidence:

No formal complaints have been received by the home since the last inspection. Visitors and two residents stated that they would approach staff with any concerns and they felt they would be listened to and that action would be taken. Information is provided to support anyone wishing to make a complaint and the details for alternative organisations is provided for those wishing to discuss any matters outside the home.

Discussions with staff also showed they are aware of areas of abuse and that if any other members of staff behaved inappropriately, they would speak out. Staff have attended training regarding recognising abuse and dealing with challenging behaviours.
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.

The home does provide a safe, clean environment for people living there.

Evidence:

- The environment continues to be improved and made comfortable through an ongoing refurbishment and redecoration programme. New flooring and carpet has been installed in appropriate areas of the home since the last inspection. The home has also been extended by adding two additional rooms, both with en suite facilities, as well as a new wet room. The wet room now offers the choice of bathing facilities and supports those residents unable to use a bath.

- There is a main lounge area that is comfortable and a smaller lounge area that provides a quiet area for visitors or private discussions.

- Doors now have signs to assist residents and each room has a picture, name and number displayed on the door. Radiators are covered where they do not have low surface temperatures. The garden is to the rear of the building and is secure for the safety of residents. All areas of the home were clean and tidy with rooms containing personal possessions and reflecting individual tastes.

- The kitchen is currently the main areas for staff activity. For example, the medication,
Evidence:

staff records and telephone are all situated in the kitchen area. During this inspection, the cook was frying fish and chips while staff were moving around her to access files and answer the telephone. There is currently no other area available to staff to use as a staff room. Telephone conversations are dealt with in the kitchen and at one point the cook had to leave the cooking and answer the phone as staff were busy assisting residents into the dining room.
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 living in the home have their needs met by a consistent staff team who are well trained and regularly supervised, providing stability and continuity of care.

Evidence:

- At the time of this inspection the staff team consisted of two care staff, one senior carer, one cook and one domestic person. The home has two waking care staff on duty during the night. Staff were seen to be providing support in a calm manner and not rushing anyone and there was relaxed conversations and laughter between residents and staff.

- We looked at two staff files that showed appropriate recruitment procedures that support the safety of residents. These include checks made to the criminal records bureau (CRB), two proofs of identification and references.

- There is a programme of training in place that includes dealing with aggressive behaviours, moving and handling, first aid, dementia awareness, protection of vulnerable adults and the safe administration of medication.

- Staff who spoke to us said they receive adequate training that they feel relevant to meeting the needs of people in the home. Staff said they have an ongoing training
Evidence:

programme and training is refreshed when needed. Staff also confirmed they have monthly team meetings and regular supervision.

A small room provides staff with a secure area for their belongings and some seating.
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 live in a home that is managed by a suitable person and is run in their best interests.

Evidence:

Mr & Mrs Kpodo have owned and managed the home since April 2005 and have many years of experience of working in medical and residential care settings. Both have qualifications that include management certificates and previous experience of running a care home.

There is regular quality monitoring undertaken by the home to gather the views of those living in the home, of visitors and staff. Residents have confirmed they attend meetings and both visitors and residents feel they are informed of developments in the home.

Previous inspection has confirmed that regular servicing is undertaken and certificates
Evidence:

issued to support the health and safety of residents and staff.

Although Mr & Mrs Kpodo were not available for this inspection, staff confirmed they are available by telephone when needed.
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.

<table>
<thead>
<tr>
<th>No.</th>
<th>Standard</th>
<th>Regulation</th>
<th>Requirement</th>
<th>Timescale for action</th>
</tr>
</thead>
</table>
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.

<table>
<thead>
<tr>
<th>No.</th>
<th>Standard</th>
<th>Regulation</th>
<th>Requirement</th>
<th>Timescale for action</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**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.

<table>
<thead>
<tr>
<th>No.</th>
<th>Standard</th>
<th>Regulation</th>
<th>Requirement</th>
<th>Timescale for action</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>8</td>
<td>13</td>
<td>Unnecessary risks to the health or safety of service users are identified and so far as possible eliminated. That any available toiletries are risk assessed to support the safety and well being of residents.</td>
<td>29/05/2009</td>
</tr>
<tr>
<td>2</td>
<td>12</td>
<td>16</td>
<td>People are given opportunities for stimulation through leisure and recreational activities in and outside the home which suit their needs, particular consideration is given to people with dementia and other cognitive impairments. That all residents are offered the opportunity to engage in activities outside the home.</td>
<td>30/09/2009</td>
</tr>
</tbody>
</table>

**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.
<table>
<thead>
<tr>
<th>No.</th>
<th>Refer to Standard</th>
<th>Good Practice Recommendations</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>8</td>
<td>It is recommended that care plans are further developed to include monitoring of nutrition to fully evaluate health and well-being.</td>
</tr>
<tr>
<td>2</td>
<td>9</td>
<td>It is recommended that an alternative area be identified for the storage and dispensing of medication and the storage of care plans to fully support safe practices.</td>
</tr>
<tr>
<td>3</td>
<td>15</td>
<td>That the home makes sure everyone has an alternative for all courses offered at meal times, particularly for those people with special dietary needs, plus a choice of drinks with each meal.</td>
</tr>
</tbody>
</table>
We want people to be able to access this information. If you would like a summary in a different format or language please contact our helpline or go to our website.

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