

Key inspection report

Care homes for older people

Name:	The Old Hall
Address:	1 High Street Billingborough Sleaford Lincs NG34 0QA

The quality rating for this care home is:	one star adequate 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.

Lead inspector:	Date:
Tobias Payne	2 1 0 1 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 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 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:	The Old Hall
Address:	1 High Street Billingborough Sleaford Lincs NG34 0QA
Telephone number:	01529240335
Fax number:	01529421170
Email address:	info@the-oldhall.co.uk
Provider web address:	

Name of registered provider(s):	The Old Hall
Name of registered manager (if applicable)	
Type of registration:	care home
Number of places registered:	20

Conditions of registration:		
Category(ies) :	Number of places (if applicable):	
	Under 65	Over 65
old age, not falling within any other category	0	20
physical disability	0	0
Additional conditions:		
The maximum number of service users who can be accommodated is 20		
The registered person may provide the following categories of service, 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		
Date of last inspection		
Brief description of the care home		
The Old Hall is a privately run care home, providing personal care for up to 20 people of both sexes aged over 65 years. The Old Hall is a former 17th century Manor House. It is situated in the village of Billingborough, with access to the towns of Boston, Stamford, Grantham, Sleaford and Spalding. The village provides facilities which		

Brief description of the care home

include, shops, pub, post office, village hall, doctor's surgery, bowling green, cricket ground and tennis courts all within a short walking distance. The parish church is next door to the home. A garden gate behind the home leads onto the village green and pond, fed by natural springs.

In November 2009 it was registered to new owners and has been managed by same manager since 1999.

Accommodation is mainly in single bedrooms one which has an en suite bathroom. Two of the bedrooms have an en suite toilet. There are 2 lounges, a large dining room which gives access to a patio area and into the landscaped gardens, 6 toilets, 3 bathrooms and a shower room. A stair lift serves accommodation on the first floor. There are 9 bedrooms on the ground and 10 on the first floor. One of the bedrooms is self contained with its own lounge and kitchenette. There is car parking to the front of the home. The aim of the home is to provide a high standard of individualised personal care in a respectful and caring manner and to enable the resident to remain in residence.

Information about the home can be found in the home's statement of purpose and service user's guide. These documents and a copy of the last inspection report are available from the management of the home.

The fees on the day of our inspection visit ranged from £450 to £600 for those people who self fund their care and £360 to £408 for those people who have a contract with Lincolnshire County Council. Additional charges are made for hairdressing which ranged from £7 to £13, chiropody £12 and personal newspapers and magazines.

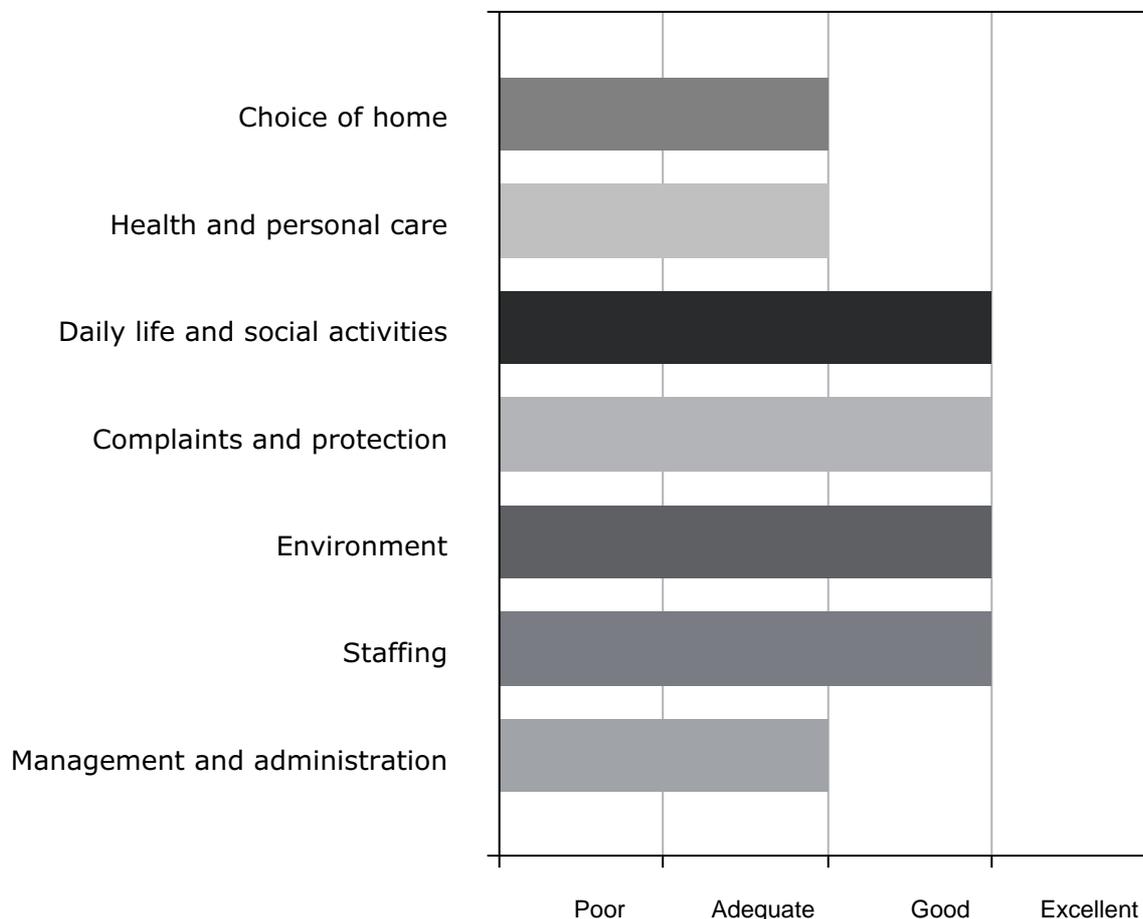
Summary

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

The quality rating for this care home is:

one star adequate service

Our judgement for each outcome:



How we did our inspection:

The quality rating for this service is 1 star. This means the people who use this service experience adequate quality outcomes.

At this inspection we reviewed all the information we had about the home and made an unannounced inspection visit to the home which lasted for 6 hours. The manager was present throughout the inspection visit as was the new acting manager and responsible individual who were given feedback at the end of the inspection. The main method of inspection used was called 'case tracking' which involved selecting 2 people and tracking the care they receive through the checking of their records, discussion with them, the staff and observation of how the staff and people living in the home related to one another and the care practises in the home. We looked at a sample of care records and policies and procedures as well as staff records and walked around the home to see the quality of accommodation and visited some of the bedrooms with the permission of the people living in the home. We spoke with 7 people living in the

home, 4 visitors and 3 members of staff.

Where the use of "we" or "us" has been used throughout this report it refers to the Care Quality Commission.

What the care home does well:

The people live in comfortable, well maintained and clean accommodation. People are able to make their rooms more homely with their own personal belongings if they wish. Each person is encouraged and supported to be independent. Staff communicate well with them and respect their choices and decisions. People living in the home are cared for and supported by a caring, educated and committed team of staff.

Visitors are made welcome and kept well informed.

The people living in the home told us they liked living in the home and were very comfortable.

What has improved since the last inspection?

Although this was the first key inspection visit since it was registered by us on the 3/11/2009. The new owners have introduced a comprehensive and extensive refurbishment and redecoration programme which has included 8 bedrooms being repainted, part of the home being re roofed, the main entrance made easier to enter by raising the floor. In addition new carpets have been laid on the ground floor and up the stairs to the first floor, the dining room has been moved and redecorated and now overlooks and gives access the gardens. A new wet room has been provided. A new boiler, oil tank, commercial washing machine and tumble dryer has been installed and thermostatic controls to control heating have been provided. Externally the gardens have been improved a gardener employed, greenhouse provided as well as vegetable garden established to provide fresh vegetables for meals.

What they could do better:

Whilst acknowledging the improvements which are and have taken place since the new owners brought the home they need to improve care by ensuring that each person has an individual and up to date care plan which wherever possible they have been involved in. In addition, the people need to be consulted about how they wish to spend their time and about the the type of activity programme they want provided. Staff need to be supervised and training provided to give them the skills to care. The overall management needs to be improved and quality assurance introduced to ensure that quality care is provided.

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. 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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Choice of home

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

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

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

This is what people staying in this care home experience:

Judgement:

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

Good and clear information is provided to people to enable them make an informed choice of where to live. They are assessed before they come to the home but poor information is obtained which puts people at risk.

Evidence:

There was an up to date statement of purpose and service user's guide available. We were told that where a referral was made the manager visited each person and made an assessment of their needs involving the person and any other person involved in their care and support. We examined the records for a person admitted in September 2009. There was very little information about the person's needs, no evidence of involvement by the person and no written confirmation that based on this assessment the home was able to meet all their assessed needs.

The service does not offer intermediate care.

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

Care plans are not sufficiently detailed which puts people at risk. Medication was safely given by staff who knew what they were doing.

Evidence:

A new care planning system had been purchased since the new owners took over but we found that not all information had been completed and care records were inadequate and did not give sufficient detail for staff to follow. The system allowed if completed correctly a comprehensive record of peoples' needs. We looked at the care records for 5 people. Only one person had most of the information completed but this person had not had a nutritional assessment carried out. The other 4 records looked at either had incomplete care plans or basic care plans, no moving and handling risk assessment and other assessments carried out or recorded. One of the records we looked at had a Mental Capacity Assessment which needs to be included in the care plans so that people's rights and choices are protected. The manager and owner acknowledged these failings and agreed to address all these issues and ensure that all people had up to date and complete care records. In addition they agreed to ensure that all staff had received training in order to understand how to complete the records.

Evidence:

People we spoke with were all very positive about the way staff attended to their needs. Comments included, "the staff are very kind and look after me well" and "If I need help it is given to me promptly and in a friendly manner. Throughout our visit we saw staff being polite and courteous and helped people in a calm, kind, sensitive and unhurried manner. We heard and saw staff greeting visitors and laughing and talking with the people living in the home.

Where required, people living in the home were referred to local doctors, Community Nurse, Community Psychiatric Nurse, Tissue Viability Nurse, Continence Nurse, Speech and Language Therapists, Physiotherapist, Opticians, Dentist, Chiropodist and other specialists.

The management told us that senior care staff gave out medication. There was a policy and procedure for this and each person was assessed before they were considered safe to administer medication. We were told that the people were encouraged by the staff team to self medicate and on the day of our inspection visit all the people needed a degree of assistance in order to ensure they took their medication safely. The home received regular pharmacy inspections the last being on the 15/9/2009 which had some concerns about gaps in recording on the medication record sheets and some of the records were not written clearly. As a result of this report the manager took immediate action to address this. We looked at medication records and could see that they were written clearly but there were odd gaps in some of the records.

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 activities are varied and provide stimulation and interest for people living in the home. People enjoy varied and nutritious meals.

Evidence:

The statement of purpose mentioned that many of the activities within the home had been requested by the people living in the home and they were open to suggestions to meet individual tastes. We were told there was no written activities programme though the library visits every 8 weeks and changes the selection of books and tapes. A luncheon club is held monthly, allowing family and friends to join the people for a roast dinner. Coffee mornings are held periodically, as detailed in the newsletter provided every 2 months. Local clergy visit the every month and provide Holy Communion and a short service. The people are supported in attending any religious services they wish and other religious groups can be contacted upon request of individuals. There is also a local "Sunshine" Club, who meet at the village hall every fortnight and the people are able to attend this if they wish. Bingo, Indoor Bowls, other activities and refreshments are available at the club. In addition "Extend" exercise classes are booked and carried out by a qualified instructor in the main lounge. The home has established close contacts with the village and local schools and the church choir visits throughout the year and provide entertainment, discussion,

Evidence:

music and singing. Outside entertainers are arranged and staff encourage the people to pursue their individual hobbies and participate in new ones as they wish.

The people living in the home were offered 3 main meals a day plus snacks. South Kesteven District Council awarded the home 3 stars (good) on following an inspection, in recognition of the catering service provided. Meals were served in the dining room which had been newly decorated or in their bedrooms on a tray. We looked at the records of food provided and could see they received varied and nutritious meals. We saw staff assisting those people who needed assistance in a dignified, unhurried, calm and sensitive manner sitting by the side of them. All the people we spoke with were complimentary about the food. Comments included, "the food suits my needs", "if I do not like what they provide they will find an alternative to suit my needs" and "I enjoy the food and look forward to meal times". is always served well and I look forward to my meals".

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 are protected from abuse by robust and safe recruitment procedures. Visitors are made to feel welcome and involved.

Evidence:

Each person received a copy of the complaint's procedure in the service user's guide and this was also in the statement of purpose. During our visit none of the people living in the home, visitors or the staff had any complaints about the home and felt they could discuss any concerns with staff or the manager. Staff also knew what to do if they received a complaint from a person living in the home.

The service had an up to date copy of Lincolnshire County Council's Adult Protection Policy and all staff received regular training. We spoke with 3 staff who confirmed that had received this training, knew what abuse was and they showed knowledge about their role and what they would do if abuse was suspected. We have received over the last year no complaints or safeguarding adults issues.

We spoke with 4 visitors during our visit. Comments were very positive and included, "It is a very nice home", "I like to visit my mother before I go to work and always find a friendly welcome and am very satisfied with the home", "I can visit whenever I wish and always find staff kind and helpful", "mother loves the food and we always find the home clean" and "If I have any worries I can discuss them with the staff".

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 live in clean, comfortable, safe and well maintained accommodation which meets their needs.

Evidence:

Since the new owners brought the home they have carried out an extensive redecoration and refurbishment programme which has included a partial new roof, new carpets, bedroom redecorated, the dining room moved to a overlook the garden and new equipment. We were told that further improvements are planned to include refurbishing all the bathrooms and further decoration of the home.

We walked around the home and with permission of some of the people looked at some of the bedrooms. The people told us they were encouraged to make their bedrooms personal with their own furniture, television, pictures and ornaments. Many of the rooms are large, spacious, light and airy. People we spoke with told us "I have a lovely room with views over the gardens", "they clean my room regularly and it is how I like it" and "the home is always clean".

The large, walled gardens were well kept and provide a pleasant outdoor area for the people to sit in and enjoy. At the back of the home is a garden gate, through which they can directly access the village green and pond, fed by natural springs. A new greenhouse had been provided and vegetable garden established.

Evidence:

We saw specialist equipment in use, including pressure relieving mattresses. Staff told us they had received training in order to ensure that people were handled safely.

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.

There is a safely recruited, supported staff team available who have the skills to meet the varying needs of the people living in the home.

Evidence:

People we spoke with did not express any worries about the level or availability of staff. During our inspection visit we saw staff attended to the needs of the people promptly and in a calm and friendly manner. Throughout our visit people we spoke with felt the home was adequately staffed with staff who were experienced and competent to care for the people living in the home. All the comments were very positive.

The people we spoke with told us "they look after us well", "they have time to have a chat with us" and "they know what they are doing and are very kind"..

We examined the files for 2 new members of staff. Records were clear and included a check by Criminal Records Bureau (CRB). We could not see whether staff had received a written induction programme when they started. We were told that staff are encouraged and supported to obtain training in care to National Vocational Qualification standards. The manager told us that 70% of staff had either achieved or were studying for an NVQ level 2. There was also one person with NVQ level 3. Training over the last year had included safeguarding adults, moving and handling,

Evidence:

equality and diversity and health and safety.

We spoke with 3 members of staff who told us, "I like working here" and "we work as a team and support one another". Staff confirmed that they felt the training enabled them to care safely and appropriately for the people. They did however tell us they were not receiving one to one supervision sessions and the management confirmed this was not taking place.

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

The service is not being managed consistently well enough and this does not ensure that the peoples' needs are met and staff supported.

Evidence:

The manager had been in post since 1999. She was a registered nurse with considerable nursing and managerial experience. She also had a management qualification. However she told us during our inspection visit that the management arrangements were disorganised on account of the strain she had been under and she was in the process of leaving. The new acting manager and owner who were present during our visit confirmed this and told us of their intention to improve the management of the home. This would include moving the office to the ground floor so that she could be closer to the people and support staff.

However despite these shortcomings people we spoke with were quite satisfied with the changes which have taken place. Comments included "I can discuss any problems with the manager", "the new owners are always in the building". Staff told us "I am very

Evidence:

pleased to see the improvements which have taken place since the new owners took over", "the new owners are always around" and "things are getting very much better and we have been kept fully informed of the changes taking place".

We could see no evidence of any quality assurance systems taking place. The management were not sure whether the annual survey to obtain the people's views of the home had been sent out during 2009. We saw no evidence of any internal audits and the monthly monitoring reports of visits by the owners showed that visits had taken place in March and October 2009. There was a 2 monthly newsletter given to each person to give information about the home and we saw there was a management meeting in June 2009. Staff told us they were not receiving regular supervision.

There were a range of policies and procedures some of which had been regularly reviewed. However much of this information was difficult to find and kept in an office on the first floor away from the staff. We again were told this would also be addressed and made available for staff to follow by the office being moved to the ground floor.

There were health and safety policies, which had been updated in November 2009 and an up to date fire risk assessment. There were regular tests of the fire system as well as regular fire drills and monthly monitoring of hot water temperatures. There were also infection control policies and alcohol hand wash at the entrance to further prevent any infection. Records we looked at showed that equipment was regularly checked and serviced and there were systems to monitor any maintenance issues.

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	4	14	<p>Each person must be assessed and wherever possible involved in their assessment before coming to the home. Written confirmation that the home can meet all their assessed needs must be sent to the person.</p> <p>This will ensure that all the needs of each person can be met by the home.</p>	02/03/2010
2	7	15	<p>Each person must have a complete and detailed care record which gives clear indication about all their care and welfare needs. Wherever possible each person must be involved in identifying their needs. Staff also must have received training to ensure they know how to complete them.</p> <p>This will ensure that all the peoples needs can be met</p>	02/03/2010

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
3	30	18	<p>All new staff must receive a structured induction training programme and that they are supervised during this induction programme.</p> <p>This will ensure that staff are equipped with skills to care and support the people living in the home.</p>	02/04/2010
4	33	26	<p>A report of monthly unannounced visits made to the home by the responsible individual must be provided. These visits must take place at least once a month and be unannounced. People living in the home with their consent should be interviewed with their consent, their representatives and staff as appears necessary to form an opinion of the home. An inspection of the premises, its record of events and records of complaints should be done and a written report must be made available to any one visiting the home from CQC.</p> <p>This will provide an ongoing evaluation of how the home is operating and any areas that need addressing.</p>	02/03/2010

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
5	33	24	<p>A system for measuring, maintaining and evaluating the quality of the services provided by your care home must be established. The system must be based on seeking the views of the people living in the home in order to measure the success in meeting the aims and objectives and statement of purpose for the home. The report should also contain details of the measures considered necessary in order to improve the quality and delivery of services in the care home.</p> <p>This will ensure that a quality service for the people living in the home is provided.</p>	02/04/2010
6	36	18	<p>Staff must be adequately supervised. This supervision must take place at least 6 times a year and cover all aspects of practice, the philosophy of care in the home and their career needs. Records should be kept of what issues are covered.</p> <p>This will ensure that staff feel supported in their work.</p>	02/03/2010

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

Helpline:

Telephone: 03000 616161

Email: enquiries@cqc.org.uk

Web: www.cqc.org.uk

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