

# Key inspection report

## Care homes for older people

<b>Name:</b>	Ravenhurst
<b>Address:</b>	21 Lickhill Road North Stourport-on-Severn Worcestershire DY13 8RU

<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>
Sandra Bromige	0 4 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)

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- 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

Document Purpose	Inspection report
Author	Care Quality Commission
Audience	General public
Further copies from	0870 240 7535 (telephone order line)
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## Information about the care home

Name of care home:	Ravenhurst
Address:	21 Lickhill Road North Stourport-on-Severn Worcestershire DY13 8RU
Telephone number:	01299825610
Fax number:	01299879341
Email address:	ravenhurst@orbit.org.uk
Provider web address:	www.heart-of-england.co.uk

Name of registered provider(s):	Heart of England Housing and Care Limited
Name of registered manager (if applicable)	
Mrs Anastasia Meredith	
Type of registration:	care home
Number of places registered:	50

Conditions of registration:								
Category(ies) :	Number of places (if applicable):							
	Under 65	Over 65						
dementia	50	0						
old age, not falling within any other category	0	50						
physical disability	50	0						
Additional conditions:								
The maximum number of service users to be accommodated is: 50								
The registered person may provide the following categories of service only Care Home only Code PC to service users of either gender whose primary care needs on admission to the home are within the following categories Old age, not falling within any other category Code OP maximum number of places 50 Dementia Code DE maximum number of places 50 Physical Disability Code PD maximum number of places 50								
Date of last inspection	1	7	1	1	2	0	0	9

Brief description of the care home
Ravenhurst is a Victorian house, which has been adapted and extended for its present purpose. It is situated on a level site on the outskirts of Stourport-on-Severn. (A

### Brief description of the care home

former coach house in the grounds is used for a day care service).

The home has 46 single bedrooms and two double bedrooms. Communal lounge areas, dining areas, a visitors room and communal toilets and bathrooms are also provided. There is good parking in front of the building and sheltered garden areas.

The home provides residential care for older people, some of whom may have a physical disability and/or dementia. Appropriate mobility aids such as handrails, hoists and bathing aids are provided.

Heart of England Housing and Care Limited owns the home and they are referred to in this report as the registered provider. Ms Michelle Shawcross is the responsible individual and Mrs A Meredith is the registered manager. She is supported by a hotel services manager and a deputy manager who deputise in her absence.

Up-to-date information relating to the fees charged for the service is available on request from the home.

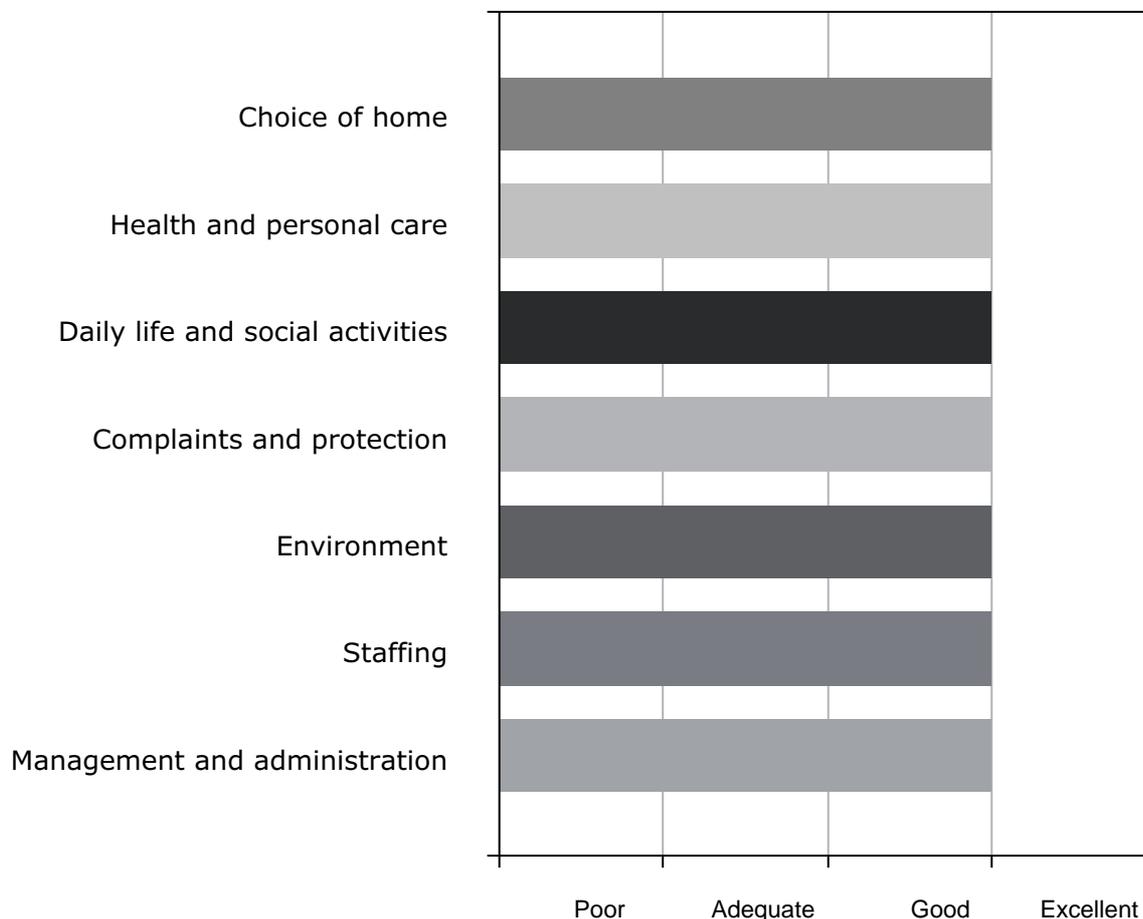
## Summary

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:



### How we did our inspection:

We, the commission completed the last key inspection of this service on 17th November 2009.

In February 2010, we carried out a random inspection of the service to see if the service had complied with the 19 requirements made at the key inspection. The outcome of the inspection showed the service had complied with all of the requirements made at the key inspection thus ensuring good outcomes of care for the people who use the service. (A copy of this inspection report is available in the home or a copy can be provided by the home manager).

This was an unannounced key inspection. One inspector spent time at the home, talking to people who use the service and the staff, and looking at the records, which must be kept by the home to show that it is being run properly. The focus of our inspections is upon outcomes for people who live in the home and their views of the

service provided. We looked in detail at the care provided by the home for two people. This included observing the care they receive, discussing their care with staff, looking at care files and focusing on outcomes. Tracking people's care helps us understand the experiences of people who use the service.

We have received one complaint about this service in the last six months. This was referred to the manager to investigate.

Due to the poor outcomes of care found at the key inspection in November 2009, the service was referred into safeguarding. The lead agency for safeguarding people is Worcestershire County Council. They and other agencies have been monitoring the progress of the service since the last key inspection and also providing support and training for the manager and staff to improve the outcomes of care for the people who use the service. During this period of time, the service have agreed not to admit any people for long term care.

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

Assessments are carried out by the home manager before people move in, so that people can be confident that the home are able to meet their needs.

Each person has a care plan which is based on their individual care needs. Overall, the care plans are well written and contain sufficient information to ensure that staff know what to do for each person and each person receives a consistent standard of care. The home are able to meet people's health and personal care needs.

There is a range of social opportunities for people living at the home, including opportunities to go out into the community to various places of interest. A variety of choice of meals are available, providing a well balanced and nutritious diet.

People can be confident that any concerns will be listened to and acted upon.

The home provides a beautiful, safe, comfortable and well maintained environment for people to live in. Infection control is very well managed.

Staff are caring and provide people with care that meets their individual needs with dignity and respect. Staff receive training to give them the skills and knowledge they need to work in the home.

The home is managed well, and people can be confident that it is run in their best interests.

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

Since the last key inspection, the manager and staff have worked hard to ensure they have rectified the areas where the home were failing to meet the required standard of care for the people who use the service.

In February 2010 they had achieved compliance with all of the shortfalls found at the key inspection. Since then they have continued to work hard and build upon the standard achieved to ensure they continue to improve and maintain a good standard of service for the people living in the home.

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

No requirements have been made at this inspection.

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 assessed prior to admission to the home to ensure the home are able to meet the person's health and social care needs.

The home does not provide intermediate care.

Evidence:

We looked at the care records for a person who had recently moved into the home. We saw that the home had visited the person at their current placement to assess their care needs.

We saw a needs summary and care plan provided by Worcestershire County Council (WCC) for this person, but this information was dated May 2009 and did not reflect the person's current care needs. The manager told us she had raised her concerns about the admission process of this person with WCC to ensure the difficulties they encountered did not arise in the future.

Evidence:

The report for the random inspection carried out in February 2010 stated, 'we looked at the pre-admission assessment of a person who came in for respite care. We saw a thorough assessment had been undertaken, and this information had been used by staff to prepare a written care plan'.

This inspection saw that the home had maintained good standards for the pre-admission of prospective people who may use the 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.

Overall the care records have continued to improve and provide a good standard of information for staff to ensure they have sufficient knowledge to meet the healthcare needs of the people who use the service. Overall the home have sustained good standards for the management of medication to ensure peoples health and well being are safeguarded.

Evidence:

We carried out a random inspection of the service in February 2010 and found good outcomes of care and the home had met the 11 requirements made at the key inspection in November 2009, which related to the health and welfare of the people who use the service.

During this inspection visit, we case tracked the care of two people who use the service and we found good outcomes of care for these two people. The home had identified people's needs and had been proactive in ensuring they received the care they need by the home, and in obtaining care and support from health and social care professionals in the community. For example, one person's physical and mental health

## Evidence:

had deteriorated since admission to the home. The home have been proactive in getting this person reassessed as they have identified they are unable to continue to meet their care needs. Meanwhile, to ensure the safety of this person, they have provided one to one care in agreement with the placing authority. The home have requested skin assessments to be carried out by the District Nurse where people are 'at risk' of developing sore skin, so that specialist equipment such as a pressure mattress and cushion are provided to reduce the risk of their skin becoming sore. They have contacted the medical practitioner where a review of care has been required for an identified new problem. One person was not eating very well and the nutritional risk assessment showed the person was now more at risk of malnutrition. So the home were now recording this person's food and fluid intake.

We spoke to staff about these people. They had a good knowledge of the care needs of the people whose care we tracked. Staff told us, 'we read the care plans and risk assessments. Care plans have been redone and updated'.

We spoke to the people who use the service and we saw they had been helped to look their best by the staff. One person told us the 'staff look after them well'.

The home have continued to improve the standard of the information in the care records, and they are more person centred. We noted some shortfalls in the two care records we looked at, but overall there was enough information to enable staff to meet people's care needs. We told the manager and deputy manager about the areas where the care records could be improved upon.

We looked at the home's management and storage of medication. We saw that medication was being stored securely and within the temperature range recommended by the manufacturer. This ensures people are placed at risk of harm. We saw people were receiving their medication as prescribed by the medical practitioner. We saw the home had run out of some medication for one person on a weekend. This is not good practice, although they did ensure the person received their medication later that day as they obtained the medicines from the 'out of hours' service. Thus the person was not placed at any risk of harm through not having their medication.

We carried out a number of audits of medication to see if the medication records were accurate. We found two incorrect audits of tablets, which indicated the staff had signed that they had given the medication, but it had not been administered as prescribed. The manager agreed to investigate these medication discrepancies.

We saw staff were knocking on doors before they entered a room to ensure peoples'

Evidence:

privacy is maintained. We heard staff speaking respectfully to the people who use the service. We saw the home has information in the hallway about 'dignity in care' and they have appointed 'dignity champions' for the home. We saw that people who use the service, staff and relatives had written information on the dignity memo board. This is good practice.

## 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 who use the service can be confident the home will be able to support them to follow their personal interests and activities. People are able to keep in touch with family, friends and representatives and the home supports them to continue these relationships. People are offered a variety of healthy meals and snacks at a time and place to suit them.

Evidence:

We looked at the social care needs of the people whose care we tracked. We saw they had copies of the activity programme in their rooms so that they were aware of what activities were taking place. We saw good life histories in the care records and information about each person's interests and hobbies.

The manager told us all the staff are involved in the provision of activities in the home and this is 'embedded in the routines of the day'. We saw staff were holding a quiz in the main lounge in the morning and staff took three people who use the service to the local pub for lunch. We heard staff interacting with the people who use the service throughout the day. The atmosphere in the home was happy and lively. A themed day is held every month and staff told us that yesterday they had a '1920's day', whereby staff and people using the serviced dressed accordingly. We looked at the monthly

## Evidence:

visit report for April, undertaken and provided by the Head of Care. This told us, 'the home was celebrating St Georges day and was brightly decorated to mark the occasion. Staff had also dressed for the occasion (red and white). Some of the residents had red and white flags attached to walking aids. Residents were clearly enjoying the celebration and some were singing along to the music that was playing in the background. The catering staff were busy icing the celebratory cake for St Georges day'. The report contained the following comments from people who use the service about the activities provided by the home; 'I like living here and have made lots of friends,we often get together'. 'There is always something to do here'. 'I like going out on trips and sitting in the garden'. 'I like being able to hold the rabbit'.

Staff told us they have a cinema evening every Saturday night and people are offered drinks, popcorn and ice cream whilst watching the film. Staff told us, 'we have had so much fun'.

We looked at the provision of food in the home. We saw the home offer flexible mealtimes, a staggered breakfast and two sittings at lunch time. We saw one person eating their breakfast in the dining room at 11:20hrs. Choices of where residents would like to consume their meals are offered. We were given a copy of the menus for a four week period. This shows they are offered a continental and cooked breakfast each day, a choice of three main courses, (there is not a vegetarian choice available everyday), and a choice of the dessert of the day, fresh fruit or yoghurt. Supper is a choice of sandwiches or a main meal. Dessert is a choice of pudding or cake. We observed lunch in the dining room. There were two sittings; 12 midday and 13:00hrs. The tables seat up to four people, they were nicely laid with clean cloths and flowers on each table. Condiments and drinks were provided on each table. The days menu is displayed in the entrance hall and in the dining room.

We looked at the nutritional care of the people whose care we tracked. We saw their individual nutritional care needs were identified in the care records. We saw the home record the food and fluid intake for people who are 'at risk' nutritionally. We saw the home are meeting the dietary needs of the people whose care we tracked. We spoke to the chef and she was aware of their individual dietary needs.

Comments from people who use the service about the food in the April report provided by the Head of Care told us people are 'very happy with the food', 'there is plenty of choice. We can have something different if we want to', 'in the night if I want a drink I 'ring my buzzer' and they will make me a drink'.

## 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.

If people have concern with their care, they or people close to them know how to complain. These concerns are looked into and action taken to put things right. People who use the service are safeguarded from abuse.

Evidence:

We looked at the home's complaints records since the last key inspection in November 2009. We saw the home are recognising and recording complaints. The manager had received five complaints, one was not upheld and four were upheld. The outcome of some of the complaints had not been recorded and we advised the manager to ensure this is completed when the complaint is closed.

We have received one complaint about the service since the last key inspection and this were referred to the manager to resolve, which she did to the satisfaction of the complainant.

Any incidents of possible abuse are being reported promptly by the manager to Worcestershire County Council(WCC), who are the lead agency for coordinating safeguarding referrals. We are also being notified of these incidents. At the last inspection staff expressed concern about people leaving the home via the front door unnoticed and following the inspection we were told about an incident where a person left the home and was returned by a member of the community. The manager told us they had now got an alert system on all external doors to ensure staff are aware when

Evidence:

someone is leaving the home. Risk assessments are in place and the manager told us one person who has dementia has been assessed by an Occupational Therapist to ensure they have the skills to enable them to cross the road safely and supporting their independence when out and about in the community.

Staff spoken with were aware of the home's complaints procedures and what action to take if they suspected any abuse in the home. The manager told us she arranged training for staff about abuse and the Deprivation of Liberty safeguards (DoLs) following a recent safeguarding meeting for the home. The manager has attended an update for managers provided by WCC about safeguarding.

We looked at two staff files and they contained Criminal Record Bureau checks for these people before they started work in the home to ensure only suitable people are employed, which protects the people who use the service.

## 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 is clean and well maintained providing a safe environment for the people who use the service. Systems for the management of infection control are in place to ensure the safety of the people who use the service.

Evidence:

The random inspection carried out in February 2010 found that,'the service have reviewed the temperatures they wash communal bed linen, towels, flannels and any foul laundry at, to ensure it is washed at sufficiently high temperatures to thoroughly clean the laundry and prevent any risk of cross infection'. Staff told us they continue to follow these procedures.

The home offers care for 50 people in 46 single and two double rooms. A loop system is installed to assist people who have hearing difficulties. Call bells are available in every room this extends to individual call pendants being available to all people who use the service. We saw people wearing these call pendants around the home. All parts of the home is accessible for people who use a wheelchair.

We looked at the parts of the home used by the people we case tracked. They had single bedrooms, which were nicely decorated and personalised by the people using the service. Window restrictors were in place in the upstairs bedroom. These are required by health and safety legislation to ensure the safety of the people who use the service.

Evidence:

The manager showed us the 'window checks' form and the last recorded check of the safety of the windows was recorded as taking place on 29th April 2010. The rooms were clean and tidy, and there was no bad odours in the home.

We saw four communal rooms, a dining room, sun lounge, small lounge and an 'occasions' rooms where people could entertain family and friends at mealtimes in private. All these rooms were clean and nicely decorated and furnished.

In the central courtyard of the building there is a garden, which is very well maintained with plenty of seating for people to use when the weather permits. A pet rabbit lives in this garden with its own hutch and run.

## 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 are sufficient staff provided with the skills and competencies to meet the needs of the people who use the service. Thorough recruitment procedures are in place to ensure the safety of the people who use the service.

Evidence:

The findings at the random inspection carried out in February 2010 were, 'on the day of the inspection there was a lead carer and four care staff on duty who were employed by the home. They also had two staff from a nurse agency and one was a trained nurse who was able to support the lead care staff with the administration of medication. There were 42 people using the service at the time of the inspection. The manager told us they have not reviewed the staffing levels since the last inspection, but they have maintained the same numbers of staff for 50 people, although there are eight less people using the service at present. The activity co-ordinator continues to work four days each week, although she was on holiday at the time of the inspection. We looked at the staff rota for a two week period and this showed the home has two lead care staff and five care staff on duty during the day and three care staff at night time'.

On the day of the inspection visit there were two lead care staff on duty, one was an agency nurse, and five care staff. The manager, deputy manager and senior lead carer was also on duty. The activity coordinator is on sick leave. A team of ancillary and

## Evidence:

catering staff are also employed. At the time of the inspection there were 37 people using the service.

We looked at the staff rotas for a two week period prior to the inspection and these showed the staffing levels provided each day were two lead carers and five care staff during the daytime, and three care staff at night.

There were five less people using the service than at the last inspection and the staffing levels were improved with the appointment of a deputy manager who started work at the home in April 2010.

Staff spoken with were able to confirm they had attended a number of training sessions since the last inspection for core mandatory training such as moving and handling, and for other subjects such as the Mental Capacity Act and DoLs. The training matrix provided by the manager showed ongoing training had taken place since the last inspection.

We looked at the recruitment files for two staff. All the information to show the home had undertaken a thorough process of recruitment was available. This ensures only suitable people are employed at the home. We saw that both of these staff had undertaken or were in the process of undertaking an induction programme which is in line with the Skills for Care Common Induction Standards. One person had also undergone an annual appraisal of their individual competency.

## 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.

Improvements have been made to the way the home is being managed to ensure it is run safely and in the best interests of the people who use the service.

Evidence:

Since the last inspection the manager has completed her NVQ level 4 and attended an update for managers about safeguarding people. She told us she has 'gone through a massive learning curve' since the last inspection. A deputy manager who is experienced in care has been appointed and has started work at the home in April 2010. This has provided support for the manager and team of care staff.

We asked staff what has changed for the better since the key inspection in November 2009 and they told us; 'alot'. We have 'all come together as a team'. 'The management, the manager leaves her door open, she is approachable, and helps on the floor'. We have got a deputy who is great and helps on the floor'. It's a 'pleasure to be here'. It's 'like coming to visit your family'. 'We know more about the residents and their needs'. 'Staffing levels have remained the same for higher numbers of

Evidence:

residents'.

It is evident from the outcome of this and the random inspection visit that the manager and staff have worked hard to put right the shortfalls in the home from the last key inspection. The atmosphere in the home has changed to one of a happy and lively service.

The manager is now providing support sessions to staff focussing on Dignity in Care. They are also looking at Worcestershire County Council dementia standard, and how they can make changes within the home following that ethos.

Meetings are held regularly with staff and a 'wine and cheese evening' was held with relatives and people who use the service to discuss the service provided and their aims.

We looked at the management of peoples monies. We saw the manager had last audited the monies held on behalf of people who use the service in December 2009. Since the last key inspection they have reviewed their procedures for the receipt of monies to ensure the system is more robust.

The monthly visits carried out by a representative of the owner are now more robust. They are unannounced and they include the review of records, seeking views from the staff and people who use the service and looking at the environment. This ensures the owner is able to closely monitor the standard of the service and create an action plan for any shortfalls and monitor the home's progress in meeting any identified actions to ensure they continue to provide a good standard of service.

The home are now carrying out checks of the windows in the home to ensure they are functioning properly to ensure the safety of the people who use the service.

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

### 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:

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