



Making Social Care
Better for People

Inspecting for better lives

Key inspection report

Care homes for adults (18-65 years)

Name:	Atkinson Grove Respite Bungalow
Address:	3 Atkinson Grove Huyton Knowsley Merseyside L36 7RS

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

Lead inspector:	Date:
Daniel Hamilton	2 8 0 4 2 0 0 9

This is a report of an inspection where we looked at how well this care home is meeting the needs of people who use it. There is a summary of what we think this service does well, what they have improved on and, where it applies, what they need to do better. We use the national minimum standards to describe the outcomes that people should experience. National minimum standards are written by the Department of Health for each type of care service.

After the summary there is more detail about our findings. The following table explains what you will see under each outcome area.

Outcome area (for example Choice of home)

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

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

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

This is what people staying in this care home experience:

Judgement:

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

Evidence:

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

Copies of the National Minimum Standards – Care Homes for Adults (18-65 years) 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

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Internet address	www.cqc.org.uk

Information about the care home

Name of care home:	Atkinson Grove Respite Bungalow
Address:	3 Atkinson Grove Huyton Knowsley Merseyside L36 7RS
Telephone number:	01514805673
Fax number:	01514805673
Email address:	
Provider web address:	

Name of registered provider(s):	Knowsley MBC - Health & Social Care Headquarters
Type of registration:	care home
Number of places registered:	3

Conditions of registration:		
Category(ies) :	Number of places (if applicable):	
	Under 65	Over 65

learning disability	3	3
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Additional conditions:		
Service users to include up to 3 YA with LD or up to 3LD(E)		
The Service may accommodate a named service user in the category LD on the condition that they be found accommodation elsewhere by 10 July 2006.		
The service should employ a suitably qualified and experienced Manager who is registered with the Commission for Social Care Inspection.		
To have a minimum of 1 waking night staff each night.		
To have a temporary variation for two named Service Users requiring Nursing Care.		

Date of last inspection								
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Brief description of the care home
Atkinson Grove Respite Bungalow is a three bedroomed property that is situated in a housing estate in Huyton.
The bungalow is used to provide a respite care service to adults with a learning disability who live in the Huyton, Halewood, Knowsley and Kirkby areas. The service is provided by Knowsley Social Services and has a team of 9 support workers who are

Brief description of the care home

managed by Judith Bailey (Registered Manager).

The service offers a range of personal care and support services in a homely residential setting. The local district nursing team can be accessed to provide any additional nursing or clinical procedure required.

Shared space within the bungalow consists of a lounge, small dining room, and kitchen. There is also a laundry, small office and an enclosed back garden for people to access.

A Statement of Purpose and Service User Guide has been produced together with an audio compact disc to provide information on the service. Copies are displayed on a notice board in the entrance hallway.

The weekly contribution fees for respite care range from £52.65 to £102.90 per week and vary dependent upon age. There is no contribution if a young person is still in full-time education and the parent or guardian is still in receipt of child benefit.

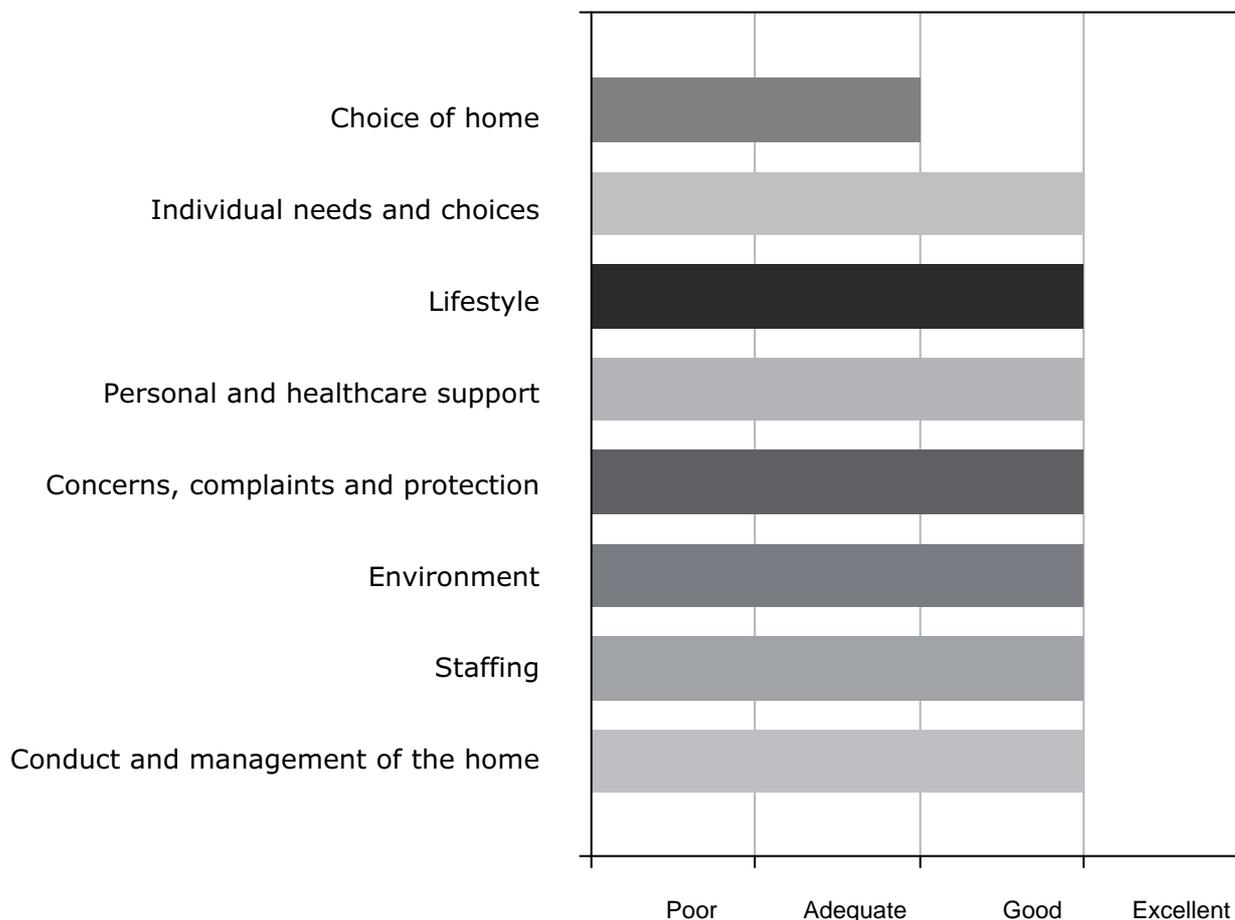
Summary

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

The quality rating for this care home is:

two star good service

Our judgement for each outcome:



How we did our inspection:

The quality rating for this service is 2 star. This means that the people who use the service experience good quality outcomes.

This unannounced inspection took place over one day and lasted approximately 9 hours. A partial tour of the premises took place and observations were made.

'Case tracking' was used as part of the inspection process. This involves looking at the support a person receives when they stay at the bungalow, including their care plans, medication and other records and spending time with the people using the service.

Two care plans were viewed during the visit and a selection of other records were

reviewed. The service manager, registered manager, three staff and two service users were also spoken with during the visit.

Survey forms were distributed to a number of the people using the service or their representatives prior to the inspection in order obtain additional views and feedback about the respite service. Only 4 surveys were received and overall these provided positive feedback on the service.

Reference was made to an Annual Quality Assurance Assessment (AQAA) which was completed by the Registered Manager before the inspection. The AQAA is a self-assessment tool that focuses on how well outcomes are being met for people using the service and contains numerical information about the service.

There had been no cause for any visits to the Atkinson Grove respite bungalow since the last routine inspection in April 2007.

What the care home does well:

Atkinson Grove Respite Bungalow is a respite care service providing support to younger adults and their carers who live within the Knowsley Area.

The bungalow presented as a warm and comfortable environment and the manager and her staff team were friendly and attentive to the needs of the people using the service on the day of the inspection. Service users spoken with confirmed they enjoyed staying at the bungalow. Comments received included "It's OK I like it" and "I have a good time when I'm here."

Information on the service had been produced in the form of a 'Statement of Purpose'. An audio compact disc and a 'Service User Guide with pictures had also been developed by the manager, to ensure the format was geared towards the needs of people with a learning disability.

Care plans had been developed by the respite service using signs and symbols, so they were more clear and easy for people to read. The plans contained key information on the personal, health and social care needs of service users and supporting documentation such as risk assessments had also been completed.

Service users spoken with confirmed they were encouraged to participate in their preferred leisure and recreational activities during a period of respite and to maintain contact with family and friends. The routines in the bungalow remained flexible in order to respond to individual lifestyles and needs.

The people using the service were observed to be relaxed and comfortable during their stay and confirmed they were happy and had no complaints. Policies and procedures had been developed to ensure an appropriate response to complaints and suspicion or evidence of abuse.

The respite service continued to employ long standing members of staff who had a good understanding of the diverse needs of the people using the respite service and this offered continuity when caring for and supporting service users.

What has improved since the last inspection?

No requirements or recommendations were made at the last inspection in April 2007.

The service has continued to receive ongoing investment since the last visit and new kitchen units and flooring has been fitted, the living room and dining room have been re-decorated and a new three piece suite and curtains and accessories have been purchased.

What they could do better:

An assessment of needs must be undertaken and available for reference before a respite care service is offered. This will ensure the manager and staff have access to key information on the needs of prospective and current service users.

Assessments should be kept under review and revised when necessary. This will ensure

staff have up-to-date information on the needs of the people they care for and help them to provide an individualised service.

The Service User Guide should be updated with the name and contact details of the Care Quality Commission.

Handwritten Medication Administration Records (MAR) should be countersigned by another suitably trained staff member, to confirm the information recorded on the MAR is correct.

The medication policy should be updated to provide more guidance for staff on the procedure to follow in the event a service user wishes to self-administer medication. This will ensure best practice and help to safeguard the health and welfare of the people using the service.

Management systems should be developed to ensure the prescribed instructions recorded on Medication Administration Records are clear and detailed. This will ensure staff have all the necessary information and enable them to correctly administer medication.

The Complaints procedure should be updated to include the correct name and contact details of the Care Quality Commission. This will ensure people have up-to-date contact information.

Records of complaints, concerns and safeguarding incidents should be more detailed and include information on the action taken, findings and outcomes. This will help to provide evidence that complaints are taken seriously and the welfare of vulnerable people is safeguarded.

Documentary evidence and records of staff training and development should be obtained / updated to provide a clear overview of training completed by staff. This will help to provide evidence that the people using the service are supported by trained and competent staff and to identify the outstanding training needs of staff.

Management support systems should be developed, to ensure staff receive formal supervision at regular intervals.

A more robust quality assurance system should be put into operation as soon as possible. This will enable the provider to self-monitor, review and develop all aspects of the 'Chance for a Break' respite service.

Management systems should be developed to ensure all equipment within the bungalow is routinely serviced and certificates maintained for reference. This will help to provide evidence that the health and safety of the people using the service is safeguarded.

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

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

Details of our findings

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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, what they hope for and want to achieve, and the support they need.

People can decide whether the care home can meet their support and accommodation needs. This is because they, and people close to them, can visit the home and get full, clear, accurate and up to date information. 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 the person 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.

People do not always have their needs assessed or reviewed prior to staying at the bungalow. Unless an assessment is undertaken before a period of respite care, there is no assurance that care needs will be met.

Evidence:

A 'Statement of Purpose' dated April 2009 had been produced in a standard format, to provide the people using the service and their representatives with details about the bungalow and the 'Chance for a Break' respite service. An audio compact disc and a 'Service User Guide' with pictures had also been developed by the manager, to ensure the format was geared towards the needs of people with a learning disability. All information on the service was displayed on the notice board by the front entrance. The manager was requested to update the Service User Guide with the name and contact details of the Care Quality Commission.

The Annual Quality Assurance Assessment (AQAA) for the service detailed that policies and procedures had been developed for referral and assessment as previously noted.

Evidence:

The manager reported that assessments of need were undertaken by the Care Management Team and that introductory visits to the bungalow were also arranged whenever possible.

The personal files of two service users were viewed during the visit to review assessments. Only one file contained an assessment and this was in need of review. Discussion with the manager revealed that the service did not have assessments in place for a number of people using the service or that they were in need of review. Examination of records revealed that a senior manager had sent an e-mail to the learning disability care management team during April 2007 requesting that this matter be addressed. This matter has still not been fully resolved and required action.

The manager reported that no formal contracts or statements of terms and conditions were issued to guests or their representatives due to the short-term nature of the service.

Individual needs and choices

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 needs and goals are met. The home has a plan of care that the person, or someone close to them, has been involved in making. People are able to make decisions about their life, including their finances, with support if they need it. This is because the staff promote their rights and choices. People are supported to take risks to enable them to stay independent. This is because the staff have appropriate information on which to base decisions.

People are asked about, and are involved in, all aspects of life in the home. This is because the manager and staff offer them opportunities to participate in the day to day running of the home and enable them to influence key decisions. People are confident that the home handles information about them appropriately. This is because the home has clear policies and procedures that staff follow.

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 manager and staff team support service users to have as much choice and control over their lives as possible, in order to promote independence and wellbeing.

Evidence:

The Annual Quality Assurance Assessment (AQAA) for the service detailed that policies and procedures had been developed for individual planning and review.

The personal files of the two service users were viewed during the visit. Each file contained a care plan which had been produced by care managers several years ago however more recent care plans had also been developed by the respite service.

The care plans developed by the respite service had been produced using signs and symbols, so they were more clear and easy for people to read. The plans contained key information on the personal, health and social care needs of service users and supporting documentation such as risk assessments had also been completed. The

Evidence:

service manager reported that the respite service plans to introduce new risk assessments and 'About me' files in the future, in order to develop a more 'person-centred' approach to care planning based upon the essential lifestyle planning model.

The registered manager advised that a pre-stay review form was completed prior to a service user receiving a period of respite care and any significant changes were transferred to care plans. The form covered medication, health and dietary needs, changes in behaviour, other services to be accessed during the stay, finance, contact and respite dates.

The opportunity for service users to make decisions and their needs known during a period of respite relies to some extent on the staff team understanding and responding to non-verbal communications. On the day of the visit the people using the service were able to communicate their views on the service and were observed to be relaxed and comfortable in the bungalow. Comments received included "It's OK I like it" and "I have a good time when I'm here."

Staff spoken with were able to give examples of how they communicate with the people they cared for and demonstrated a sound awareness of the principles of good care practice and equality and diversity issues. Staff confirmed that people using the respite service were encouraged to take appropriate risks associated with the normal aspects of daily life and that staff were available at all times to offer support.

Lifestyle

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 can take part in activities that are appropriate to their age and culture and 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 and the home supports them to have appropriate personal, family and sexual relationships. People are as independent as they can be, lead their chosen lifestyle and have the opportunity to make the most of their abilities. Their dignity and rights are respected in their daily life. People have healthy, well-presented meals and snacks, at a time and place to suit them.

People have opportunities to develop their social, emotional, communication and independent living skills. This is because the staff support their personal development. People choose and participate in suitable leisure activities.

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.

Meals, activities and routines were flexible and varied to enable service users to follow their preferred lifestyle.

Evidence:

The manager reported that a weekly 'Guest meeting' was organised, to enable people to become involved in planning their period of respite and to choose the activities they wish to participate in. This helps the people using the service to engage in their preferred leisure and recreational activities and to continue, if requested, with daily routines such as visiting day centres. Service users were also supported to maintain contact with family and friends during their stay via telephone calls or visits.

The notes of a recent meeting were viewed during the visit which confirmed the purpose of the meeting, arrangements for the period of respite, activities and fire

Evidence:

procedures had been discussed with service users. Following the meetings, an activity plan was produced for each person in a user-friendly format. Previous inspection records detail that staff also had regular 'house meetings' to discuss the operation of the respite service.

A budget of £100.00 per week was allocated for catering. Meals were prepared on a meal-by meal basis as a degree of flexibility was needed in order to respond to the different dietary needs and preferences of the people who use the respite service. The manager demonstrated an awareness of the need to promote and offer a healthy balanced diet and records of meal choices had been recorded. Meal times were flexible and service users were observed to be encouraged to participate in the planning and preparation of meals.

Staff were available to provide varying levels of assistance to the people using the service with eating and drinking and the manager confirmed that advice would be sought from the dietitian or speech and language therapist, subject to individual need.

Personal and healthcare support

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 receive personal support from staff in the way they prefer and want. Their physical and emotional health needs are met because the home has procedures in place that staff follow. If people 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.

If people are approaching the end of their life, the care home will respect their choices and help them to 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.

The principles of respect, dignity and privacy are put into practice so people using the service can be confident they will be well cared for.

Evidence:

The people using the respite service required different levels of assistance with personal care. Staff spoken with demonstrated an awareness of the support needs and preferences of the people using the service and were observed to offer support to service users in a person-centred and dignified manner. Care plans had been also developed by the service which included information on personal and health care needs.

The manager reported that the majority of routine health care appointments were taken care of whilst service users were being cared for in their home environments, however staff from the respite service were able to support people to planned appointments during a stay at the bungalow if required. The Annual Quality Assurance Assessment for the service detailed that staff had access to a policy on the control, storage, disposal, recording and administration of medicines and written guidance

Evidence:

regarding PRN (as required medication) and homely remedies had also been developed. The manager reported that only one of the people using the service self-administered medication at the time of the visit. Examination of records confirmed that a disclaimer / consent form had been developed for the service user however advice was given regarding how to further develop the risk assessment and medication policy to address the risks associated with self-administration.

Medication was stored in a locked cabinet in the office. Medication Administration Records (MAR) for two service users were checked during the visit. It was noted that a handwritten MAR had not been countersigned to confirm the information recorded had been checked and was correct and details of the prescribed instructions for one medication were not clear. This was discussed with the manager during the visit.

The manager reported that pen pictures with photographs were inserted next to MAR for new staff, to assist in the correct identification of service users, prior to administering medication. A controlled drugs cabinet and register had not been obtained at the time of the visit as none of the people using the service were prescribed controlled drugs.

Pre-inspection records detailed that staff were regularly trained in managing medication and had received updates in policies concerning the management of medication.

Concerns, 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. Their concern is looked into and action taken to put things right. The care home safeguards people from abuse, neglect and self-harm and takes action to follow up any allegations.

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.

Systems have been developed to listen and respond to complaints and to safeguard and protect service users from abuse.

Evidence:

A copy of Knowsley Council's 'Compliments, Suggestions and Complaints' procedure was in place and this was subject to review. A 'Compliments, Suggestions and Complaints' leaflet had been also produced in standard print, a copy of which was given to service users and their carers upon commencement of the service. The leaflet was in need of review at the time of the visit in order to include the name and contact details of the Care Quality Commission.

The people using the service were observed to be relaxed and comfortable during their stay and confirmed they were happy and had no complaints. Staff spoken with demonstrated a good understanding of the diverse communication needs of the people they cared for and information on how to communicate with each service user was available within individual files.

The Annual Quality Assurance Assessment (AQAA) for the service detailed that three complaints had been received in the last 12 months. The first complaint concerned lost clothing, the second concerned the physical wellbeing of a resident during a period of respite and the third concerned an injury sustained by a service user due to the use of

Evidence:

a bed with bedside rails.

The outcomes of the second and third complaint were not clearly recorded in the complaint log book and this was discussed with the manager in order to improve records. Further investigations were undertaken on behalf of the service by the service manager who provided the Care Quality Commission with a more detailed account of the incidents and the action taken.

Information received from the service manager following the inspection confirmed appropriate action had been taken to safeguard the welfare of the people using the service and to also clarify when incidents should be referred to the safeguarding unit.

A Copy of Knowsley Council's safeguarding and whistleblowing procedure were available within the bungalow for staff to reference. The AQAA detailed that all staff were regularly given training on issues relating to safeguarding adults and staff spoken with demonstrated a good awareness of the different types of abuse and reporting procedures.

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, comfortable, 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. People have enough privacy when using toilets and bathrooms.

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.

Systems are in place to ensure the bungalow is safe and maintained and this provides a pleasant environment for service users during their period of respite.

Evidence:

Atkinson Grove Respite Bungalow is a three-bedroom property that fits in well with other domestic buildings in a residential area of Huyton. Shared space within the Bungalow consists of a spacious lounge, small dining room, kitchen, office, laundry and enclosed back garden. These rooms are comfortably furnished and decorated. One additional bedroom is used for staff to sleep-in during the night and service users and staff have access to a shower room and toilet.

Health and safety practices and procedures have been developed to ensure the environment remains safe, clean and free from hazards. This includes regular health and safety checks and the development of a maintenance plan and risk assessments.

Contractors were hired to maintain the gardens and the landlord (Arena Housing) was responsible for the ongoing maintenance of the building.

Since the last inspection, new kitchen units and flooring have been fitted, the living

Evidence:

room and dining room has been re-decorated and a new three piece suite and curtains and accessories have been purchased.

Areas viewed in the bungalow on the day of the visit appeared generally clean and tidy.

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, qualified 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. People's needs are met and they are supported because staff get the right training, supervision and support they need from their managers.

People are supported by an effective staff team who understand and do what is expected of them.

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.

Staffing arrangements, recruitment practice and training opportunities ensure that people are cared for and supported effectively.

Evidence:

Examination of the rotas and discussion with the manager confirmed the respite service had been allocated with a team of ten staff including the registered manager to provide direct care and support to the people using the service. Two staff were on duty from 8.00am until 11.00pm and during the night the property was staffed with one staff member undertaking waking night duties and another providing 'sleep-in' support.

The manager reported that there were no staff vacancies at the time of the inspection and many of the staff working in the respite bungalow had been there for several years or more providing a stable team for the people using the service as previously noted.

The Annual Quality Assurance Assessment (AQAA) for the service detailed that the service had a policy on recruitment and employment including redundancy. The manager reported that no new staff had commenced employment at the respite

Evidence:

bungalow and that all recruitment records were stored within the Council's Human Resource section. A form had been developed to provide confirmation that records required under Schedule 2 of the Care Home Regulations 2001 had been obtained for existing staff, together with a photograph, which had been dated and signed by a principal Human Resource officer. The manager reported that recruitment records would be made available for inspection for any new staff that commence employment in between inspections. The manager was recommended to ensure the Schedule 2 form was revised following some changes to Schedule 2 in July 2004.

The AQAA for the service detailed that 7 of the 9 (77.77%) staff members (excluding the Registered Manager) had achieved a National Vocational Qualification (NVQ) level 2 or above in care. The manager reported that the two outstanding staff had also completed the award and were waiting for their files to be verified by an external assessor.

Staff had access to a range of training via Knowsley Council and additional training is offered to staff when the service is closed for a week during April each year. A training matrix for mandatory training had been produced which covered managing medication, moving and handling, protection of vulnerable adults from abuse, first aid, food hygiene, infection control, understanding epilepsy, health and safety, personal safety, recording with care, effective communication, challenging behaviour, understanding learning disability, risk assessment, rescue medication and a mini-bus test.

Feedback received from staff via surveys and through discussion confirmed they had completed a range of training during their employment however it was not possible to accurately assess the training needs of staff as training records viewed were not-up-to-date as noted at the last inspection. Furthermore, details of inductions and documentary evidence of training completed was not available for reference.

Staff spoken with reported that they had access to formal and indirect supervision from the manager, to ensure they received ongoing guidance and support. Records checked highlighted inconsistencies in the frequency of supervisions for some staff and there were no records of any supervisions for one employee for over two years.

Conduct and management of the 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 have confidence in the care home because it is run and managed appropriately. People's opinions are central to how the home develops and reviews their practice, as the home has appropriate ways of making sure they continue to get things right. The environment is safe for people and staff because 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. They are safeguarded because the home follows clear financial and accounting procedures, keeps records appropriately and makes sure staff understand the way things should be done.

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.

Management and administration systems are subject to ongoing development and review to ensure the service is run in the best interest of the people using the service.

Evidence:

The manager of the service, Miss Judith Bailey, was registered with the Commission and had managed the service provided at Atkinson Road respite bungalow since July 2004. The manager was observed to be attentive to the needs of the people using the service and interacted with people in a friendly and caring manner. Staff spoken with during the inspection confirmed the manager was approachable and supportive and reported that they enjoyed working for the service.

The Annual Quality Assurance Assessment (AQAA) for the service detailed that the manager had completed a National Vocational Qualification level 4 in Care. The manager reported that she was working towards the Registered Managers Award and continued to undertake training that was relevant to her role and responsibilities.

Evidence:

At the time of the inspection the service did not have a robust quality assurance assessment system in place. Discussion with the manager and service manager confirmed that an operational group was currently in the process of developing a quality assurance system for use across adult services and that this was considered a priority task. A corporate business plan had been produced and a team plan was in the process of being developed in response to the organisation's objectives.

The manager reported that the service had recently circulated feedback forms to obtain the views of the people using the service and their representatives following a period of respite care. At the time of the visit only one form had been received. Advice was given on how the form and process should be further developed.

Records of monthly visits from senior management were only available up to October 2008 due to the absence of a service manager. The newly appointed service manager was spoken with during the visit and demonstrated a commitment to ensuring that visits were undertaken on a monthly basis, to ensure compliance with Regulation 26 of the Care Home Regulations 2001.

Information received via the Annual Quality Assurance Assessment (dataset) confirmed policies and procedures had been developed on Health and Safety. Likewise, the AQAA detailed that equipment in the bungalow had been serviced or tested periodically.

A range of health and safety checks had also been established to ensure the environment remained safe and a maintenance plan and risk assessments were available for reference.

The premises was not fitted with a fire alarm system. A record of weekly tests of the smoke detectors and a magnetic door together with visual checks of fire fighting equipment had been recorded. The manager was recommended to record the location of each smoke detector checked. A sample of service records were checked during the inspection and the following issues were noted. The last recorded service date for the hoist was in June 2007, there was no certificate to confirm the emergency lighting was inspected periodically and the last fire extinguisher service was dated 23/07/07.

The service manager contacted the Care Quality Commission following the inspection to confirm action had been taken to ensure all equipment in the home was serviced periodically, to ensure the welfare of the people using the service was safeguarded.

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
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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
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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	2	14	<p>An assessment of needs must be undertaken and available for reference before a respite care service is offered.</p> <p>This will ensure the manager and staff have access to key information on the needs of prospective and current service users.</p>	20/07/2009

Recommendations

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

No.	Refer to Standard	Good Practice Recommendations
1	1	Assessments should be kept under review and revised when necessary. This will ensure staff have up-to-date information on the needs of the people they care for and help them to provide an individualised service.
2	2	The Service User Guide should be updated with the name and contact details of the Care Quality Commission.
3	20	Management systems should be developed to ensure the prescribed instructions recorded on Medication Administration Records are clear and detailed. This will ensure staff have all the necessary informations and enable

		them to correctly administer medication.
4	20	The medication policy should be updated to provide more guidance for staff on the procedure to follow in the event a service user wishes to self-administer medication. This will ensure best practice and help to safeguard the health and welfare of the people using the service.
5	20	Handwritten Medication Administration Records (MAR) should be countersigned by a another suitably trained staff member, to confirm the information recorded on the MAR is correct
6	22	Records of complaints, concerns and safeguarding incidents should be detailed to provide information on the action taken, findings and outcomes. This will help to provide evidence that complaints are taken seriously and the welfare of vulnerable people is safeguarded.
7	22	The Complaints procedure should be updated to include the correct name and contact details of the Care Quality Commission. This will ensure people have up-to-date contact information.
8	35	Documentary evidence and records of staff training and development should be obtained / updated to provide a clear overview of training completed by staff. This will help to provide evidence that the people using the service are supported by trained and competent staff and to identify the outstanding training needs of staff.
9	36	Management support systems should be developed, to ensure staff receive formal supervision at regular intervals.
10	39	A more robust quality assurance system should be put into operation as soon as possible. This will enable the provider to self-monitor, review and develop all aspects of the 'Chance for a Break' respite service.
11	42	Management systems should be developed to ensure all equipment within the bungalow is routinely serviced and certificates maintained for reference. This will help to provide evidence that the health and safety of the people using the service is safeguarded.

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