

## Key inspection report

### Care homes for adults (18-65 years)

<b>Name:</b>	Shrewsbury House
<b>Address:</b>	Battlebridge Lane Merstham Surrey RH1 3LT

**The quality rating for this care home is:**

two star good service

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>
Ruth Burnham	1 7 1 1 2 0 0 9

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 Adults (18-65 years) 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

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## Information about the care home

Name of care home:	Shrewsbury House
Address:	Battlebridge Lane Merstham Surrey RH1 3LT
Telephone number:	01737215135
Fax number:	
Email address:	
Provider web address:	

Name of registered provider(s):	Ashcroft Care Services Ltd
Name of registered manager (if applicable)	
Mr Stephen Garry Luckens	
Type of registration:	care home
Number of places registered:	5

Conditions of registration:		
Category(ies) :	Number of places (if applicable):	
	Under 65	Over 65
learning disability	5	0
Additional conditions:		
The maximum number of service users to be accommodated is 5.		
The registered person may provide the following category/ies of service only: Care home only - (PC) to service users of the following gender: Either Whose primary care needs on admission to the home are within the following categories: Learning disability (LD).		

Date of last inspection								
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Brief description of the care home
Shrewsbury House is a five bed roomed detached residence located in Merstham village. Three bedrooms are situated on the ground floor within close proximity to bathroom and toilet facilities. Communal areas on the ground floor include a spacious television room, a well-equipped kitchen and combined dining area. Separate utility facilities are situated in the conservatory. Upstairs there are a further two bedrooms, a second bathroom with separate shower and an office. Accommodation is domestic in scale and character. Local shops and community facilities are within walking distance

**Brief description of the care home**

of the home. Redhill town is accessible by public transport and provides a larger shopping centre and leisure amenities.

The weekly fee range from 1081.00 to 1727.00 pounds per week.

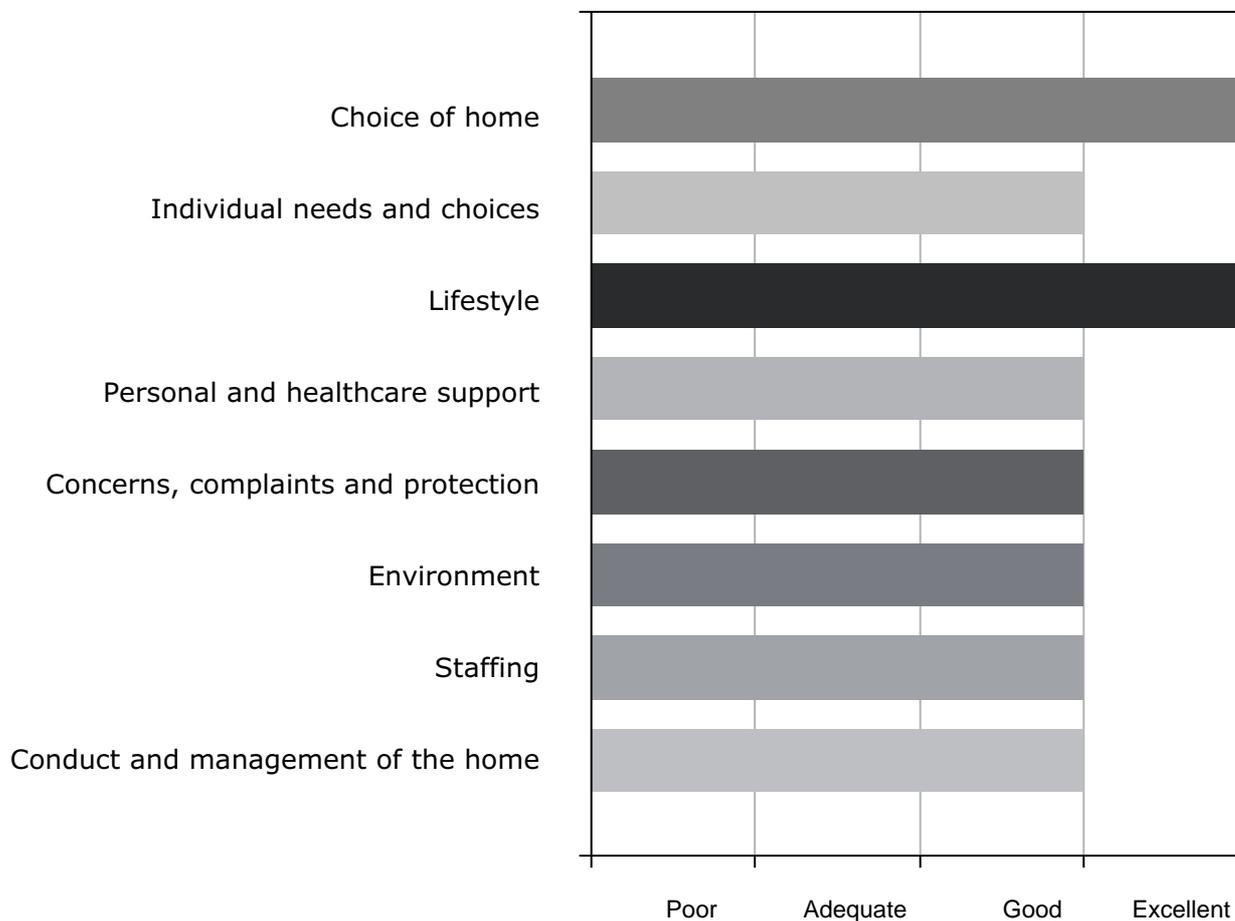
## Summary

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 unannounced site visit, which forms part of the home's key inspection was undertaken on 17 November 2009. We were in the home for four and a half hours from 09:00 to 13:30.

We asked the owner to complete and return the Annual Quality Assurance Audit (AQAA) before our visit. This was returned to us and contained all the information we asked for. Evidence for some of the information provided was looked at during our visit.

There are 5 people currently living in the home. We spoke with 2 people who live there. We also spoke to 2 members of staff, the person in charge and the deputy manager. We looked at most areas of the premises. We examined a number of records including staff employment records, daily records, incident records, risk assessments, reviews and care plans.

Before the visit we sent 5 surveys to people who live in the home; 5 to their advocates; 6 to members of staff; 5 to health professionals and 5 to care managers. 4 surveys were returned: None from people who live in the home; 1 from a member of staff; 2 from health professionals and one from a care manager. Responses were all positive.

The last key inspection took place on 7 January 2008. We found the recommendations made following that inspection have been partially met. There are no required developments at the end of this report.

There is no registered manager for the service, the person in charge is in the process of applying for registration.

The quality rating for this service is 3 star. This means the people who use this service experience good quality outcomes.

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

People who are considering moving into the home are provided with helpful information and are able to experience what life is like there before any decisions are made. No one moves into the home without a detailed assessment of their needs to ensure the home can meet all their needs and is suitable for them.

People who live in the home are supported to access a wide range of activities including using local community facilities. They are supported to maintain links with their families and friends. Independence is promoted and people enjoy a varied and balanced diet. They can be confident their health and personal care needs will be met in a way that upholds their privacy and dignity. People are protected through the safe handling of medication. They are listened to and protected from abuse.

The home provides a welcoming and friendly atmosphere. People living in the home benefit from the comfortable, clean and safe environment and the support of the well qualified and committed staff team who understand and know how to ensure they receive all the support they need. People are protected from harm through robust recruitment procedures. They can be confident staff are well trained and supervised.

People who live in the home can be confident their views are taken into account in the way in which the home is run. Effective quality assurance systems ensure continued improvement in the service. People are protected from harm through safe working practices.

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

A lot of work has been done to make care plans more individual, involving people who live in the home in the process. The plans of care now reflect information about people's personal preferences for support and their likes and dislikes.

All staff receive up to date training in safeguarding adults from abuse ensuring that people living in the home are safeguarded from harm and abuse.

A new home manager has been appointed since our last visit who is in the process of applying for registration. A report on the outcome of quality assurance surveys is now available in the home

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

Improvement is needed to ensure people living in the service and/or their relatives sign their care plans to confirm their agreement.

Risk assessments should be further developed to include all aspects of daily life.

Staff should receive training in mental health difficulties to reflect the needs of people who live in the home.

It is strongly recommended that the provider considers increasing management hours and providing the office equipment needed to support good management systems in the home.

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

People who are considering moving into the home are provided with helpful information and are able to experience what life is like there before any decisions are made. No one moves into the home without a detailed assessment to ensure the home can meet all their needs and is suitable for them.

Evidence:

The home provides helpful information about the service in the a statement of purpose and service user guide, these are produced in a suitable format to enable people who live in the home, or are considering moving in, to understand them. These documents have been reviewed in the last year to ensure they remain up to date and provide an accurate reflection of what life is like in the home.

Since our last visit one person has moved into the home. We spoke with this person who told us he was much happier living at Shrewsbury House. We looked at the assessment documentation, this was detailed and included information from health and social care professionals. A transition period preceded the move. This included opportunities to visit and also stay overnight to get to know the other residents and

Evidence:

meet the staff who support people in the home.

The organisation has a central team who support the home manager in making decisions about whether the service is suitable and can meet the needs of anyone who is considering moving into the home.

## 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.

People who live in the home can be confident their needs are understood and support will be provided in line with their wishes and expectations. People are protected from harm through effective risk management systems.

Evidence:

During this visit one person's files were examined in detail. Documents seen show the home has improved care planning to ensure people who live in the home are involved in the process. A new Essential Lifestyle Plan has been developed with each person. These contain detailed information about people's preferences and lifestyle choices and reflect equality and diversity issues. Where people need specific support with aspects of their lives, additional guidance for staff is provided in negotiation with the person to ensure staff understand specific individual needs and can provide consistent support in line with the person's wishes and expectations.

The person in charge gave examples of how they consult with families and other professionals such as dietitians to support decision-making. The home is continuing to

## Evidence:

develop documents in user-friendly formats to ensure everyone who lives in the home can understand them. Some further improvement is needed to ensure people living in the service and/or their relatives sign their care plan to confirm their agreement.

Regular care review meetings are held with each person, their key worker and other professionals who are involved in their care, to ensure plans of care are up to date. During these reviews all aspects of the person's life and well being are discussed to make sure that the service continues to meet all their needs and provide the best environment for further development and independence. Some discussion took place about the need to ensure guidance is clearly written in a way that new staff will understand.

Each person who lives in the home has a named key worker on the staff team. One person who we spoke to said he had been able to choose his key worker.

Risk assessments were viewed. These are detailed and include clear guidance for staff on how to minimise risk and protect people from harm. Some discussion took place about how to develop these further to ensure they cover all aspects of daily life particularly where people use electrical appliances such as the kettle and toaster.

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

People who live in the home are supported to access a wide range of activities including using local community facilities. They are supported to maintain links with their families and friends. Independence is promoted. People enjoy a varied and balanced diet.

Evidence:

People who live in the home have a wide range of opportunities to take part in recreational and leisure activities. There is a weekly activity schedule. Activities include trampolining, accessing the gym, pub visits, walks, eating out, music, cinema, drives out, rambling, gardening, bowling, accessing the library, football matches, shopping for pleasure and visits and outings with friends. One person attends a local college for drama and horticulture. Others attend clubs and the local disco regularly. One person told us he enjoys bell ringing and attending the local church. Holidays are planned each year with the people who live in the home. People also enjoy days out

Evidence:

such as visits to the coast and other places of interest.

Shrewsbury House has two vehicles and access to the organisation's pool cars as required. People are also supported to use public transport. There are sufficient numbers of staff on duty to ensure people can enjoy activities at all times through the week including evenings and weekends.

People who live in the home are also supported to take part in the day to day running of the home. One person likes to wash and vacuum the cars, another likes to help maintain the garden. Independence is promoted within a risk management framework. Some people like to go out by themselves. One person said he likes to go out for a walk every day.

People who we spoke to said they enjoyed the food in the home. Three set meals are offered, alternative choices are available. People are able to make drinks and snacks whenever they want. The menu is planned by the people who live in the home and is displayed in the kitchen. Dietary needs and individual preferences are catered for and all are encouraged to eat a balanced, healthy diet. People are also supported to prepare food. They are able to choose where they would like to eat.

People who live in the home are supported to maintain links with family and friends and receive visitors in private.

## 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.

People who live in the home can be confident their health and personal care needs will be met in a way that upholds their privacy and dignity. People are protected through the safe handling of medication.

#### Evidence:

People who live in the home can be confident staff who support them understand how they prefer support with their personal care. People's privacy and dignity is always upheld when they are being supported with their personal care needs. Staff promote independence with personal care wherever possible. Personal care is provided by appropriate gender staff. People are supported to choose their own clothing.

Each person has an individual health action plan. These are detailed and have been written in consultation with the person. Staff also work with families, GPs and Care Managers to reach appropriate decisions where necessary. Everyone has an annual health check. Health is monitored through day to day observation and good recording systems. Records are kept of all medical appointments, therapies, chiropody, weight charts, observations, behaviours, sleep charts etc. Referrals are made to relevant health care professionals where necessary and people are supported to attend

Evidence:

consultations. A health CARE professional who responded to our survey said. 'I have been impressed by the quality of the carers that I have met and do not have any concerns about the home. The managers/senior carers contact me if they are concerned and I have not come across any problems with their service provision which appears to be of a high standard'.

People who live in the home are protected through the safe handling of medication. There are clear policies and procedures for staff to follow. Medication is reviewed every 6 months or more frequently if required. Only staff who have been adequately trained and assessed as competent may administer medication. Medication training is accredited. Records are well maintained and up to date. Medication is stored securely and administered in private. The home uses a Monitored Dosage System (MDS) and the pharmacist visits regularly to carry out medication audits.

## 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.

People who live in the home are listened to and protected from abuse.

Evidence:

People who live in the home are listened to and know who to speak to if they are unhappy. One person who we spoke to said he would talk to his key worker or the person in charge. There is a complaints procedure. in place. This is displayed on the home's information board and also displayed outside the office in symbol format. The service user guide also tells people they can make complaints and is provided in a pictorial format. The complaints procedure has been recently updated and copies have been sent to families along with the annual survey results. Since our previous visit the Commission has not received any complaints about the service and no complaints have been made to the home.

People are protected from abuse. There are clear safeguarding procedures in place and the staff all attend safeguarding training. A recent referral which the home made to the Local Authority in order to protect on of the people who lives in the home has been concluded. There are clear guidelines in place to ensure this person continues to be protected form abuse when away from the home. Safeguarding issues are supported by the organisation's clinical team and appropriate external multi agency procedures are understood and followed. Staff also attend non violent crisis intervention and challenging behaviour training.

There are procedures in place to ensure people are protected from financial abuse.

Evidence:

Records are maintained of all transactions and reasons for expenditure are documented along with receipts.

## 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.

People living in the home benefit from the comfortable, clean and safe environment.

Evidence:

People who live in the home benefit from it's location near to village shops. There is plenty of space for the five people who live there. There is a conservatory to the rear of the house, which leads to an accessible, large well-maintained garden. There is a kitchen/diner; a lounge and separate quiet room with a range of reading materials.

A number of improvements have been made to the premises since our last visit including redecorating throughout the communal areas and the replacement of furniture in the sitting room and other areas. Further improvements are planned including work to upgrade or replace the conservatory.

Each person has their own bedroom. Bedrooms are located over two floors. These are comfortable and reflect peoples individual tastes and preferences.

All areas of the home seen during our visit were clean and tidy, providing a comfortable and pleasant environment for the people who live there. All staff have attended infection control training and there is a well equipped laundry.

## 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.

People who live in the home benefit from the support of the well qualified and committed staff team who understand and know how to ensure they receive all the support they need. People are protected from harm through robust recruitment procedures. They can be confident staff are well trained and supervised.

Evidence:

People who live in the home can be confident there are sufficient numbers of qualified and competent staff in the home to support them. There is a stable staff team who know each person well and understand their needs and preferences. During this visit there were three members of staff on duty. During the day there are three members of staff and at night time people are supported by a waking member of staff and a sleep-in person. The home has an equal opportunities policy in place. The staff team are of mixed gender and ethnicity. There has been one new member of staff employed by the home in the last year. A social care professional who responded to our survey said. 'I have been working with the service for 2 years and have always found the staff very dedicated and committed to meet the needs of the service users'.

People who live in the home are protected through robust recruitment procedures. We looked at two staff files, these contained all the documentations required in the

Evidence:

regulations including completed application forms, 2 written references, evidence of Criminal Record Bureau checks, proof of identity and photographs.

The home has a key worker system in place and staff understand their roles and responsibilities. People can be confident staff are well qualified, 11 out of the 12 permanent staff have NVQ at level 2 or 3. The company employs a training manager and a training schedule is maintained in the home which records when staff are due for their next training update. Records seen show that staff receive mandatory training in health and safety, first aid, fire safety, infection control, food hygiene, safeguarding and moving and handling. staff also receive additional specialist training in topics such as autism, non- violent crisis intervention, challenging behaviour and pain management. There is a need for staff to receive training in mental health difficulties to reflect the needs of people who live in the home. This was discussed with the person in charge during our visit who agreed to request this via the organisation's training manager. All new staff employed in the home undergo an induction training programme based on the Skills for Care common induction standards.

People who live in the home can be confident staff are well supervised. Staff receive regular one to one supervision and regular staff meetings are held.

## 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.

People who live in the home can be confident their views are taken into account in the way in which the home is run. Effective quality assurance systems ensure continued improvement in the service. people are protected through safe working practices.

Evidence:

People can be confident the home is being managed in their best interests. The organisation appointed a new home manager in September 2008, referred to throughout this report as the person in charge. They are currently applying for registration with the Commission. They are qualified and experienced for this role, holding a National Vocational Qualification (Level 4) in care and the Registered Managers Award. There is also a deputy manager in place. The person in charge demonstrated clearly through the AQAA and during discussion that he has worked hard to make improvements since appointment and has identified further areas for improvement in the future.

It was of some concern that the person in charge has only seven and a half management hours allocated each week, the rest of the time he is working on shift.

## Evidence:

The lack of computer, fax or copying facilities is also problematic and means that some essential paperwork is missing from the home for periods of time awaiting typing and review at the organisation's office. It is strongly recommended that the provider considers increasing management hours and providing the office equipment needed to support good management systems in the home.

People who live in the home can be confident their views will be taken into account in the way the home is run. Regular consultation with them, their relatives/representatives and other stakeholders is carried out, which includes quality assurance feedback surveys. There are effective quality assurance systems in place including monthly quality visits by the organisation's quality manager, reports of these visits are available in the home.

People are protected through safe working practices and policies and procedures that are regularly reviewed including the health and safety policy. Water temperature testing is regularly checked and recorded. Regular servicing and maintenance of equipment is conducted including gas, electric and legionella testing. There is a fire risk assessment in the home and regular fire safety checks and drills are carried out. All substances hazardous to health are stored safely.

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
1	6	Improvement is needed to ensure people living in the service and/or their relatives sign their care plans to confirm their agreement.
2	9	Risk assessments should be further developed to include all aspects of daily life.
3	35	Staff should receive training in mental health difficulties to reflect the needs of people who live in the home.
4	37	It is strongly recommended that the provider considers increasing management hours and providing the office equipment needed to support good management systems in the home.

## Helpline:

**Telephone:** 03000 616161

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

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

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