

# Key inspection report

## Care homes for older people

<b>Name:</b>	Sunbury Nursing Homes
<b>Address:</b>	Thames Street Sunbury On Thames TW16 6AJ

<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>
Mavis Clahar	1   7   0   2   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

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## Information about the care home

Name of care home:	Sunbury Nursing Homes
Address:	Thames Street Sunbury On Thames TW16 6AJ
Telephone number:	01932785414
Fax number:	
Email address:	snhltd@snh.demon.co.uk
Provider web address:	

Name of registered provider(s):	Sunbury Nursing Homes Limited
Name of registered manager (if applicable)	
Type of registration:	care home
Number of places registered:	87

Conditions of registration:		
Category(ies) :	Number of places (if applicable):	
	Under 65	Over 65
dementia	87	0
old age, not falling within any other category	0	87

### Additional conditions:

The maximum number of service users to be accommodated is 87

The registered person may provide the following category of service: Care home with nursing (N) to service users of the following gender; Either whose primary care needs on admission to the home are within the following category: Dementia (DE) old age, not falling within any other category (OP)

Date of last inspection	2	4	0	2	2	0	0	9
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### Brief description of the care home

Sunbury Nursing Home has been a family business for a number of years. The home is owned and managed as a family business.business.

The home consists of several buildings, which are set in well-maintained grounds. The main building comprises of West Lodge, a grade 2 listed building, to which further substantial wings were added in the 1960's. Administration buildings are situated

### Brief description of the care home

between the main building and Weir House, which provides accommodation to a further 22 service users. Some staff accommodation is also located in Weir House and West Lodge.

The majority of bedrooms are single and there are a total of 7 double bedrooms. The main communal areas consist of a conservatory at the front of West Lodge and the drawing room on the ground floor of Weir House. Several smaller communal areas are to be found elsewhere in the home. The home is located close to local amenities and fronts an attractive stretch of the river Thames.

Accommodation and services, including nursing care, are provided to a maximum of 87 older people and those with Dementia.

Fees at this home are in the range of £675 to £775 per week and does not include hairdressing, personal toiletries, news papers and telephone. For further details on fees please contact the home.

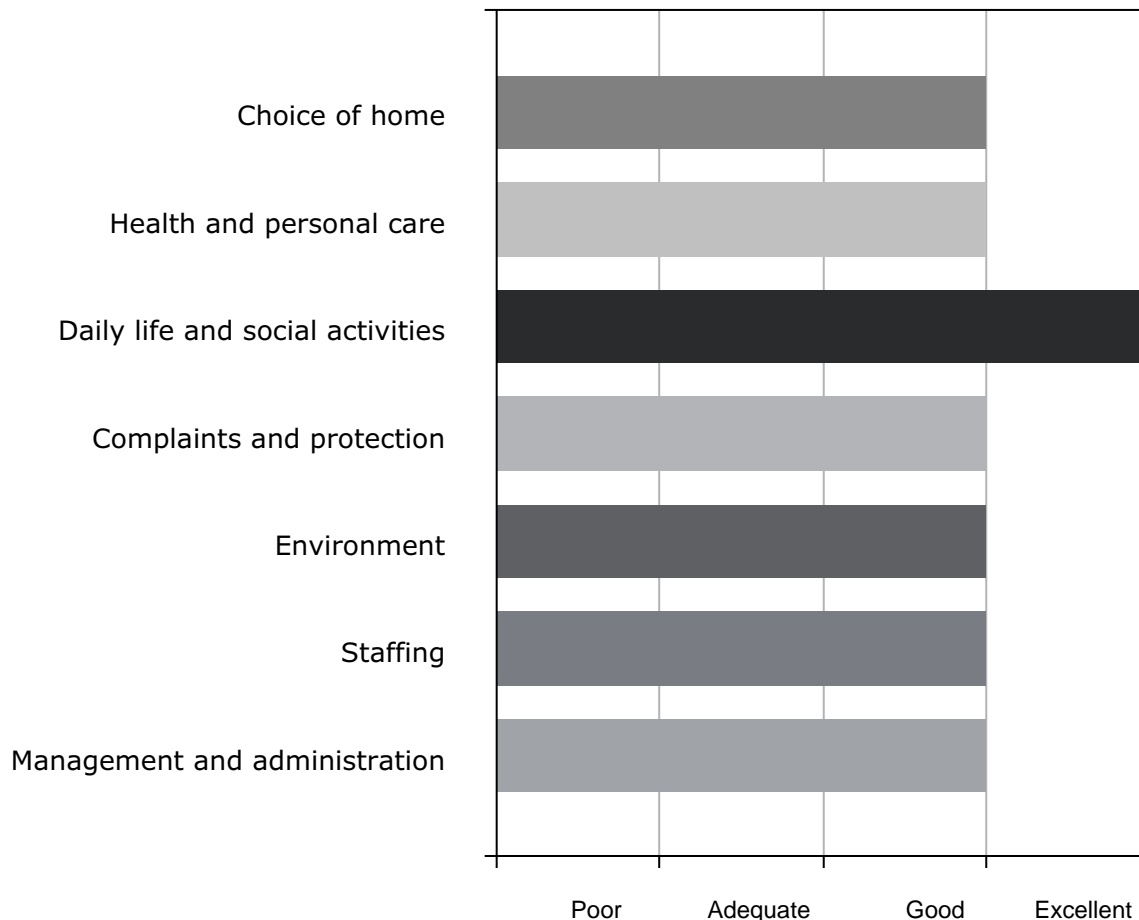
## Summary

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:

This unannounced site visit, which forms part of the key inspection to be undertaken by the Care Quality Commission (CQC) was undertaken by Mrs. Mavis Clahar on the 17th February 2010 and lasted for six hours and forty minutes; commencing at 09:50 hours and concluding at 16:30 hours.

The CQC Inspecting for Better Lives (IBL) involves an Annual Quality Assurance Assessment (AQAA) to be completed by the service, which includes information from a variety of sources. This initially helps us to prioritise the order of the inspection and identify areas that require more attention during the inspection process. This document was received by CQC and is referred to throughout the report.

The registered manager of the home resigned and a new manager has not yet been appointed. The Responsible Individual with other board directors assisted CQC (us) on this site visit. The Responsible Individual has appointed a management team to run the

home until a suitable manager is appointed.

The service users spoken to were able to express their thoughts and feelings about the care they receive. The information contained in this report was gathered mainly from speaking with a number of service users, and with care staff, management staff, and one visitor to the home and from information contained within the AQAA. Further information was gathered from records kept at the home.

The management and staff are aware of the Laws regarding equality and diversity and Equal opportunities and this was reflected in the staff mix. We were told the service users residing at this home represented and reflect the population of the area in which the care home is situated.

All records sampled were up to date with care plans being signed by the service users or by relatives. No requirements were issued on this visit. The final part of the inspection was spent giving feedback to the Responsible Individual and management team about the findings of this visit.

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

The home has responded in a positive manner to all the requirements made at the last key inspection. This action has greatly improved the lives of the service users in this home. Service users lifestyles matched their needs and preferences and where possible they are able to maintain contact with family, friends and the local community. Service users are able to make choices in accordance with their abilities and are provided with a balanced diet in pleasant dining rooms. The documentation of individual care plans is easy to read, gives the reader a full picture of the service users' likes and dislikes, communication needs, risk assessments and care needs and exactly what the carers did with and for the service user over any twenty-four hour period.

The home has a satisfactory complaints policy and procedure and training in place that evidenced that service users and relatives concerns are listened to and acted upon. Robust Safeguarding adults policies are in place to protect the service users from abuse. Observations of care staff interaction with service users indicated that service users are treated with dignity and respect. It was also observed that great care was taken in respect of the service users' personal belongings.

Of particular noteworthiness is the good interaction observed between service users and staff.

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

The home now has a well developed statement of purpose which includes the information required in Schedule 1 of the Care Homes regulation amended 2001. All service users are being assessed for care needs by staff qualified to do assessments, thus ensuring the home is able to meet the care needs of the service user. It is evident from documentation service users and their relatives are involved in the assessment process.

Major refurbishment activities have and are taking place in line with the homes refurbishment programme.

There was no mal odour present on the day of the inspection visit.

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

The management of the home is based on forward planning based on constructive analysis of performance. They plan and carry out identified deficits as soon as they are identified. We feel that they are working to wards service users' satisfaction and on the day of the visit we could not identify any areas of weakness. They should continue with the progress they are making.

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



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## Details of our findings

### Contents

Choice of home (standards 1 - 6)

Health and personal care (standards 7 - 11)

Daily life and social activities (standards 12 - 15)

Complaints and protection (standards 16 - 18)

Environment (standards 19 - 26)

Staffing (standards 27 - 30)

Management and administration (standards 31 - 38)

Outstanding statutory requirements

Requirements and recommendations from this inspection

## Choice of home

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

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

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

**This is what people staying in this care home experience:**

Judgement:

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

Prospective service users and their relatives have the information needed to choose a home, which will meet their needs and service users are being assessed to ensure the home is capable to meet the needs of the service users prior to being admitted into the home.

Evidence:

The AQAA informs the home provides service users' guide and statement of purpose in suitable format for service users.

Review of service users' documents demonstrated the home has a policy and procedure on admission and discharge of service users. This was supported in discussion with the acting manager who informed us no service user will be admitted into the home without first being assessed in their environment either by the registered manager or the deputy who are both skilled in the art of assessing the care needs of service users. We were told the home has an agreement with the local social services team to admit service users in emergency. For this type of admission an

Evidence:

assessment must be carried out by the home to ensure they will be able to meet the assessed needs of the service user before admission can take place. The AQAA supported by the admission policy informs service users must have an assessment prior to being admitted into the home. Re admission assessment following discharge from hospital is also carried out to ensure the home is still able to meet the needs of the service users.

Review of a random sample of service user's files demonstrated that pre admission assessments are being carried out and relatives were being involved in the assessment process where possible.

## 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.

Service users receive effective personal and health care support using a person centred approach with support provided based on the rights of dignity, equality, fairness, autonomy and respect. The home fully respects the rights of the individual in the areas of health care and medication. Staff members are very alert to changes in mood, behaviour and general wellbeing and fully understand how they should respond and take action.

Evidence:

The randomly selected care plans were clear, identifying potential and actual risks to service users and detailing how these risks would be managed. The daily work sheet along with discussion with service users and care workers demonstrated that service users care needs are fully met. The service user or relative signed the care plans to indicate their involvement in deciding what care they received. It was evidenced that care staff undertaking the development and review of the care plans also signed and dated them. Information contained in the homes Annual Quality Assurance Assessment (AQAA) informs each care plan is written in a manner which each client and staff member can understand and follow to ensure the needs of the service users

## Evidence:

are met. Personal discussions on the day of the visit with service users revealed that they were involved in the assessment of their care needs. All service users are registered with a local General Practitioner (GP) of their choice and visits are recorded, with access to specialist health care professionals through their GP practise as required and these visits are also recorded in the service users folder. Service users are offered access to chiropody service and weekly hairdressing facilities are available at a cost to the service users. In discussion with the senior nursing staff, the chef, care workers one relative and members of the Board of governors, they were extremely proud of the high standard of care they provided to all service users in the home. This was supported by the service users spoken to and by the review of letters of thanks received by the home.

Only Registered Nurses are entrusted to administer medication and are requested to leave a sample of their signature which is dated, in the medication trolley. All service users have a recent photograph included in their personal folder and medication record, to reduce the risk of mistakes happening during medication administration. We were told that no service users on the day of the site visit was assessed as capable to self medicate. However, the home had a policy on self medication should this becomes necessary. This aspect of medication management was supported in discussion with the Senior nurse responsible for medications in the home. Medication records were checked and found to be correct as documented on the Medication Administration Record (MAR) sheet and in the Control Drugs Record book. We spoke with one relative on the day of the visit.

Most service users who were able to give an answer and visitor spoken to were happy with the level of care at the Home. One relation said, The nursing care is alright. If there is a problem, the Sister will sort it out. All staff seen were calm, reassuring and kind with some humour to service users. One service user said, Overall, the staff are fairly kind people. Another said, The staff are lovely. Another service users said, The staff are wonderful. They need a medal.

We observed that care workers wore name badges to enable visitors and service users with memory impairment to be sure of whom they are speaking with. We observed Service users being treated in a friendly but respectful manner by care workers. Service users spoken to rate the personal care they receive as very good. Service users unanimously said, We are treated with respect. They said the staff team are friendly and they attend all appointments accompanied either by staff or if their relative decides to accompany them. In discussion with service users they told us that they are treated with respect and dignity, and that they are able to make their own choice.

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

Service users lifestyles matched their needs and preferences and where possible they are able to maintain contact with family, friends and the local community. Service users are able to make choices in accordance with their abilities and are provided with a balanced diet in pleasant dining room. For those individuals who require support during meal time including those who have difficulty chewing or swallowing staff give assistance. Staff are discrete and sensitive to the feelings of the person they are giving support to.

Evidence:

The home ensures the activity staff along with outside entertainers manage the activities programme for the service users. The Senior Nurse Managers and staff in agreement with the service users and their relatives provide a range of activities based on the individual assessed and agreed needs, including their preferences, cultural beliefs and customs. The AQAA informs us that wherever possible relatives are encouraged to participate in the planning and carrying out of service users activities. Activities provided are age appropriate and include board game, various crafts, knitting, reminiscence therapy, sing, a, long, quiz afternoons, bingo and a wide range of board games. The home also provides outside visiting entertainers such as the Petting zoo, where the ponies stole the show as far as one service user can remember.

## Evidence:

The Board of governors supported by the AQAA and in discussion with staff informs visits to various places of interests such as a planned visit to a local newly opened state of the art airport has taken place and pub lunches are also another favourite for the service users. Boat trips on the Thames, booked sessions at the local bingo hall, use of Reminiscence Box borrowed from Chertsey museum with themes such as Seaside and the 50's were enjoyed by the service users. These visits are a result of communicating with and listening to the views of the service users. The home has invested in a Wii and from their links with a local secondary school, students undertaking sports leadership course were able to spend time with service users to develop individual plans and within a six weeks programme helped service users with using the Wii, and doing arts and crafts. We were told this was a great success and that service users agreed the Wii was the best. Two service users, staff and one director represented the nursing home at the Remembrance Day service at Sunbury War Memorial in November where the Home presented a wreath. In August the home ran a scheme "Sunbury Nursing Home Has Talent" to enable service users and staff to demonstrate their talents and this was culminated with the End of an Era Celebration on the 2nd October 2009 when they celebrated Sunbury Nursing Home's 77th birthday and the then Registered manager Mrs. White's 67 years of service to the home. Their final big event of the year was the annual Dinner and Dance which recently took place in the Conservatory.

We were told the home has good contact with religious denominations and Holy Communion is provided for all service users who would like to participate. In discussion with service users we were told the home respects those service users who wish not to participate in an activity on any given day. A record of each service users daily activity is kept by the activity co-ordinator. Activities are brought to those service users who are unable or unwilling to join the big group.

Service users told us visiting is open, and that they can entertain their guests in their bedrooms in private or in the spacious communal areas of the home.

Six of the service users spoken to said they had choice in their clothing and sometimes they receive help from their key worker. Service users also told us they sometimes go out shopping. On the day of inspection all service users were dressed appropriately for the weather.

We were told the Chef operates from a four week menu and there is always a choice of two hot meals per day at midday, or salad at midday or the service user can choose their own food e.g. omelet etc. One service user told us there is always a choice of



## Evidence:

two hot dishes for the evening meal, or we can choose to have sandwiches filled with our own choice. Morning coffee and afternoon tea is served daily and our visitors and guests are served the same as us. We observed jugs of fruit juices and squash with glasses were placed in the lounges whilst service users were present, and staff was seen offering drinks to service users. The inspector did not sample the lunch, but service users said the food was very good, tasty and the right amount. The inspector observed the presentation of the food was done in a way to stimulate appetite. A choice of squash or fruit juices were served with lunch, which was served in the dining room unless a service user requested to have their meal in their bedroom. We observed that there were table cloths on the dining table. Condiments were placed on the table to ensure service users could add any relish to their meal. We further observed there were menus available for service users or staff and when we asked both staff and service users what was for lunch, they were all able to say. We observed care workers interacting in a friendly but dignified manner with service users.

## 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.

The home has a satisfactory complaints policy and procedure and training in place that evidenced that service users and relatives concerns are listened to and acted upon. Robust Safeguarding adults policies are in place to protect the service users from abuse.

Evidence:

Three complaints were logged at the home since the last key inspection. Two of these have been resolved within the twenty, eight days period. One complaint which was not upheld has not yet been resolved. The Responsible Individual told us each member of the board of governors have a specific area of responsibility along with the senior nurse. They are in contact with service users on a daily basis and issues raised are dealt with immediately; this prevents any need for service users to complain. They are also visible in the home generally and all relatives and visitors to the home have contact with them if they require it. Service users and the one visitor spoken to said they have no need to complain, as they are able to discuss everything with the senior nurse. We observed the visitor discussing an issue with the senior nurse and this was dealt with immediately to the satisfaction of the visitor. In discussion with the senior nurse we were told all records of service user's and relatives complaints were logged with their outcome as this would demonstrate that the management of the home is open and transparent. In discussion with care workers they were able to discuss the home's policy and procedure on Safeguarding Adults and felt secure in the knowledge

## Evidence:

that if they had to use the whistle blowing procedure they would be supported. It was observed that the home's guest information notice board situated on the ground floor entrance of both buildings contained a complaints procedure and policy, whistle blowing policy and the statement of purpose for the benefit of all visitors to the home. We also noticed that information was also available in care workers own language, and in discussion with one board member we were told that this was done to enable staff whose first language was not English to be more fully involved in case there was an emergency. The home has received a number of complimentary letters and cards from relatives of service users, commenting in a positive way about the care their relatives received at the home.

A random sample of care workers training record demonstrated that care workers are being trained to undertake the duties of meeting the service users assessed needs, thereby protecting them from abuse. We were told all staff have criminal records checked prior to commencing employment. Staff are aware of the procedure for responding to suspicion or evidence of abuse or neglect. The policies and practises of the home ensure that physical and verbal aggression by service users are understood and dealt with appropriately. The home does not become involved with service users finance.

## 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 physical design and layout of the home enables service users to live in a safe and comfortable environment, which encourages independence, and protect their privacy and dignity.

Evidence:

The management and staff encourage service users to see the home as their own home. It presents as a comfortable, attractive Older building, part listed, and part modern which has all the specialist adaptations, needed to meet the service users needs. It was observed that call bells were left within reach of each service users and service users said the bells are answered promptly We observed this was true on the day f the visit. We also observed service users safety is promoted and there is suitable protection in the home that is being used for service users diagnosed with dementia. The home has attractive, secure secluded gardens. which are well maintained and there is good access to the gardens from various parts of the home. Some service users told the inspectors that they plan to go out daily weather permitting to enjoy the gardens but not now when it is so cold what with the snow and now rain. The inspector noted that adverse weather would not stop service users enjoying the garden, as the windows are low and wide enough to allow service users to view the gardens from their chairs. It was observed that service users were able to personalise their bedrooms with small items of furniture, paintings on the wall and many family photographs. We observed in several bedrooms the great care that was taken of

## Evidence:

service users personal clothing all hung or folded and stored in closed cupboards. Generally, the home presents as clean, safe, pleasant, hygienic and tidy. There was no mal odour detected on the day of the visit.

We observed rooms are furnished to a comfortable standard. The majority of the 76 rooms are for single occupancy; the 7 shared rooms are arranged so both occupants have their own individual and personalised space with curtains around each bed for privacy. Rooms are equipped with modern profile beds and most rooms are now fitted with overhead ceiling hoists. The rooms are centrally heated with radiators provided with appropriate safety guard.

The AQAA informs the home has improved their infection control measures with the installation of eleven Hands Free Dispensers for hand sanitiser, placed at strategic points around the home. They have continued to provide in-house training in food safety and infection control. Additionally one member of staff attended a training day on Infection Control arranged by the PCT and 8 catering and ancillary staff took the Level 2 Award in Food Safety in Catering. We were informed that following discussion with service users living in Weir House, the Drawing Room has been reorganised. The worn chaise lounge has been removed and the large square Victorian dining table has been replaced with more versatile round tables. The piano has been repositioned and the seating rearranged into more social groupings, and additional occasional tables have been obtained and a large flat screen TV has been purchased and installed and they have upgraded the TV aerial system.

Random review of care workers training record demonstrated they have had training in infection control and this was evident in the storage of waste and the cleanliness of the sluice, toilets and bathrooms. The AQAA informs us staff are trained on the safe disposal of clinical waste and are provided with protective clothing to minimise the risk of spreading infection. We observed staff wearing disposable gloves and aprons whilst undertaking tasks during the visit. In discussion with the one visitor on the day of the visit we were told the home is always fresh and clean.

## 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.

Staff in the home are trained, skilled and are in sufficient numbers to fulfil the aims of the home and meet the changing needs of the service users. The training arrangements are robust and the recruitment procedure satisfactory ensuring service users are protected.

Evidence:

The staff rota demonstrated the number and grade of staff on duty to provide care and attention to service users for any twenty four hour period was suitable to meet the assessed care needs of the service user according to the Responsible Individual. The home has a programme of planned training in place and all members of staff have an individual training record. The AQAA informs just over 25% care workers have attained the National Vocation Qualification at Level 2 (NVQ L2) or above, with two directors and three nurse managers achieving the registered managers award NVQL4. Over 75% of staff have undertaken the induction training recommended by Skills for Care. We were told Care workers are encouraged and enabled to undertake developmental training as well as the mandatory training.

All newly appointed staff undertakes the Skills for Care Common Induction programme. The home ensures that staff undertakes the mandatory training with yearly updates as necessary to maintain their competency to fulfil their duties. This was evidenced through discussion with the care workers and review of carers training

## Evidence:

records. All members of staff spoken with said that their training was adequate for their tasks and was very much ongoing. One staff member said that they felt they had adequate training to date but was always learning on the job. This staff member stated that when dealing with service users with dementia, qualities should include giving reassurance and to have humour when appropriate. Another member of staff who had been in the home for a short time informed us that they use distraction tactics if a service user is worried about something. Another care staff said that they had done the moving and handling course, fire and customer service courses, and pressure area care. The AQAA informs the home is registered with City and Guilds as a training and assessment centre and is currently registered to assess both NVQ Level 2 in Health and Social Care and the Assessor Units.

The AQAA informs all care workers are Criminal Records Bureau (CRB) and Protection of Vulnerable Adults (POVA) checked prior to commencing employment, and they are in receipt of terms and conditions of employment, as evidenced in their randomly selected files, which contained the information required under care Homes Regulations 2001 Schedule 2. We observed supervision records were up to date during random sampling of care workers files. Documented evidence indicated that the home ensures that care workers receive the mandatory training with yearly updates as necessary to maintain their competency to fulfil their duties. This was evidenced through discussion with care workers. We observed a calm atmosphere in the Home and no evidence observed of staff or service user being rushed. We also observed service users in the main dining area were not rushed in eating their meal. Staff walked in an unhurried manner.

## 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.

The home has an understanding of the key principles and focus of the service, based on organisational values and priorities. They work to continuously improve services to the service users. They provide an increased quality of life for the service users with a strong focus on equality and diversity issues and promoting human rights especially in the areas of dignity respect and fairness. There is also focus on person centred thinking with service users shaping service delivery.

Evidence:

The registered manager of the home has retired and the four working directors and three nurse managers have formed a management committee to cover the role until such time as a new registered manager is appointed. This has provided a strong team with each member having at least fourteen years experience in a managerial role in the home and five of the team holding the NVQ level 4 Registered Managers Award. The nurse managers are all registered nurses. All members of the management team ensure they update their knowledge and skills by attending training courses and by private study and are aware of the importance of keeping up to date with new



## Evidence:

initiatives and current best practise guidelines.

The management committee has clear lines of accountability with the Responsible Individual who is in daily contact with the team and the home. We were told Sunbury Nursing Home management team operates an 'open door' policy, and welcomes comments and suggestions from service users, their relatives, or any other interested parties. Monthly meetings takes place with Residents and Relatives to provide home information updates, explain new events or policies and invite comments. We were told the home follows the Sunbury Nursing Home in-house audit programme covering areas such as infection control, resident care, medication, catering, documentation and health & safety. These audits are completed by an allocated member of of the management team. Actions and outcomes are reviewed by board of governors and Responsible Individual and a documented action plan will be produced accordingly. The AQAA, and in discussions with the Responsible individual informs the financial interests of the home are protected by robust procedures in relation to financial management by an accountant and the Board of Directors and supported by the Head Office Accounts Team. Sunbury Nursing Home Ltd is a private family owned and run company since it's inception 77 years ago, and thus the company has demonstrated sound financial acumen.

The health & safety of service users and staff are promoted and protected by training and the policies and procedures that are in place in the home. Regular staff meetings are held and minuted and records kept by the manager. Staff training is audited by the Training Manager. They present an open and friendly atmosphere for service users and all visitors to the home Comments, concerns, praise are listened to and respond to, to ensure that the best interests of service users are considered. The home adheres to their Policy and Procedures for management of financial procedures thus safeguarding the financial interests of the Service users. Staff supervision is carried out as per their Policy and Procedures to ensure competency and development. All records within the home are kept securely and service users have access to their personal records should they wish to see them and when carrying out care reviews to ensure that their input is recorded.(Care plans are kept in each service users' bedroom). The health, safety and welfare of service users is assured at all times , mandatory training in moving and handling, fire safety, first aid, food hygiene, COSSH and infection control is provided on induction and thereafter according to policy and procedure. Electrical testing, maintenance of boilers and heating systems, water temperature monitoring, monitoring of Legionella, security of the home, RIDDOR reporting and overall compliance with all relevant legislation ensure that the health, safety and welfare of both the Service users and staff are promoted and protected. Reassurance given and where necessary appropriate action taken.

Evidence:

Random sample of care workers training files demonstrated that up to date and relevant training were carried out by care workers to protect service users health, welfare and safety. Throughout the service there is a highly evolved understanding of the equality and diversity needs of the individual service users. Care workers are confident and knowledgeable in delivering high quality outcomes for service users in the areas of age, sexuality, gender, disability, race equality and diversity and belief. Service users at this home represents the racial mix of the area in which the home is situated.

The AQAA informs the homes' policies revealed that the homes policies are produced recently.

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

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