

Key inspection report

Care homes for adults (18-65 years)

Name:	Old Oak Road, 20
Address:	20 Old Oak Road Old Oak Road Acton London W3 7HL

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 is meeting the needs of the people who use it. We give a quality rating following a full review of the service. We call this full review a 'key' inspection.

Lead inspector:	Date:							
Sheila Lycholit	2	2	0	3	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 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 mission of the Care Quality Commission is to make care better for people by:

- Regulating health and adult social care services to ensure quality and safety standards, drive improvement and stamp out bad practice
- Protecting the rights of people who use services, particularly the most vulnerable and those detained under the Mental Health Act 1983
- Providing accessible, trustworthy information on the quality of care and services so people can make better decisions about their care and so that commissioners and providers of services can improve services.
- Providing independent public accountability on how commissioners and providers of services are improving the quality of care and providing value for money.

Reader Information

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Internet address	www.cqc.org.uk

Information about the care home

Name of care home:	Old Oak Road, 20
Address:	20 Old Oak Road Old Oak Road Acton London W3 7HL
Telephone number:	02087401296
Fax number:	
Email address:	info@yarrowhousing.org.uk
Provider web address:	

Name of registered provider(s):	Yarrow Housing
Name of registered manager (if applicable)	
Ms Martyne Rosaria O Reilly	
Type of registration:	care home
Number of places registered:	6

Conditions of registration:		
Category(ies) :	Number of places (if applicable):	
	Under 65	Over 65
learning disability	6	0
Additional conditions:		
The maximum number of service users who can be accommodated is: 6		
The registered person may provide the following category of service only: Care Home only - Code PC to service users of the following gender: Either whose primary care needs on admission to the home are within the following categories: Learning disability - Code LD		

Date of last inspection									
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Brief description of the care home
20 Old Oak Road is a registered care home providing accommodation and personal care for six men and women with a learning disability. At the time of this inspection, two men and four women were living at the home. The home is located in a residential area of Acton and there are good transport links with the community facilities in Hammersmith and Shepherds Bush. Shepherd's Bush Housing Association owns the property and the care and support is provided by Yarrow Housing Limited, a not for

Brief description of the care home

profit company.

The home has six single bedrooms, which are of a good size and is fully accessible, with a lift to the first floor.

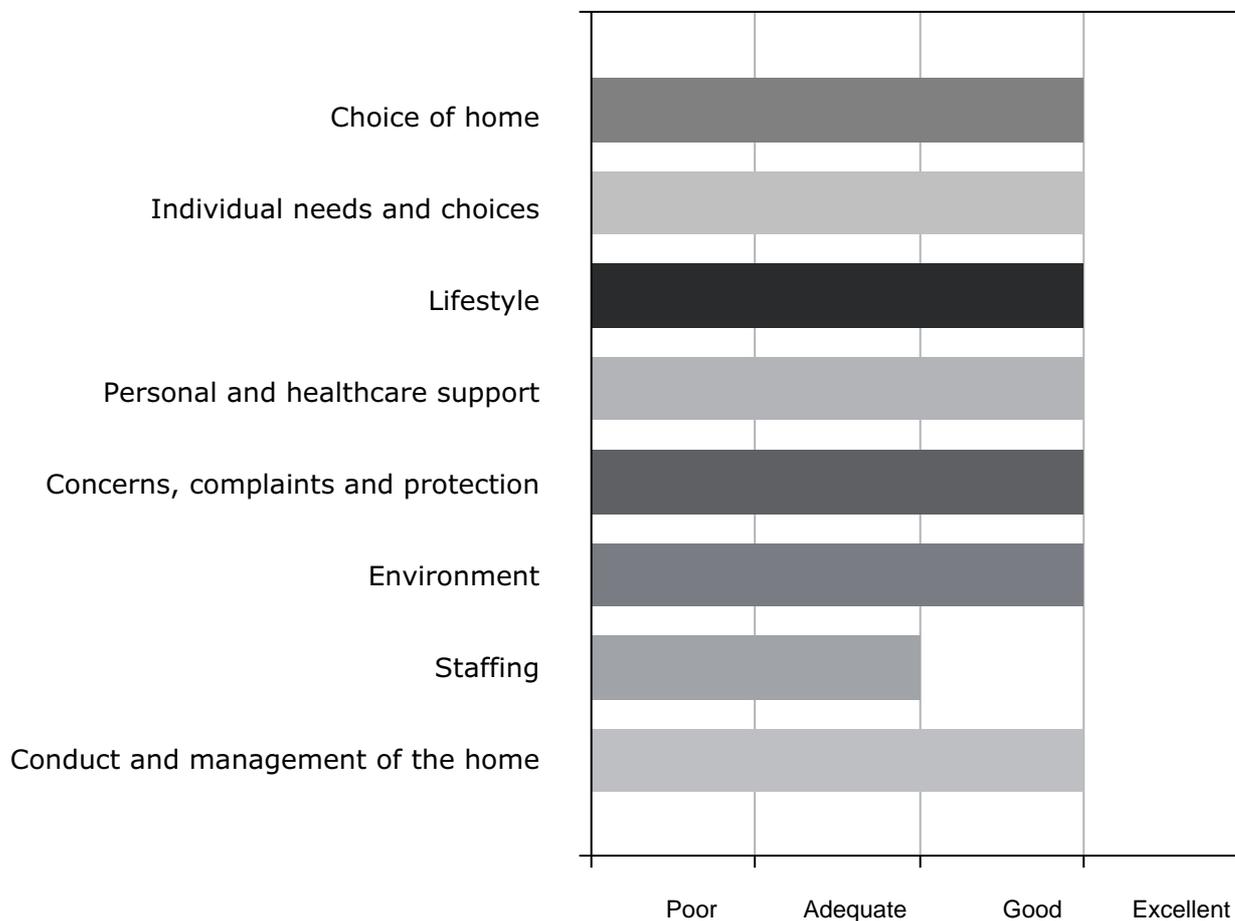
Summary

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 visit took place on Monday 22nd March 2010 from 10.50am until 2.50pm. At the start of the visit all residents were at home, in the dining area or in their rooms. One person was in bed and was supported to get up soon after the start of the visit. The Day Activities Officer was on duty on his own and was joined after about 30 minutes by a Support Worker who had gone to do some essential food shopping for the house.

The Registered Manager, who is in an acting position at head office, and the Acting Manager had completed an Annual Quality Assurance Assessment (AQAA) in detail before the inspection. Telephone discussion took place with the Acting Manager, who provided additional information, following the inspection.

Residents and staff were spoken with during the visit.

What the care home does well:

The service provides individualised support to people with a learning disability. Good use is made of Yarrow Housing's commendable multi media initiative in developing person centred planning and in supporting residents' communication. Residents' interests are encouraged and supported with a varied activity programme for each person. The service has two activities officers, although one of the posts was vacant at the time of the inspection. Residents' independence is encouraged, with appropriate risk management. Staff manage the differing needs of residents well and work closely with the multi professional learning disability team and health care colleagues. The house provides a pleasant, spacious and accessible environment.

What has improved since the last inspection?

The kitchen has been refurbished, to meet the needs of residents, including a low level work top. Some redecorating has been carried out, although this has largely been undertaken by staff.

What they could do better:

Steps need to be taken to ensure that good staffing levels are maintained and that residents' care and planned programmes are not compromised through staff vacancies and absences. Staff must have access to regular updates of their core training and the percentage of staff achieving at least NVQ2 needs to be increased. An expansion of the training programme in 2010 means that opportunities for staff to achieve qualifications as well as refresh their core training is likely to improve. Visits on behalf of the provider should be undertaken monthly as required by the regulations.

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

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

Details of our findings

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Choice of home

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

People are confident that the care home can support them. This is because there is an accurate assessment of their needs that they, or people close to them, have been involved in. This tells the home all about them, 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 **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

Information is available about the service in an accessible format, although this needs to be updated.

Pre-admission assessments are thorough and involve the prospective resident.

The service provides residents with clear and comprehensive licence agreements.

Evidence:

Information about the service was seen on two of the three individual files looked at. In addition each file contained an up to date licence agreement, which included a range of information about the service, including how to make a complaint. The service user's guide was less detailed than at other Yarrow Housing services and needed to be updated to include current staff names and management arrangements. Pre-assessment information for the most recently admitted resident, who moved to the house in November last year, was seen. This showed that a thorough assessment had taken place, with the involvement of the resident, the multi professional learning disability team and staff at the home. Discussion with the Manager confirmed that the resident had spent time at the home, including two over-night stays before moving in. It is recommended that a written plan is developed with any prospective resident

Evidence:

regarding moving to the home, which details visits, including overnight stays and dates when decisions will be made.

The resident who had recently moved to the home confirmed that he had settled in and had received good support from staff.

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.

Care plans and PCPs are well developed, using multi media and showing the involvement of the resident.

Evidence:

The individual files and PCPs of 3 service users were looked at. PCPs contain a range of photos confirming people's involvement in activities and on holiday and showing family and significant people in residents' lives. Placement and PCP reviews are up to date and action plans are on file detailing steps to be taken to meet objectives and goals agreed. Without regular summaries from key workers it was difficult to assess, other than from residents' logs and the communication book, progress made in implementing action plans. It is recommended that key workers complete monthly summaries as at other Yarrow Housing homes.

Risk assessments are up to date and cover identified risks for each resident. Staff have taken care to support residents' independence, while minimising risk.

A number of residents are supported to handle their own money. Records for two people who can handle some aspects of their finances were looked at. Both records

Evidence:

were in good order, showing that residents signed for cash and a running balance was kept and regularly checked. Receipts were seen for payments made on behalf of residents.

Staff state that a regular meeting with residents takes place each weekend, when the menu for the next week is chosen and other issues are discussed. However no record of these meetings is kept. Staff should ensure that key issues from the meetings are noted in an accessible format to provide a record and to ensure that issues raised are followed up.

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.

Residents are supported to take part in a wide range of activities in the community.

Evidence:

Activity plans and daily logs show that residents are supported to take part in a range of activities, including attending specialist services, such as The Gate, Yarrow Housing's own day service and Hammersmith and Fulham's services and to pursue individual interests. Photos displayed in the house show residents enjoying outings and holidays with staff. The home has two day services officers, one of whom was on duty during the inspection visit and had compiled the activity plan for the week. The other day services officer post is vacant.

Residents receive good support from Yarrow Housing's multi media officer to develop communication skills and increase their involvement in care planning.

Relationships with families and friends are supported, with families encouraged to attend reviews. Activity plans indicate that friends are encouraged to visit and to keep

Evidence:

in touch.

Residents take part in preparing meals and drinks and the newly installed kitchen has a low height work top making it easier for some residents to use. Menus are displayed in a pictorial format and are displayed in the kitchen. One resident confirmed that he and other residents choose the menu for the week. The fridge contained a plentiful supply of fresh food and fruit was available for residents to help themselves.

Individual records and discussion with the Manager confirm that attention is paid to residents' nutritional needs. Residents' weight is monitored and staff have been successful in maintaining the weight of some residents whose low weight had previously been of concern. The Manager confirmed that the weight of one resident who uses a wheel chair is taken at the Health Centre but is not recorded at the home.

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.

Residents receive good support with personal care from staff who know their needs. Staff work closely with the multi professional learning disability team and health care colleagues to ensure that residents health care needs are met. Procedures are in place for the safe handling of medication.

Evidence:

Support guidelines for residents were seen, which gave detailed information about how the resident wished to be supported with personal care. The guidelines for one resident, while clearly produced by staff who knew her needs very well, had not been updated since August 2008. In the meantime, aspects of her care had changed, in particular the use of medication in the event of a seizure.

Each resident has a health action plan in an accessible format, which show that staff take steps, with health care colleagues to ensure that residents' health care needs are identified. Records of health care appointments confirm that residents are supported to attend regular hospital, GP and other appointments. Delays in obtaining dental treatment were discussed with the Manager, as records showed that two residents who both had teeth and gum problems, had not visited a dentist or hygienist since July 2008. The Manager stated that there had been delays in obtaining dental

Evidence:

appointments from the Community Dental Service but that appointments for four residents had now been made for April 2010.

Medication is safely stored in a locked cabinet. A measured dosage system is used, supplied by a local Pharmacy. MAR sheets seen were up to date and fully completed. Reasons for administering medication prescribed 'as required' were given on the reverse of the MAR sheet. The temperature of the medication cupboard is checked weekly.

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.

The home has a clear complaints procedure in an accessible format.

Staff are aware of safeguarding procedures and take steps to ensure the welfare of residents.

Evidence:

The Manager states in the AQAA that there have been no complaints about the service in the previous 12 months. The complaints record shows that the last recorded complaint was in December 2006. It is recommended that ways of capturing lower level concerns and complaints are developed to ensure that any concerns are elicited at an early stage and to contribute to the home's quality assurance system.

The AQAA confirms that there have been no safeguarding referrals in the previous 12 months. Staff attend training in safeguarding as part of their induction, although as discussed under standard 25 a number of staff have not had the opportunity to update their core training. Records, including risk assessments, show that staff are aware of the vulnerability of residents and take steps to ensure their welfare.

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.

The building provides a pleasant environment, which meets people's needs. Residents' rooms are personalised to a considerable extent, reflecting their interests.

A good standard of cleanliness is maintained.

Evidence:

20 Old Oak Road is a semi detached house in a residential road, which is indistinguishable from its neighbours. The house is on a bus route and is close to local shops and services in Shepherds Bush. There is a good-sized sitting /dining room, with access to a well kept garden. There is garden furniture for residents' use. All bedrooms are single rooms , with two on the ground floor and four on the first floor. The home has sufficient bathrooms and lavatories on each floor. All parts of the house are accessible, with a lift to the first floor. The kitchen was refurbished at the beginning of 2010 and some decorating has been done since the last inspection. Staff stated that they were doing some decorating themselves in their own time because of the delays in Yarrow Housing or Shepherds Bush Housing Association getting work done.

Residents' rooms are personalised, with photos and possessions reflecting people's individual interests. Residents have a range of specialised equipment to meet their assessed needs, including adjustable beds. The bedroom of the most recently admitted resident who moved to the home in November 2010 was a little stark and

Evidence:

contained a spare bed that was propped in front of the window making the room rather dark. The Manager explained that the resident had been assessed as needing an adjustable bed, which was provided and that the spare bed would be removed shortly. Staff on duty confirmed that this resident's bedroom will be redecorated to his taste and his possessions displayed or new pictures purchased.

The building was clean and tidy at this unannounced visit. Although the cleaner was absent, staff were maintaining a good standard of cleanliness. The home has a policy on infection control and mobs and cleaning equipment was seen to be colour coded. Staff wore protective clothing while cleaning.

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

Staffing levels at the home have been recently eroded by a number of factors, including acting arrangements elsewhere in the organisation and staff sickness.

Yarrow Housing has a sound recruitment procedure.

Access to staff training has recently improved but the staff team currently has a low percentage of staff who have achieved NVQ2 or above.

Evidence:

On the day of the inspection there were two members of staff on duty, instead of the four staff originally on the rota. This had an impact on the activity plans for residents, which had to be amended. In addition to supporting the six residents and preparing lunch and shopping for essential supplies, the two support staff were also having to cover the duties of the cleaner who was also off sick. One of the staff on duty was also working a 12 hour 8am to 8pm shift. The staff team has two vacancies, a RSW on long-term sick leave (who is shortly returning) and acting arrangements, which mean that one of the Assistant Manager's posts is not covered. In discussion the Manager stated that Yarrow Housing is holding interviews for RSW posts in April and she is hoping to be allocated suitable staff from this round of recruitment.

Support to residents at night is provided by 1 night staff on waking duty and 1 member of staff sleeping in.

Training records show that staff have access to a range of relevant training, although

Evidence:

not all staff core training is up to date. The Manager confirmed that the number of training days has been increased to ensure that staff who need to update modules of core training can attend.

Yarrow Housing has a sound recruitment procedure. Staff files are kept at Yarrow's head office, where a sample of files of staff from various services were checked in December 2009 and found to be in good order, with all checks undertaken. One of the staff on duty who was the most recently appointed member of staff confirmed that she had received a structured induction and was well supported in her work.

The AQAA shows that 4 out of 11 support staff have achieved NVQ2. The Manager and a member of staff on duty said that access to NVQs had previously been limited but has much improved and all new staff are enrolled on NVQ2 following completion of their probationary period. It is expected that the currently low percentage of staff achieving NVQ2 will have improved considerably later in the year, when a number of staff will have completed all modules.

Minutes of staff meetings show that they take place monthly. Supervision rotas displayed confirm that staff are also supported by regular supervision.

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.

Arrangements are in place to ensure the competent running of the home in the absence of the permanent Manager.

Yarrow Housing has a range of quality assurance systems, which seek residents' views and involve them in the development of the service.

Evidence:

The Acting Manager, who is experienced in working with people with a learning disability and who knows the residents well, confirmed that she is applying for registration with CQC. She is currently undertaking NVQ4. It is clear from the visit to the home and discussion with the Manager that she has identified issues such as staffing levels and staff training and has conveyed her concerns to senior staff. Staff meetings and the communication book indicate that the Manager has tried to ensure good communication within the home.

Yarrow Housing has developed a range of measures to seek the views of people who use their services and to involve them in the development of the service. Completed survey forms were seen on residents files, which are collated by one of the Service Manager and a report produced. Staff confirmed that a number of residents attend the

Evidence:

regular 'have your say' meeting arranged for all Yarrow Service users. Information and records seen during the visit confirmed that steps are taken to protect the health and safety of residents and staff. Accidents and incidents are recorded in detail. The risk assessment of one resident who has had a number of falls was up to date and guidance for staff was seen on file, although his risk assessment was not routinely reviewed following a fall . Checks of hot water temperatures show that the hot water at the bidet in the first floor bathroom is regularly recorded at 50C and was very hot on the day of the inspection visit. The Manager confirmed that this has been reported and checked on a number of occasions but the problems has not been resolved.

The record of visits on behalf of the provider indicated that visits are not taking place as required, with no reports on file for visits in October, November and December 2009.

Are there any outstanding requirements from the last inspection?

Yes

No

Outstanding statutory requirements

These are requirements that were set at the previous inspection, but have still not been met. They say what the registered person had to do to meet the Care Standards Act 2000, Care Homes Regulations 2001 and the National Minimum Standards.

No.	Standard	Regulation	Requirement	Timescale for action

Requirements and recommendations from this inspection:

Immediate requirements:

These are immediate requirements that were set on the day we visited this care home. The registered person had to meet these within 48 hours.

No.	Standard	Regulation	Requirement	Timescale for action

Statutory requirements

These requirements set out what the registered person must do to meet the Care Standards Act 2000, Care Homes Regulations 2001 and the National Minimum Standards. The registered person(s) must do this within the timescales we have set.

No.	Standard	Regulation	Requirement	Timescale for action
1	1	5	<p>The service user's guide would benefit from more detail and needs to be updated.</p> <p>So that service users have full and current information about the service.</p>	30/04/2010
2	8	12	<p>Residents' meetings should be recorded in an accessible format and displayed in the house.</p> <p>To confirm residents involvement in decision making.</p>	30/04/2010
3	18	15	<p>Support guidelines should be regularly reviewed and updated.</p> <p>To ensure that all staff, and especially new staff, are aware of how to provide support.</p>	31/05/2010

Statutory requirements

These requirements set out what the registered person must do to meet the Care Standards Act 2000, Care Homes Regulations 2001 and the National Minimum Standards. The registered person(s) must do this within the timescales we have set.

No.	Standard	Regulation	Requirement	Timescale for action
4	32	18	<p>Steps must be taken to ensure that a higher percentage of the staff team has achieved at least NVQ2.</p> <p>So that staff have the skills to meet residents' needs.</p>	30/06/2010
5	33	18	<p>Sufficient staff must be on duty at all times to meet residents needs and to ensure that agreed action, such as activities, take place.</p> <p>In order that residents receive sufficient support.</p>	30/04/2010
6	35	18	<p>Staff must complete mandatory training within 6 months of starting work and attend regular refresher training.</p> <p>So that staff core skills are up to date.</p>	31/05/2010
7	42	13	<p>Steps must be taken to ensure that all hot water accessible to residents is at a safe temperature.</p> <p>To reduce the risk of accidental scalding.</p>	30/04/2010
8	43	26	<p>Visits on behalf of the provider must take place at least monthly, with a report of the visit available.</p>	30/04/2010

Statutory requirements

These requirements set out what the registered person must do to meet the Care Standards Act 2000, Care Homes Regulations 2001 and the National Minimum Standards. The registered person(s) must do this within the timescales we have set.

No.	Standard	Regulation	Requirement	Timescale for action
			To ensure that the provider has up to date information about key aspects of the service.	

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	4	It is good practice for a transition plan to be developed with prospective residents, detailing the process by which they will move to the service.
2	6	It is recommended that key workers complete monthly summaries of significant events, work undertaken and progress in implementing action plans for each resident.
3	17	A record of the weight of each resident should be recorded, even if checked elsewhere.
4	22	Ways of recording concerns and lower level complaints should be developed to ensure that issues are addressed at an early stage and to contribute to the service's quality assurance system.
5	42	While residents' risk assessments seen on file were regularly reviewed, it is recommended that they are updated following any accident or incident.

Helpline:

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Email: enquiries@cqc.org.uk

Web: www.cqc.org.uk

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