



Making Social Care
Better for People

Inspecting for better lives

Key inspection report

Care homes for older people

Name:	Carpenter Place
Address:	103 Oldfield Road Sparkbrook Birmingham West Midlands B12 8TN

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

Lead inspector:	Date:
Sally Seel	3 0 0 3 2 0 0 9

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

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

Outcome area (for example Choice of home)

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

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

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

This is what people staying in this care home experience:

Judgement:

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

Evidence:

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

Copies of the National Minimum Standards – Care Homes for Older People can be found at www.dh.gov.uk or bought from The Stationery Office (TSO) PO Box 29, St Crispins, Duke Street, Norwich, NR3 1GN. Tel: 0870 600 5522. Online ordering from the Stationery Office is also available: www.tso.co.uk/bookshop

The Commission for Social Care Inspection aims to:

- Put the people who use social care first
- Improve services and stamp out bad practice
- Be an expert voice on social care
- Practise what we preach in our own organisation

Our duty to regulate social care services is set out in the Care Standards Act 2000.

Reader Information

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Internet address	www.cqc.org.uk

Information about the care home

Name of care home:	Carpenter Place
Address:	103 Oldfield Road Sparkbrook Birmingham West Midlands B12 8TN
Telephone number:	01214402823
Fax number:	01214402520
Email address:	
Provider web address:	

Name of registered provider(s):	Moseley & District Housing Association
Name of registered manager (if applicable)	
Samantha Adele Price	
Type of registration:	care home
Number of places registered:	35

Conditions of registration:		
Category(ies) :	Number of places (if applicable):	
	Under 65	Over 65
old age, not falling within any other category	0	35
Additional conditions:		
That Samantha Price successfully undertakes the Registered Managers Award or equivalent by June 2006.		
The home may accommodate up to 5 service users who fall between the ages of 55 and 65 who require care for reasons of physical disability. (5PD)		

Date of last inspection								
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Brief description of the care home
Carpenter Place is a large two storey, purpose built residential facility providing bedroom, lounge, fitted kitchen and bathroom. There are four flatlets that can accommodate two people. Service users are encouraged to personalise their own flatlets with their belongings. Furniture is provided for those requiring it. Flatlets are furnished to meet the needs of the service users and are decorated as required. Service users can choose to take meals on a full board or part board basis. They can

Brief description of the care home

prepare their own breakfast and teas in their flatlets if they wish. There are some respite facilities available. Communal facilities consist of lounge, dining room, hairdressing salon, bathing/showering facilities, laundry, main kitchen and small shop. There is ample parking to the front of the building and very pleasant enclosed gardens to the rear with lawns, shrubs and seating for the service users. Copies of the inspection report are available from the home. Interested parties should make contact with the home to gain correct costs for living at Carpenter Place.

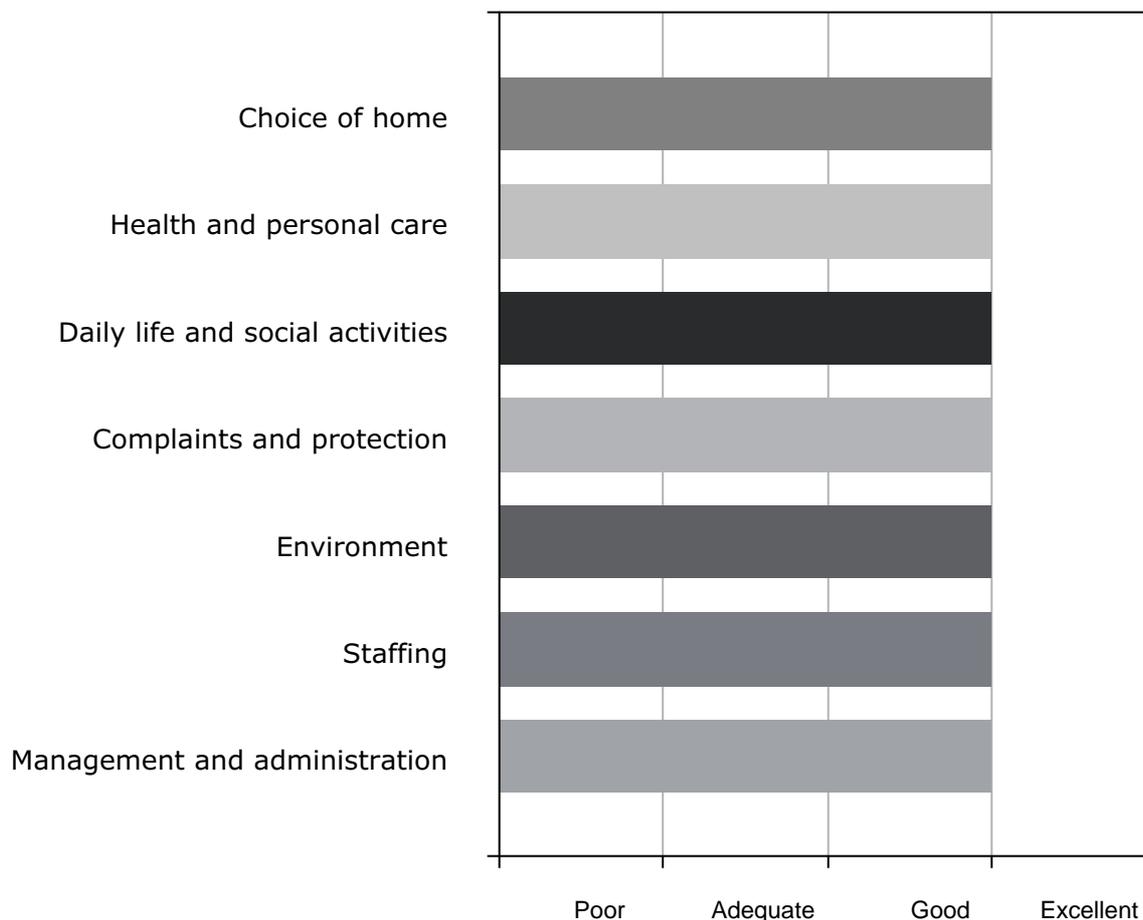
Summary

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:

One inspector undertook this fieldwork visit to the home, over a day period. The registered manager, deputy manager and staff members assisted us throughout. The home did not know that we were visiting on that day.

Information was gathered from speaking to and observing people who lived at the home. Two people were 'case tracked' and this involved discovering their experiences of living at the home. This was achieved by meeting people or observing them, looking at medication and care records and reviewing areas of the home relevant to these people, in order to focus upon outcomes. Case tracking helps us to understand the experiences of people who use the service. Staff files, training records, health and safety documentation and reports about accidents and incidents in the home were

reviewed in the planning of this visit.

Five completed surveys were completed and returned to the Commission for Social Care Inspection, (CSCI). Information from these sources was used when forming judgements on the quality of service provided at the home. The people who live at this home have a variety of needs. We took this into consideration when case tracking two individuals care provided at the home. For example, the people chosen have differing care needs.

The atmosphere within the home is inviting and warm and we would like to thank everyone for his or her assistance and co-operation.

What the care home does well:

The home are continually looking at ways of improving their practices to ensure when people visit for the first time they are made welcome and staff are on hand to provide reassurance as it is recognised that choosing a home can be a stressful time.

People who live in the home are assigned a key worker who gets to know the person, what their preferences and dislikes are, and the individual has a familiar dedicated person to voice their concerns or any issues to.

There is evidence that the home receives regular visits from health professionals and it takes a proactive approach to individuals receiving foot and eye care as is required so that people can be confident that their health and care needs are met.

People who live in this home have expressed their enjoyment of the meals they receive and staff told us that individuals cultural needs are respected and provided for in the choice of meals that are offered by the chef.

The home have good systems in place to ensure that people who live in the home are able to express their views which are listened to and actions taken so that people are able to influence how the home is run.

Staff have shown that they are knowledgeable about the needs of the people who live in the home so that people can feel reassured that their needs will be met appropriately.

The registered manager and assistant manager are striving to ensure improvements continue to be made in the home, particularly a stable staffing team, ensuring that they have the best interests of people who live in this home at heart.

What has improved since the last inspection?

The assessments of care needs, care planning and risk assessments have been improved to ensure they contain sufficient details so that people living at the home can be reassured that their needs will be met in the way they prefer and at times suited to them. Risk assessments have instructions so that staff can maintain individuals safety at all times whilst not restricting people's choices.

A dedicated activities co-ordinator has now been employed at the home and we were told that they are visiting individuals in their flats so that social stimulation and the participating in activities is offered to all.

All details of investigations that have been undertaken and or that are ongoing can be inspected at the home so that we can ensure proper processes are undertaken.

We were shown and told that ongoing improvements to the home are being considered and completed to ensure people live in a well maintained and comfortable environment.

Staffing levels have improved and the registered manager acknowledges that this needs to be maintained by ensuring recruitment is completed in a timely manner so

that any vacancies can be filled and people living in the home are provided with consistent care at all times.

What they could do better:

Preadmission assessments need to reflect that people who are considering living at the home have been involved in their own assessments of needs so that they are reassured they are able to have a voice in how they would like their needs to be met and at times to suit them prior to living at Carpenter Place.

Plans must continue to ensure a stable staff team so that individuals are receiving care in a consistent manner at time suitable to them.

The registered manager must ensure that an assessment is completed to ensure that the dependency levels of individuals meet the staffing ratio at all times and is available for inspection. This will make sure that people living in Carpenter Place are receiving care in a timely manner and there are enough staff on duty to meet individuals needs.

The registered manager must ensure when completing the AQAA it is done with accuracy in mind so that it does not mislead.

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

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

Details of our findings

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.

The Statement of Purpose and Service User Guide provide relevant information about the home to enable people to make a choice about if they want to live there.

Individual's needs are assessed and trial visits and stays are welcomed so people know whether their needs can be met before they move in.

Evidence:

The statement of purpose and service user guide tell us, 'Carpenter Place has been specifically designed and built to provide secure housing and care for older people who need support to continue to lead independent lives. There are 28 single flats and 4 double flats all of which are self contained'. Also in the statement of purpose and service user guide it gives an idea of what individual's can expect if they choose to live at Carpenter Place. It informs people, what the home is like inside, how people's needs are assessed and met, staffing, activities and how to make a complaint. However, it is unclear as to whether this information is available in large print, Braille and or using

Evidence:

pictures to make sure that all people are able to read and understand its contents. This is particularly important as people who live at this home have a wide range of needs, such as, visual impairments and learning disabilities.

People considering living at Carpenter Place are able to come and look around the home, meet staff and other individual's who live there. In addition to this individual's are able to have planned trial stays at the home. In one care record it says, 'Visited prior to living here and enjoyed her stay met residents and other staff to remain independent and have support' and another record, 'Viewed with his sister and felt that he could continue to have a quality of life and be happy here'. We were also told that people living in the home volunteer to be with the person when they spend some time there. This means people get an idea about what the homes environment is like and whether they feel their care needs will be met if they move there. Also in the care records we looked at we found brochures about the home were sent to people as an introduction to the home to help individual's make up their minds about Carpenter Place.

In the care records we looked at we found people's needs are examined to make sure the homes environment and staff are able to meet these before individual's move into the home. We found the preadmission assessments we looked at were signed and dated by the registered manager when completing the assessments. This did not tell us how individual's were able to have their say in what their needs were and how they would like these to be met. Therefore we recommend that preadmission assessments reflect how individual's are involved as it is important that people's preferences are made clear prior to them moving into the home. This will mean individual's can be reassured that the care they receive meets their needs.

People living in Carpenter Place told us in their completed surveys:-

'I came out to view the home before making my decision'.

'We only walked around and that was it'.

'I had to come here very quickly'.

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.

The health and personal care that people receive is based on their individual needs ensuring their independence is promoted. Medication systems ensure individual's receive medication as prescribed.

Evidence:

We looked at two people's care plans and risk assessments in some detail. Each person has a comprehensive care plan. This is an individualised plan about what the person is able to do independently and states what assistance is required from staff in order for the person to maintain their needs. For example, in one care record it stated, 'I am able to wash and dress myself and I do this everyday, staff help with a bath as I find it difficult to get in and out on my own' and in another we found, 'I am able to wash and dress myself with some assistance from staff. Staff also help me with a shower twice a week, I visit the hairdresser when I need my hair trimming'. This shows that people's independence, dignity and preferences are recognised and promoted.

Evidence:

People have key workers who get to know the person, their likes and dislikes, and individual's are able to share their concerns or worries with a familiar person. The care records we looked at reflected individual's health conditions, physical abilities, preferences and dislikes. In the AQAA it confirms, 'Have good systems to identify health needs and liaise with professionals such as doctors, district nurses, incontinence advisors, occupational therapists, opticians, dentist, dietician, falls clinic and so on, which ensures a service user needs being maintained'. We found this to be the case when we viewed care records which documented visits had been made to the home by doctors, district nurses and chiropodists to attend to individual's health and care needs. Care records also highlighted when people's health and care needs had been reviewed with any appropriate actions that needed to take place which is an improvement made since the homes previous inspection. For example, in one care record it was noted the person needed to be referred to 'falls clinic' due to the individual experiencing some falls and in another it said, 'I have a private chiropodist that visits me every 8 weeks'.

Risk assessments have improved since the homes last inspection visit. For instance, if people living in the home required any equipment to help staff to move them into/from chairs and beds the risk assessment would give staff instructions on how this should be done to ensure the person's safety is maintained. In one care record it advised staff how individual's required bathing assistance, such as, '1 care staff to oversee transfer onto shower chair ensuring brakes on. 1 care staff to ensure water temp is checked prior to showering is between 38 - 42c. 1 care staff to ensure vicinity is free from any obstacles'. Risk assessments were also in place to give staff instructions on how to support individual's who have some behaviour difficulties so that personal safety is respected and people are emotionally supported.

People spoke about the care that they received:-

"Care I receive is very good". "I like carers and they do what I ask".

We observed people walking around the home freely, some individual's required walking frames to assist them, others needed a wheelchair and some people required supervision when walking. The home does have a hoist which is a piece of equipment that assists staff in moving people who cannot stand and walk safely. Whatever a person's abilities staff were observed assisting individual's in a respectful manner ensuring people's dignity was maintained at all times throughout the day. We were told by one staff member, 'The staff always meets the needs of residents and gives them choices'. Two surveys received from people living in the home confirmed this, 'When I ask them to do anything, they always did it as quick as they can' and 'I can do what I want and I am not restricted'.

Evidence:

The care records that we sampled showed people are weighed on a monthly basis and sometimes this is done more frequently and recorded. We also found nutritional assessments are completed to ensure people are receiving the support and advice they require to meet their dietary needs. This should ensure people's weights are looked at regularly and any weight loss recognised in a timely manner as this could signify that an individual may have an underlying medical condition that needs treatment and/or further investigations.

The medication trolley which securely holds individual's medication looked clean and well organised. We sampled the medication of two people and found that all medication was recorded appropriately on the medication administration records, (MARS), and it tallied with the stock that the home held. This demonstrates that people are receiving their medications as prescribed to ensure their health needs are maintained appropriately.

Daily life and social activities

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

Each person is treated as an individual and the care home is responsive to his or her race, culture, religion, age, disability, gender and sexual orientation. They are part of their local community. The care home supports people to follow personal interests and activities. People are able to keep in touch with family, friends and representatives. They are as independent as they can be, lead their chosen lifestyle and have the opportunity to make the most of their abilities. People have nutritious and attractive meals and snacks, at a time and place to suit them.

There are no additional outcomes.

This is what people staying in this care home experience:

Judgement:

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

Generally social, cultural and recreational activities meet individuals' expectations. Meals provided by the home are nutritional and wholesome.

Evidence:

On the day we visited we observed people watching television, sitting and chatting and some people went to day centres. We were told by people they can choose what they want to do. For instance individual's told us, if they did not want to go for a walk this was respected by staff and some people told us they would spend time with other people in their flats. One person confirmed in their survey, 'I decide what I would like to eat and what I want to do in the days', and another said, 'I have made the decision to attend day centre and take part in the activities I want. I have a mind of my own'. It was evident from our observations and from speaking with people that they are able to make choices on how they wish to spend their day.

We looked at the activities that are organised for people living in the home and found that these range from, going for walks, music recitals, entertainers come into the home on a regular basis, trips to Stapeley Water Gardens, Weston-Super-Mare, and so on. Events are also celebrated, such as, Easter, Christmas and birthdays. Individual's

Evidence:

help to choose their own activities. The home has employed a new activities co-ordinator and we were told by staff that they will go into individual's flats to ensure all people regardless of their preferences and or abilities are able to take part in social stimulation.

Daily records provided an account of how people were on that day, appointments attended and family contact. People are supported and family members are encouraged to maintain their relationships with individual's who live in the home. We found recordings of people going out for drives with their family and key workers support individual's to write letters to their family members together with making regular telephone calls. Family members are invited to reviews. This demonstrates that people who live at Carpenter Place are able to maintain relationships that are important to them and bring meaning to their lives.

We were told church services are held regularly in the home and we found that people also attended their own churches so individual's are able to follow their own religious beliefs. It was also positive to see that people are encouraged and supported to complete daily living activities, such as, cleaning their flats, washing up, cooking meals and making their beds. This ensures that individual's self esteem is maintained and their independence is retained.

We observed that people could have their meals in the communal dining room as they choose and or in their own flats. Menus are done every week, normally on a Sunday, with the help of people living in the home and individual menus are in people's flats so they are able to refer to them. We were told people living at Carpenter Place really enjoy the meals that are prepared and cooked by the chef who has worked at the home for a number of years. Staff told us that when the chef is away from work on holiday people are reluctant to eat their meals. We were also told that the chef ensures individual's cultural needs are met by preparing and cooking a diverse range of food, such as, curries, saltfish fritters, jerk chicken, yam, snapper fish and Okra. On Saturdays people generally choose to have takeaways from the local fish and chip shop and one Friday each month the chef prepares a buffet which we were told individual's really enjoy the variety of food on offer.

A sample of the menus illustrated:- Leek soup, pork chop or cod in cheese sauce with boiled potatoes, peas, broccoli, desert, rice pudding or Tomato soup, mince beef and vegetable pie or roast pork with roast potatoes, sprouts, carrots, dessert, rhubarb custard. In care records there were recordings which told staff individual's food dislikes and likes together with shopping for food. For example in one care record it said, 'I do not like bubble and squeak and I do not like cereal in the mornings for my breakfast. I prefer buttered toast. I drink tea and coffee. I am able to prepare my own breakfast

Evidence:

and hot drinks throughout the day and if I get hungry I will snack on biscuits crisps and variety of fruit during the day. Staff will assist me to completing my shopping list each week and I do enjoy my treats'. We were also told there are residents meetings every month. This shows people living at Carpenter Place have control over their own chosen lifestyles within the home. Where individual's may need some help to fulfil this we were told advocates can be provided and in one care record this was reflected, 'have an advocate whose name is X and he keeps in contact with me every so often'.

People told us that they did have a choice of meals and staff said,

"Meals are tasty and quite good". "Chef has worked here for ten years and meets resident's cultural needs". "Meals are brilliant a very good chef accustomed to residents likes and dislikes".

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.

People who live at Carpenter Place are supported to express their concerns and have access to a robust, effective complaints procedure. Safeguarding procedures are followed so that individual's are not placed risk.

Evidence:

The complaints procedure is in the home's statement of purpose, service user guide and is displayed in the home. A box for complaints and compliments is placed in the communal area of the home so it is accessible to evryone. We were told that no complaints have received by the home in the last twelve months. Some people living in the home lack capacity to make decisions in areas of their lives but the staff told us that advocates could be sought.

There are two adult protection investigations which are ongoing at the time of inspection and are being investigated by police and the local authority. However, in the AQAA the registered manager has completed this section as having no adult protection matters ongoing. Therefore we recommend that the AQAA is completed with greater accuracy when it is next completed.

Staff spoken to had good knowledge of how to recognise all forms of abuse together with where staff need to report these incidents to. The training matrix we sampled confirms that staff have received training in recognising abuse. Staff files sampled

Evidence:

reflected a robust recruitment procedure so that people can be confident that they are in 'safe hands'.

The home has shown that it is striving to improve its practices to ensure that people get the best possible care in the way they prefer. In the AQAA it states, 'Questionnaires are provided and are sent out to individual service users by the organisation and by the home. They are also sent out to professionals. Through resident monthly meetings and we also have a resident's quality group'. This shows the registered manager wants to listen to people who live there so that individual's are able to influence any improvements that are made within Carpenter Place.

Responses received in surveys from people living in the home told us in the main individual's know how to make a complaint, one person said, 'Yes, verbally first and then with a form and another confirmed, I would speak to management'.

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 style of living at Carpenter Place provides people with their own flats and communal areas which promotes individuals independence but also offers support where needed. It a safe and clean environment.

Evidence:

Carpenter Place is a purpose built home that is spread over two floors. It is a home that provides both individual and communal living accommodation. The home is situated in a residential area of Moseley with bus routes that are easy to get to and close shopping in Moseley village or Kings Heath. There is a car park to the front of the home. At the rear of the property there is some greenery and shrub areas for people to enjoy and relax in as they choose. The main access door to the home remains locked and secure so that anybody wanting to get into the home have to press the bell to alert staff to open the door.

The accommodation inside the home is made up of flats which have lounges, kitchens, bedrooms and bathroom areas that provide an independent living style for people. We looked with permission at two flats together with some of the communal areas, lounge, dining room and bathrooms. Flats were furnished with individual's own possessions, ornaments, pictures and photographs to reflect people's lives and personalities. However, in the home there are also communal areas, such as, lounges,

Evidence:

dining rooms and assisted bathrooms/shower areas. This means that people living at this home can enjoy being with people when they choose and also having time on their own when they wish inside their flats.

If people choose to smoke there is an area for individual's to use in the garden area of the home. There is also a room which is used as a hairdressing facility. The first floor lounge area holds church services of individual's wish to participate in. There is a passenger lift for people to use to gain access to the first floor of the home. We saw seating areas in the hallways which were positioned so people could sit and watch the world go by or have conversations as they wish. We saw wall boards which gave people an idea of activities planned, a newsletter and as discussed earlier in the report a copy of the complaints procedure using pictures to demonstrate its contents. This shows that the environment goes some way to meet the needs of individual's living there and generally the environment of the home was clean and comfortable.

Staff have completed infection control training to ensure good hygiene is practised within the home and the registered manager confirms in the AQAA, 'We achieved a mark of excellence from Environmental Health Services following an inspection for our provision of Food Safety'. This means people are protected from infection and cross contamination of food.

In the main we found the environment of the home to be in good repair apart from some missing ceiling tiles which we were told was due to a leak and was going to be repaired.

People told us in their surveys:-

'My Flat is always nice and clean and the communal toilets'.

'I was asked what bathroom flooring I would like today'.

'Several staff clean my flat for me'.

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 committed to their roles and have the knowledge and skills so that individuals can be confident that their needs will be met appropriately.

Evidence:

As mentioned earlier in the report people living in Carpenter place have a variety of needs which include social care, health, physical disabilities and mental health needs. We were told there are normally four staff on duty with one senior carer throughout the day covering both the early and late shifts. Staff work in two teams of two covering each side of the home. We were told that senior carers help where needed and complete all medication tasks. As at the previous inspection the registered manager is continuing to strive to ensure staffing vacancies are recruited to and filled in a timely manner. This is reflected in the AQAA, 'Reduce the levels of agency staff used'. We were told there are staffing vacancies for one full time member of staff, three part time and three night staff. Therefore agency staff continue to be employed in the home and this is reflected in the AQAA and staffing rotas.

The general perceptions amongst staff were that if there was an extra member of staff employed to cover shifts they could be used to help and support where needed. We were told that on one side of the home people had health and or physical disabilities that required a lot of help from staff. We also discussed these issues with the assistant

Evidence:

manager who confirmed what staff had said. We were told the registered manager is looking at these issues. Therefore it is recommended that the registered manager looks at the perceptions of staff and keeps documentary evidence of how they evaluate their staffing ratios together with how they assess people's dependency levels. Also within this process the home must account for the time spent by staff who assist in the kitchen at weekend periods. This evidence must be produced when the home is being inspected.

In the surveys we received from people living at the home we received these responses:-

'I usually spend time with my key worker X who takes me out'. 'I get on with most staff'. 'They help me put my shoes and stockings on'.

Staff spoken to had good insight into the diverse needs of the people living in the home. For example, staff could tell us the dependency levels of individuals together with what aids people needed and which individuals required some assistance due to their confusion in respect of achieving daily living activities. Staff were seen to interact well with people living at the home and the atmosphere was calm, friendly and relaxed.

The home demonstrates a commitment to staff training and development. Staff spoken with also confirmed that the registered manager enables staff to complete training courses. There are fifteen staff that hold the National Vocational Qualification, (NVQ), level 2, as confirmed in the AQAA which is above the recommended levels of 50%. We reviewed people's training records which indicated that staff have received mandatory training together with more specialist training. For example, food hygiene, health and safety, emergency first aid, infection control, moving and handling, medication training, fire safety and adult protection. This should ensure that a knowledgeable and skilled workforce can meet people's needs individually and collectively.

Three staff files were reviewed and were found to contain all of the relevant information including two written references, CRB checks (Criminal Records Bureau). Staff have been provided with job descriptions and there was evidence that people receive an induction into the home so that they are aware of their responsibilities and therefore able to discharge their duties appropriately.

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.

People can feel confident that the home is well run to ensure the best outcomes for people who live there. Quality assurance has been improved and the manager is continuing to strive in this area.

Evidence:

Samantha Price is the registered manager who has worked at Carpenter Place for a number of years and has experience in a managerial and practical capacity of caring for older people. Ms Price has achieved the National Vocational Qualification, (NVQ), Level 4 and the Registered Managers Award, (RMA). The registered manager is supported by an assistant manager. This management structure seems to be working well and we found evidence that is documented throughout this report which confirms this. However, there are areas that require some improvement which we are satisfied that both the registered manager and assistant manager have shown commitment to achieve so that people living in the home can be confident of a home that is run in their best interests.

Evidence:

The registered manager and assistant manager were seen to have an 'open door' policy with staff asking questions, seeking advice or sharing information about people who live at the home. Also the registered manager and assistant manager were seen to greet people as they walked by and it was clear to see that both people have a good rapport with individuals on all levels.

Prior to the inspection the registered manager had completed an Annual Quality Assurance Assessment, (AQAA), and returned it to us. This gave us information about the home, staff and people who live there, improvements and plans for further improvements. Throughout this report the reader will find examples of what the registered manager told us. However, as detailed earlier in this report the registered manager must ensure that when completing the AQAA it is done with greater accuracy when next completed.

In the main we found through looking at paperwork, observations, talking with people who live in the home and staff that the ethos of the home is open and transparent with the views of both staff and people listened to, and valued. Staff spoken to feel the management team are approachable, supportive and individuals are able to air their views in an open manner.

Staff told us:-

"Supervision every month and can approach the manager if need to. Staff meetings are monthly and worthwhile". "If one floater to help and two weekends off in every month this would raise staff morale which would benefit residents". "Supervision is supportive and helpful to answer any queries".

Staff meetings are held regularly so that people have the opportunity to voice their concerns and suggestions for improvements. The registered managers from other homes in the organisation complete reports which look at the quality of service being offered at Carpenter Place. Also the registered manager and the organisation have a number of audits in place to monitor the service provided. For example, questionnaires are sent out, the manager does audit checks, looks around the home to ensure repairs are noted in a timely, and medication is audited daily. The registered manager in the AQAA shows their commitment to providing a quality service and well maintained environment, 'More consistent audits and spot checks. Environmental improvements to the home. Repairs and satisfaction survey/questionnaires for service users to provide comments on. Recruitment of staff. Met all requirements from the fire officer'. This demonstrates that management at Carpenter Place are constantly looking at ways to improve the services for people living there.

Evidence:

Surveys completed by people living in the home told us:-

'The home is well managed with capable staff'. 'I am happy at Carpenter Place'. 'The staff are very very good to me'.

The arrangements for the safekeeping and financial transactions of people's personal monies are good, this prevents financial abuse.

Health and safety and maintenance checks had been undertaken in the home to ensure that the equipment was in safe and full working order. Maintenance checks are completed on the fire system and equipment so that people should be safe in the event of a fire occurring.

Accident records were reviewed and the manager completes an audit every month in order to monitor trends that are occurring. Also the Commission receive notifications which tell us about any incidents that happen within the home.

Are there any outstanding requirements from the last inspection?

Yes

No

Outstanding statutory requirements

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

No.	Standard	Regulation	Requirement	Timescale for action
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Requirements and recommendations from this inspection:

Immediate requirements:

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

No.	Standard	Regulation	Requirement	Timescale for action
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Statutory requirements

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

No.	Standard	Regulation	Requirement	Timescale for action
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Recommendations

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

No.	Refer to Standard	Good Practice Recommendations
1	1	To ensure it is reflected in statement of purpose and service user guide that people are able to request alternative formats of these information guides so that all people have access to this information regardless of their abilities.
2	2	Preadmission assessments should reflect how the individual and or their representative takes part in this process so they are able to state their care needs and how they would like these to be met before making a decision as to whether the home is right for them.

Helpline:

Telephone: 03000 616161 or

Textphone: or

Email: enquiries@cqc.org.uk

Web: www.cqc.org.uk

We want people to be able to access this information. If you would like a summary in a different format or language please contact our helpline or go to our website.

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