

Key inspection report

Care homes for older people

| | |
|-----------------|--------------------------------------------------------------------------|
| Name: | Enstone House |
| Address: | Enstone House Coxs Lane Enstone Chipping Norton Oxon OX7 4LF |

The quality rating for this care home is:

two star good service

A quality rating is our assessment of how well a care home is meeting the needs of the people who use it. We give a quality rating following a full review of the service. We call this full review a 'key' inspection.

| | |
|------------------------|-----------------|
| Lead inspector: | Date: |
| Andy McGuckin | 1 3 0 7 2 0 0 9 |

This is a review of quality of outcomes that people experience in this care home. We believe high quality care should

- Be safe
- Have the right outcomes, including clinical outcomes
- Be a good experience for the people that use it
- Help prevent illness, and promote healthy, independent living
- Be available to those who need it when they need it.

The first part of the review gives the overall quality rating for the care home:

- 3 stars - excellent
- 2 stars - good
- 1 star - adequate
- 0 star - poor

There is also a bar chart that gives a quick way of seeing the quality of care that the home provides under key areas that matter to people.

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

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

Outcome area (for example Choice of home)

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

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

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

This is what people staying in this care home experience:

Judgement:

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

Evidence:

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

We review the quality of the service against outcomes from the National Minimum Standards (NMS). Those standards are written by the Department of Health for each type of care service.

Copies of the National Minimum Standards – Care Homes for 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 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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| Document Purpose | Inspection report |
| Author | Care Quality Commission |
| Audience | General public |
| Further copies from | 0870 240 7535 (telephone order line) |
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Information about the care home

| | |
|-----------------------|--------------------------------------------------------------------------|
| Name of care home: | Enstone House |
| Address: | Enstone House Coxs Lane Enstone Chipping Norton Oxon OX7 4LF |
| Telephone number: | 01608677375 |
| Fax number: | |
| Email address: | |
| Provider web address: | |

| | |
|--------------------------------------------|-----------------------|
| Name of registered provider(s): | Marcus Care Homes Ltd |
| Name of registered manager (if applicable) | |
| Mr Caroline Dyett | |
| Type of registration: | care home |
| Number of places registered: | 28 |

| Conditions of registration: | | |
|------------------------------------------------|-----------------------------------|---------|
| Category(ies) : | Number of places (if applicable): | |
| | Under 65 | Over 65 |
| dementia | 28 | 0 |
| old age, not falling within any other category | 0 | 28 |

Additional conditions:

The maximum number of service users who can be accommodated is 28

The registered person may provide the following category/ies of service only: Care home only - PC to service users of the following gender: Either whose primary care needs on admission to the home are within the following categories: Old age, not falling within any other category OP Dementia DE

Date of last inspection

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Brief description of the care home

Enstone House is a large Victorian House which has been converted to provide accommodation for older people. It is situated on a main road in the village of Enstone. The home is on a bus route into the city of Oxford or the market town of Chipping Norton, where residents can access shops pubs and restaurants.

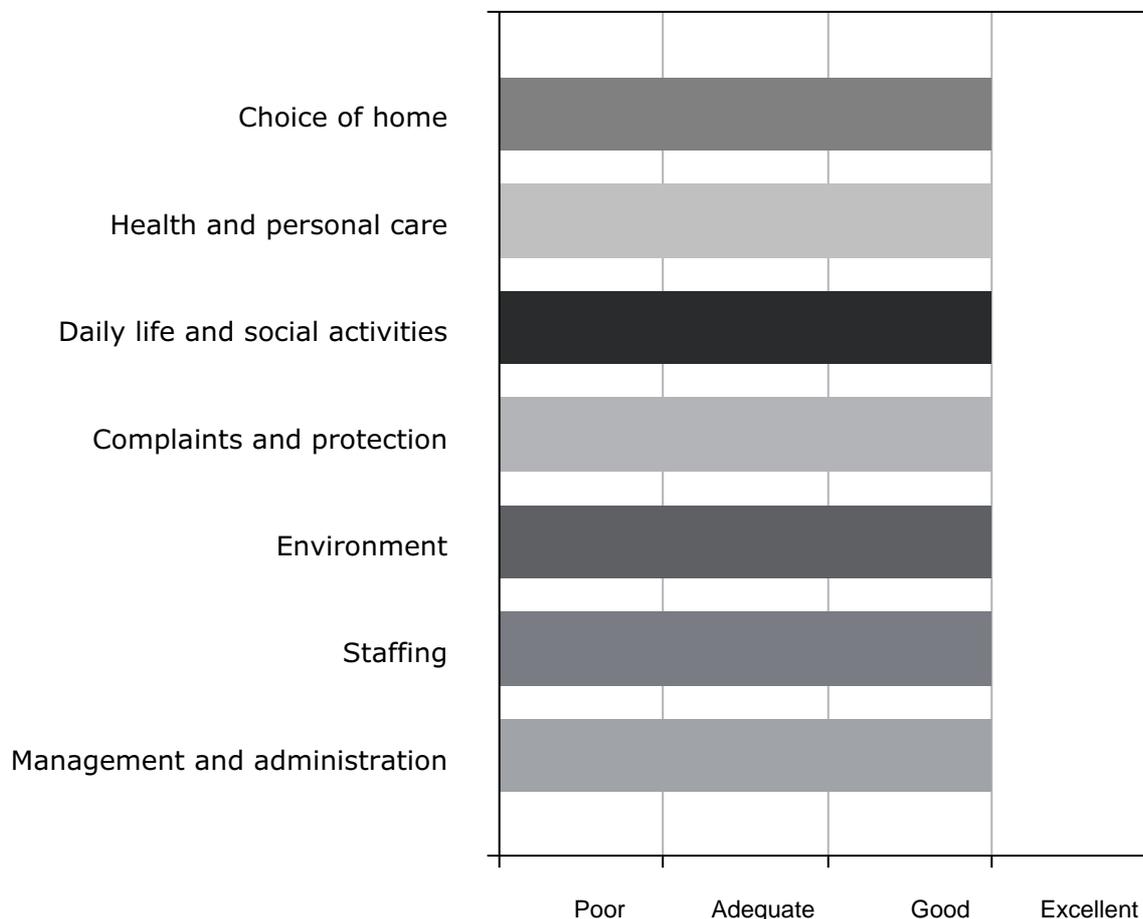
Summary

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 inspection took place over two weekdays and lasted a total of seven hours. The inspector was joined on the inspection by his line manager who was there to observe and appraise. The inspection took into account the homes AQAA. The AQAA is the agencies opportunity to let the Commission know what it has done to make improvements to the service and to inform the Commission what its plans are for future improvement. The AQAA also gives the service the opportunity to say what if anything may stop them from achieving these goals.

The Commission undertook a site visit to the home to establish compliance with regulation.

The Commission looked at key documentation to ensure that the home was able to evidence that it was able to meet the requirements and standards contained in the Care Standards Act.

The Commission sought the views of service users, staff and visiting professionals.

The Commission spent time with the Registered Manager and her Deputy Manager to

assess the current business plan and any plans they may have for the future.

What the care home does well:

The home are able to offer a home to older people many of whom have dementia. The home provide staff in sufficient numbers to meet the assessed needs of its residents.

The home provides its staff with the training and support to enable them to do the job to the best of their ability.

The home is managed by a person who has a wealth of experience and is qualified to manage the home.

The manager is supported to manage the home by proprietors who are flexible and are flexible in providing extra resources where required.

The home encourages residents to make comment as to the quality of the care given both positive and negative.

The home provides residents with a choice of meals which are wholesome and appetising.

The home works closely with health care professionals to monitor the health and wellbeing of its residents.

What has improved since the last inspection?

The home is undergoing a major upgrade of the home and is building a extra unit which will provide additional accommodation.

The home have made improvements to the way in which it presents information on the care of its residents.

What they could do better:

The home needs to ensure that the cover arrangements for staff who have to leave the building for short periods are notified to a senior colleague and that these short term gaps are covered.

The home could further improve the information held on residents by expanding on the information around the particular care of the individual. Other documentation would benefit from the expansion of the information held on file.

The home has recently been given advice as to how to improve on their safeguarding procedures. The home should re-evaluate these procedures and implement the changes as advised.

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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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 home undertakes a comprehensive needs assessment prior to a prospective resident being admitted permanently. Where an emergency admission takes place a full assessment is done as soon as is possible.

Evidence:

Residents who are funded by the local Health and Social Care budget are admitted with a comprehensive health and social care needs assessment which has been compiled by the purchasers. The home will add their own needs assessment to this, where possible, prior to the resident being admitted. If this is not possible then very soon afterwards. Self funding individuals will have been assessed by the home in the environment they are in prior to admission. This assessment will cover a range of topics including social, emotional and health care needs of the resident. It will also take into account any cultural and faith issues and any needs particular to the individual resident.

The home needs to demonstrate on the care plan exactly how they are meeting the

Evidence:

individual care needs of residents. There is comprehensive information around the practicalities of how they will deliver care, but little about how they have assessed and met it on an individual basis.

Prospective residents are encouraged to spend some time in the home prior to admission. This can take the form of a meal, or meals at which time they can meet and talk to other residents. One resident spoken to informed the Commission that she had visited the home and seen her room prior to moving in and that she had a say in the decor and furnishing of the room. The home has started a key worker system whereby an individual carer is responsible for a small group of residents. This means residents know that they have a contact on any given shift.

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 home meets the health and personal care needs of its residents by clear care plans which are inclusive and reviewed regularly.

Evidence:

Many of the homes residents have a diagnosis of Dementia, which in many cases makes the assessment process quite difficult. The home is continuing to developing staff training in Dementia, having a key worker system and spending one to one time learning the communication and day to day needs of the resident. The home has an activities co-coordinator who provides activities which are accessible by a wide range of abilities. Part of the activities focus on recalling past events through the use of old films and reminiscence. Care plans and information written on the individual was presented in a way that promoted the individuals privacy and dignity. Information held on file included a profile of the individuals life prior to admission. The home also gains information as to the wishes of the individual following serious illness or death. Some residents were found to have compiled a living will.

Care plans are compiled involving the individual where possible. Where this is not possible those closest or in a position to contribute are consulted. The care plan is a

Evidence:

document which is reviewed and updated at regular intervals or when the need arises. Care planning involves a certain amount of risk and this is assessed as part of the overall plan. This is done to maximise a person's potential whilst at the same time minimising acceptable risk. Risk assessments are also in place to ensure safe working practices for staff. Residents' privacy and confidentiality is upheld and staff are trained in the policy and procedure around confidentiality. Staff are aware that a breach of this policy may result in disciplinary action being taken. The home assesses the satisfaction of its residents with service by consultation with them and those who have access to the service. An annual questionnaire is sent out to each resident or their representative. Information received is analysed and where improvement is required plans are put in place to address these issues. Three service users spoke with us to gain their views on the quality of care provided by the home. Comments received were very positive including

' The food is very good,'

' They look after us very well '

' There is enough to do '

One resident wanted to receive talking books, which when mentioned to the manager would be addressed. Another comment was that a resident wanted to go into the village on her own. The manager did say that she would discuss this with the resident to see if a solution can be found.

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.

The home offers activities to suit a range of ability. Individual residents have a care plan which takes account of their ability and provides stimulation and activity to match this assessed ability.

Evidence:

The Commission looked at five service user files to gain evidence of compliance with the above standards and found them to be well recorded and contain sufficient information on which carers could provide care in a manner set out in the plan. The home has many residents with dementia. The home is developing an expertise in Dementia care and staff are being training in the care of residents with this diagnosis. The home does try to provide activities and an environment which develops and maintains their social, emotional, communication and independent living skills. The home encourages residents to maintain contacts with family and friends from the community. Visitors are made welcome to the home at all reasonable times of the day. Where visitors are considered not to have the residents best interests in mind, residents are assisted to make a decision not to allow them to visit. The home promotes the individuals rights and choices at the same time provide a degree of protection when required. Individual care is provided in a way which takes into account equality, dignity, respect and autonomy. residents who are able are

Evidence:

encouraged to access activities in the local community with visits to the shops , pubs and facilities of Oxford, Banbury and Chipping Norton. The home does not have its own transport at this time but residents will often accompany a staff member who will drive them into town. The home is further hindered in allowing residents to access local resources due to the proximity of a busy main road. The home has to make an informed decision of the risk involved for the individual. Residents have their domestic routines done for them unless they have requested that they maintain their own room or laundry. Food is presented in a appetising and varied way. Individuals are given a choice of what to eat. The home ensures that food is healthy by buying mainly fresh meat, fruit and vegetables. Drinks hot and cold are available throughout the day. Where a resident requires assistance with eating, staff are patient and interact with the resident to ensure that they eat at their preferred pace and that this process is done in away which protects the residents dignity.

A health care assessment is available on file and includes comprehensive information as to the specialist individual health care needs of the resident. This information is presented in a way which is easily understood by the lay person and takes into account the residents dignity and equality. Information regarding specialist care, nursing care and dietary requirements are included in this plan.

Residents have access to mainstream health care professionals and are encouraged to visit the health center if they are able. Local General Practitioners visit the home on a regular basis and residents can see a doctor in the privacy of their own room.

Staff are being trained in the core principles of care and have further specialist training provided by the district nursing service. Staff have attended courses on dementia and palliative care. Staff are encouraged to identify and attend any training which will add to their expertise.

The homes medication routine was checked and found to be robust with the staff managing it to have a good working knowledge of the system. Second checking and spot checks add to the security of the system. Medication queries highlighted were addressed in a knowledgeable and accurate way.

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 have been given advice by the Safeguarding team about improvements they should make to their Adult Protection procedures. The Commission is confident these changes will be implemented.

Evidence:

On the day of the inspection the Inspectors were admitted to the home without challenge and had to ask to see a member of staff which took some time. This was a breach of the homes security and could have had serious implications for the safety of its residents. The Commission was given mitigation for this temporary breach of their security and accepts that this was not their normal practice. The home must ensure that where a member of the ground floor staff has to leave the building in an emergency then other staff are notified and that cover is arranged for the ground floor. The home is accessed by a locked front door which has an electronic locking system. Visitors are asked to sign a register on arrival and departure.

The home has a complaints procedure which is open and available to those who visit the home. A copy of the complaints procedure is available in the entrance hall of the home. The complaints procedure can be made available in large print if required. The complaints procedure is given out with the Service User Guide and Statement of Purpose. Complaints inspected had been dealt with in a timely manner with agreed outcomes recorded. Where a complaint cannot be addressed to the satisfaction of the individual. The complainant has recourse to an independent body. There have been two recent incidents where the Safeguarding team have been involved. The most

Evidence:

recent involvement highlighted areas in which the home could improve its procedures. The home has taken this on board and will review and amend their current practice. Staff spoken to were aware of their responsibility in terms of protection and were aware of the policy on whistle blowing. All staff have been trained in identification and action required when possible abuse has been identified or suspected. Staff are aware of the restrictions on the restraint of the individual and where steps need to be taken to protect the resident from harm, a comprehensive professional assessment of this risk is undertaken and included in the care plan. Evidence was found that this was the case during the case tracking exercises. The Commission viewed the fire safety report which was done earlier in the year. the report made several requirements and recommendations and the Commission could not be assured that these requirements had been addressed at the time of the inspection.

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 home is a large house which is not purpose built, but is considered fit for purpose. The home provides a homely environment for its residents. The home is well maintained.

Evidence:

The home is a large Victorian house which has been adapted and added to throughout the time it has been used as a Residential home. The home is therefore not purpose built and many of the facilities you would find in a modern purpose built house are not possible. The home are adding a purpose build unit to the rear of the existing home, which will be built to todays requirements. This extension will add seven en suite rooms and the home will reassess each individual to maximise the use of the en suite rooms and the older shared rooms. The proprietors and staff are making the best use of the accommodation they have. Many of the rooms in the main building have been redecorated and refurbished to a good standard. The inspectors met one resident in her room. She was very pleased with the way the home had worked with her to get the room just how she wanted it. She had many items of her own furniture which gave the room a very homely and personal feel. Residents are able to spread out on the ground floor and find space of their choice or a quiet corner. Sharing of rooms is kept to a minimum and is kept for couples who wish to share or those who would prefer the company of another person. Where residents require specialist adaptation or equipment this is assessed by a professional and equipment is maintained on a

Evidence:

regular basis. The home has a lift for those requiring one. The home has sufficient bathrooms and toilets to meet the assessed needs of its residents. Bedrooms and bathrooms are fitted with appropriate aids and adaptations to enable residents to have care provided in a safe and dignified manner. Water temperatures are regularly monitored to ensure the comfort and safety of the residents. On the day of the inspection the home was well lit, clean and in the main fresh smelling. The home has an infection control policy and works closely with external specialists.

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.

The home has employed staff in sufficient numbers to meet the assessed needs of its residents. staff are recruited and trained in a way which enables them to do the job expected of them.

Evidence:

Two members of staff were formally interviewed and evidenced that they had been recruited in a professional manner. Checks and references had been taken up and they were not allowed to work until checks had been complete. Residents spoken to were very complementary about the staff group and felt that there was enough people on duty to meet their needs. The home ensures that it has more staff on a busy times and reduces staff time where it is not needed. Staff are given a thorough induction in the basic requirements of the job. During their time at the home, they will be required to attend further training and be given the opportunity to gain a professional qualification in care. Staff files inspected and staff spoken to evidenced that the home has a robust recruitment procedure which includes providing a job description, taking up references, police checks and providing information to prove they are who they say they are. Evidence was found at inspection and through talking to staff that they are being supported and supervised to do a good job. Where there is a gap in knowledge or expertise this is dealt with in a supportive and productive way which results in the member of staff learning and moving on. The home are currently ensuring that staff are being trained in the care of people with dementia. The home produce a staff

Evidence:

handbook, which staff work through and is assessed at various stages of their career and form part of the annual staff assessment. Staff supervision is formal and recorded. Supervision takes place on a regular basis and is planned in advance. Supervision is a developmental rather than punitive process which is regarded as an important part of staff development by both parties.

Staff Comments included.

' I like working here I feel accepted '

' I get a lot of support from my manager '

' I was given a good induction and feel able to do the job asked of me '

' I have a staff handbook that I can refer to if I need to '

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 change to the status of the company has not had an adverse impact on the home. The proprietors continue to visit and support the home. The refurbishment is having a minimal impact on the residents.

Evidence:

The homes manager has been in post for many years and is experienced and qualified to manage the home. The manager works in close co-operation with the proprietors who visit the home on a weekly basis. The manager informed the Commission that she is given a free hand to manage the home, and where she makes requests for extra resources or an increase in budget these requests are mostly met. The organisation has a forward plan which is designed to keep the home competitive with other homes in the area. The home provided the Commission with its Annual Quality Assessment Audit which informs us what the home has improved since the last inspection, any changes to the management or structure of the home and what plans the home have for the future. The homes manager promotes equality of opportunity and fairness and keeps up to date with current changes in the care industry and

Evidence:

changing methodology and thinking by updating her training. The home have policies and procedures which staff are trained in and are expected to follow. These policies are key to the thinking and ethos of the home and are updated regularly. The home works to its health and safety policies and staff are made aware of their responsibility in this respect. The proprietor makes regular checks on the home to ensure compliance with these policies. Records required for the safe and professional running of the home were inspected and found to be relevant and up to date. The home has robust procedures for managing residents money and will only do so where there is no one else to undertake this task. Financial transactions are kept to small amounts and for essential items to be purchased. These transactions are clearly recorded and audited independently.

The Commission viewed the fire safety report which was done earlier in the year. The report made several requirements and recommendations. Wheelchairs were found to be blocking fire exits which could pose a risk to residents in the event of a fire. Some commodes were found not to have lids on which again could pose a health risk. These issues were quickly solved prior to the end of the inspection.

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:

Telephone: 03000 616161

Email: enquiries@cqc.org.uk

Web: www.cqc.org.uk

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