



Making Social Care
Better for People

Inspecting for better lives

Key inspection report

Care homes for older people

Name:	The Georgians Nursing Home
Address:	50 Wide Bargate Boston Lincs PE21 6RY

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:
Tobias Payne	1 9 0 8 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

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- 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:	The Georgians Nursing Home
Address:	50 Wide Bargate Boston Lincs PE21 6RY
Telephone number:	01205364111
Fax number:	01205311417
Email address:	june@thegeorgians.co.uk
Provider web address:	

Name of registered provider(s):	The Georgians (Boston) Limited
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Type of registration:	care home
Number of places registered:	45

Conditions of registration:		
Category(ies) :	Number of places (if applicable):	
	Under 65	Over 65
old age, not falling within any other category	0	45
physical disability	1	0
Additional conditions:		
The home is registered to provide nursing and personal care for service users of both sexes whose primary needs fall within the following categories:- Old age, not falling within any other category (OP) (45) Physical Disability - under the age of 65 years (PD) (1) for one named service user.		
The maximum number of people to be accommodated is 45.		
Date of last inspection		
Brief description of the care home		
The Georgians Care Home is a listed building situated in the centre of the market town of Boston and a short walk from the shops and local facilities. There is a small car park to the side of the home and a patio area with seating and a new water feature to the side of the home. There is ample public car parking to the front of the building. The home provides both personal and nursing care. Accommodation is available on both		

Brief description of the care home

the ground and first floor. Rooms on the first floor are served by a shaft lift and stair lift which also gives access the lounge and dining room. There are 23 single rooms and 11 double rooms provided as well as lounge and sitting areas throughout the home. There is a regular bus and train service in Boston. The fees at the inspection visit on the 19/8/2009 ranged from £348 to £570 each week. Additional charges were hairdressing which ranged from £5.50 to £22, Chiropody £9 and personal newspapers, magazines and personal toiletries. The statement of purpose, service user's guide and information about the home can be obtained from the manager of the home.

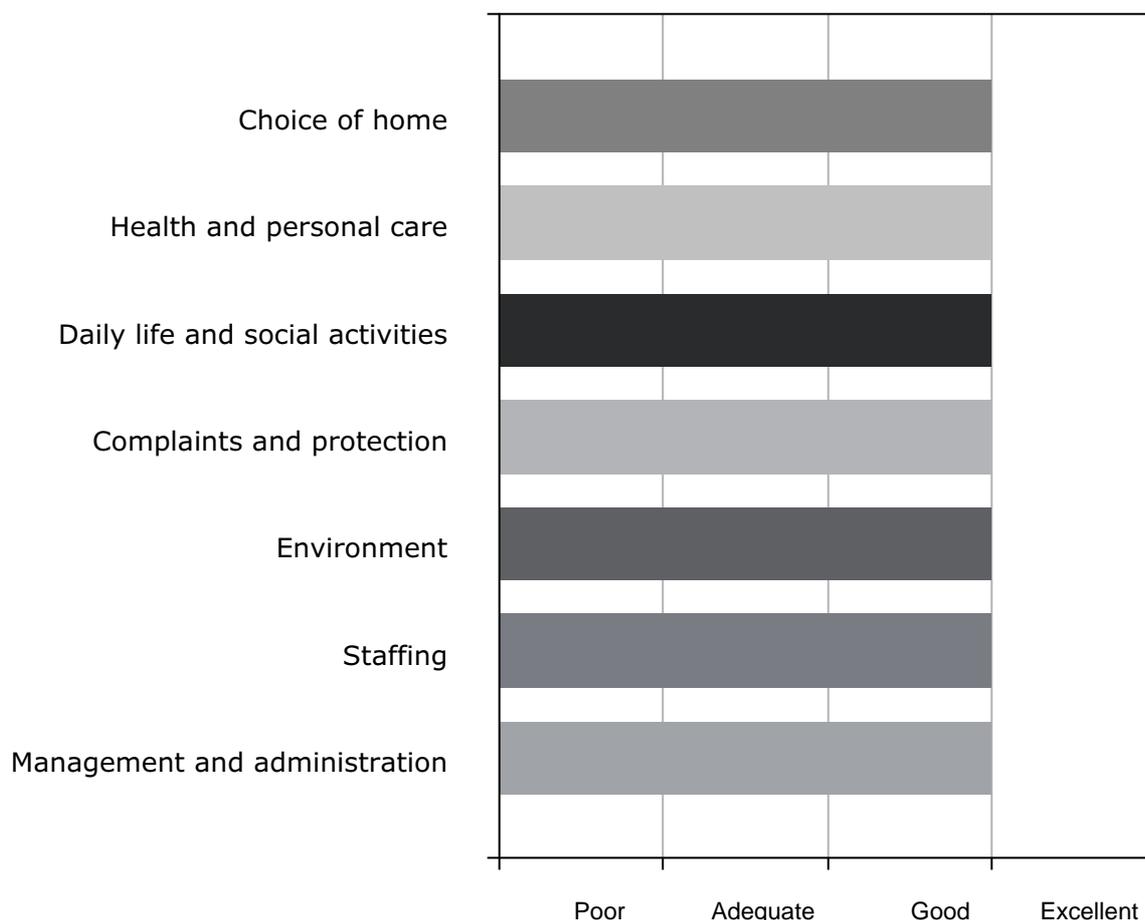
Summary

This is an overview of what we found during the inspection.

The quality rating for this care home is:

two star good service

Our judgement for each outcome:



How we did our inspection:

The previous unannounced key inspection was on the 5th July 2007.

This key inspection visit was unannounced and started at 7.30 am. We did this as a result of reviewing of all the information available to us about The Georgians Nursing Home. We looked at a sample of care records, policies and procedures and walked around the home to see the quality of accommodation and visited some of the bedrooms with the permission of the people living in the home. We also spoke with 12 people living in the home, 3 visitors, 5 staff and the registered nurse who was present throughout our inspection visit. We gave a feedback of our findings to the deputy manager at the end of our inspection visit.

The main method of inspection was called "case tracking". This involved selecting 2 people and tracking the care they received through the checking of records, discussion

with them, the care staff and observation of their care. We also examined a detailed Annual Quality Assurance Assessment, which had been completed by the manager.

Where the use of we or us has been used throughout this report it refers to the Care Quality Commission.

What the care home does well:

The people live in comfortable, well maintained and clean accommodation. People are able to make their rooms more homely with their own personal belongings if they wish. Each person is encouraged and supported to be independent and take part in meaningful activities. They are also offered choices about what they wish to do and to make decisions about how they spend their lives. Staff communicate well with them and respect their choices and decisions.

People living in the home are cared for and supported by a caring, educated and committed team of staff.

There is a programme of education and training provided for the staff, which ensures that staff know how to care and support the people who live at the home.

Visitors are made welcome and kept well informed.

This is a well-managed service, which has systems in place to check on the overall quality of the care and accommodation provided to ensure good standards are maintained and improved.

What has improved since the last inspection?

Staff training has improved to enable the staff to communicate, understand and manage the needs of the people better. Training has included dignity in care. In addition additional staff have been provided to help at peak times when demand for care is higher. Nurses have received palliative care training in order to care and support people better.

A programme of decoration has resulted in 8 bedrooms being redecorated. An extensive renovation and repainting has taken place outside the home with new windows and paintwork. This has resulted in the home being awarded a Civic Pride Award in July 2009. Refurbishment has also included a new fire system, new boilers and new hoist. Further new profile beds which enable the people to be cared for when in bed easier and for it to be safer for staff to care for them have been purchased as well as new alternating pressure relieving mattresses. A new water feature had been provided in the outside patio.

They have reviewed the range of activities provided and are keen to develop these further in the future to provide more stimulation and diversion. The service was awarded a silver award by Boston Borough Council in March 2008 in recognition of the catering service provided.

What they could do better:

There were no requirements or recommendations as a result of this inspection. We discussed about ensuring that our new address and phone number was in their complaints procedure, the statement of purpose and service user's guide. This was acted upon immediately. The service has an established quality assurance system which monitors quality and identifies improvements to the service.

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

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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.

People coming to the home receive information to help them make an informed choice of where to live. They are assessed before they come to the home which ensures that individual needs can be met within the home.

Evidence:

There was a detailed statement of purpose and service user's guide, a copy of which is given to each new person coming into the home together with a copy of the last inspection report. We noticed that our new address and phone number needed to be added to these documents and the complaints procedure and this was acted upon during our visit. We were told and this was confirmed by people we spoke with that the manager visited each new person to meet them and assess their needs before coming to this home. They involve the person and any other person involved in their care and support. Wherever possible they offer an overnight stay at the homes' expense. There was an admission sheet, letter confirming the home could meet the person's needs, assessment for daily living, moving and handling assessment and

Evidence:

transfer information. Through case tracking we looked at records for a person who had recently been admitted to the home. We spoke with 2 people who had been recently admitted to the home they told us "the manager came to see me before I came to the home and gave me information and then prepared my admission to the home. It took me a while to settle but I have found people very friendly and helpful and have now settled in".

The service does not offer intermediate care.

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.

Each person had a detailed care plan giving details about their care and support. Medication was safely given by staff who knew what they were doing.

Evidence:

All the people had care plans, which described their health, support and welfare needs. Care plans which were kept in a folder in each person's room included a photograph, brief overview of each person's needs, personal history with interests and their routine, activities and care plan which outlined their needs, objectives and included an assessment of each person's mental capacity (which is about protecting people's rights and choices). The care plan also included risk, nutritional and moving and handling assessments. There were records of weight and there were care plan reviews which involved each person where ever possible. The reports we saw were dated with a signature. Care plans had clear care directions and there was sufficient information to enable staff to know how to care and support each person. The manager carried monthly audits on a sample of care plans with an action plan where required and a follow up report to confirm the action plan had been acted upon. We looked at records for 2 people one of whom had complex needs. One person was

Evidence:

cared for in bed and had a fluid balance chart and turning chart which showed the person was receiving regular fluids and their position altered to relieve pressure even though they were on an alternating pressure mattress. We saw other people confined to bed with overbed tables, bed protection rails and drinks and books within their reach.

Throughout our visit we saw staff talking to and respecting the people's wishes and choices in the way they made contact with the people living in the home and their response. We also spoke with staff who showed good knowledge about the particular needs of the people living in the home.

Where required, people living in the home were referred to their own local doctor, Community Nurse, Community Psychiatric Nurse, Tissue Viability Nurse, Continence Nurse, Physiotherapist, Opticians, Dentist, Chiropodist and other specialists. There were Link Nurses who specialise in various aspects of care including tissue viability, palliative care and continence and meet up with other nurses and staff from NHS Lincolnshire to promote good practise. We were told that the service continues to work towards achieving the Gold Standard Framework for terminal care and after care which will be assessed by the Macmillan Nursing Service. Each person had their own key worker responsible for their care and support.

Registered nurses and senior care assistants gave out medication. There was a policy and procedure and each person was assessed before they were considered safe to give medication. Records we saw were clear and well maintained with a good audit trail. We were told that the people were encouraged by the staff team to self medicate. All but 2 people needed a degree of assistance in order to ensure they took their medication safely. The people who wished to self medicate had been assessed before this took place and were monitored to ensure the medications were being taken correctly and safely. The manager made a monthly audit to monitor how medication records had been maintained. This again showed adequate records were being kept. In addition they received a pharmacy inspection on the 21/5/2009 and the report showed no concerns and "all very neat and tidy".

People we spoke with were satisfied with the way staff cared for them and had confidence in the staff. We saw throughout our inspection staff attended to the people in a warm, friendly and kind manner, knocking on doors before entering their bedrooms and asking whether they needed any help. The people told us, "I am very comfortable, it is the first day I have got out of bed and I am very happy" and "everyone is so kind, helpful and courteous".

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.

People are able and supported to make their own choices about how they want to live their lives, and what they want to do. Social activities are varied and provide stimulation and interest for people living in the home. People enjoy varied and nutritious meals. Visitors are made to feel welcome and supported.

Evidence:

On admission to the home details were obtained about each person's interests and life history and this information was contained in their care records. Activities in the home were provided by an activities organiser supported by 2 assistants. There was a written activities programme and monthly newsletter. The activities programme for the week was displayed in each lounge and on notice boards throughout the home. Activities included tea in the park, nail care, dominoes and cards, exercises, hand massage, Bingo, shopping trips, reminiscence, one to one chats, visits by pets as therapy dog and church services. There were sitting areas throughout the home. There was a separate hairdressing room on the ground floor with charges clearly displayed on the door. The manager had regular meetings with the people living in the home the last being on the 18/8/2009.

We spoke with 3 visitors who told us they could visit whenever they wished to do so

Evidence:

and always received a warm and friendly welcome. They were very satisfied with the home. Comments included."I have found whenever I visit everyone friendly and so helpful" and "If I have a question I can ask the staff and they are keen to help"

The last Environmental Health Officer's inspection by Boston Borough Council was on the 25/3/2008 and as a result they were awarded a silver award for their catering service. The award was displayed on the wall in the corridor outside the kitchen. There was a menu with 2 alternatives and the menu was displayed in each dining area and on notices in the home. We saw breakfast being taken to each person's bedroom by staff who had a list of each person's requirements, the member of staff knocked on doors and greeted each person before giving them their breakfast on a tray. We also saw lunch being served in the dining rooms on the ground and first floors, which were nicely decorated with people having lunch attended by care staff who wore plastic aprons and served food in a discreet manner. Catering staff served lunch from hot trolleys. We saw staff sitting by the side of people who could not feel themselves helping them in a calm and unhurried manner. No one we spoke with had any complaints about the food and it was well served and the people were not hurried. Comments included, "the food is always nice and hot the way I like it", "the food is very enjoyable, well served with a good variety and very well cooked" and "I love the food". We also looked at catering records and found them well maintained and up to date.

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 know how to make a complaint and feel that staff will listen to their views. The care team know how to respond to a complaint and how to act in order to protect people from abuse. They are protected from abuse by correct and safe recruitment procedures.

Evidence:

There was a complaints procedure displayed at the entrance to the home and each person received a copy of the complaints procedure in the service user's guide. We noticed it did not contain our new address or phone number and this was acted upon during our visit. We examined the complaints register and could see from information from the manager in the AQAA that over the last year 5 complaints had been received by the home. Records showed that all complaints were fully investigated using their own procedures with a clear audit trail. This included records of any investigation and letters to the complainant acknowledging the complaint and the outcome of the manager's investigation. As a result 3 had been upheld. We had been made aware of safeguarding adults issues in May and August 2009 which were investigated by Lincolnshire County Council's safeguarding adults team.

The home also had a copy of Lincolnshire's Adult Protection policy. All staff were correctly recruited including a check by the Criminal Records Bureau (CRB). During their induction we were told that staff received information about abuse. We asked 3 staff what abuse was and they showed knowledge about their role and what they

Evidence:

would do if abuse was suspected. Staff told us they received regular refresher training to ensure their knowledge was up to date. None of the people we spoke with, visitors or staff had any complaints about the home and felt they could discuss any concerns with staff or the manager. We saw that staff were polite and respectful when talking to or undertaking care duties with the people.

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.

People live in clean, comfortable, safe and well maintained accommodation. The infection control policy is followed and a safe environment is maintained.

Evidence:

The home was well maintained, clean, tidy, safe, well decorated and odour free throughout. All the people told us they liked their bedrooms and found the home clean. They told us they were encouraged to bring into the home small items of furniture, television, pictures and personal items. Areas throughout the home had been redecorated with other improvements. During our visit we walked around the home and found all areas of the home were clean, tidy and odour free. We saw throughout our visit domestic staff cleaning all areas of the home thoroughly. People we spoke with told us they were satisfied with the decoration and cleanliness of the home. They also spoke of how they liked their bedrooms. They told us "my clothes are looked after very well and returned very promptly", "my room has been arranged to suit my needs and it is how I like it" and "they are always cleaning and it is very clean and comfortable".

There were grab rails and raised toilet seats and bathrooms and toilets were wheelchair accessible and had thermostatic valves fitted to basins and baths to prevent the people from scalding. There were a variety of pressure relieving mattresses, special profiling beds and a variety of mobile hoists with a variety of slings

Evidence:

and other moving and handling equipment. There were clear signs throughout the home which showed where toilets, bathrooms and other rooms were.

Staff told us they had received training and knew how to use equipment properly. Separate staff were employed for domestic and laundry services. Gloves and aprons were provided and the home had clear infection control policies and hand wash dispensers were throughout the home and at the entrance to the home. There was a laundry with sluice cycles on both of the commercial washing machines. There are two commercial tumble dryers and a commercial roller for bedding.

People were sat in the lounges of the home or in their bedrooms. The lounges each had televisions and radios and comfortable seating. Those in bed had over bed tables enabling them to have access to drinks, tissues, fruit, newspapers or books or the television control.

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.

There is a safely recruited, well-trained, supported staff team available who have the skills to meet the varying needs of the people living in the home.

Evidence:

People we spoke with did not express any worries about the level or availability of staff though they did comment that the staff were very busy at times. During our inspection visit we saw staff attended to the needs of the people promptly and in a calm and friendly manner. Throughout our visit people we spoke with felt the home was adequately staffed with staff who were experienced and competent to care for the people living in the home. All the comments were very positive. We saw that the manager monitored how often call bells were answered and could see that since May 2009 the average response ranged from 1 to 7 minutes.

The home employs registered nurses, care assistants, domestic, laundry, catering staff, administration and a maintenance person. The people we spoke with told us "the staff are exemplary", "they are so kind and patient" and "I am very satisfied with the care and approach of staff".

We looked at the files for 2 new members of staff. They were clear, detailed and showed that staff were safely recruited in accordance with the regulations. This included a check by the Criminal Records Bureau (CRB). When new staff started work

Evidence:

at the home they told us they received a supported induction programme in 3 stages. The first stage lasting over 2 days, followed by stage 2 lasting 1 to 6 weeks and then stage 3 which followed a nationally recognised induction programme. The induction gave information about the policies and procedures of the home and how to provide the necessary care and support to the people living in the home.

Many staff had worked in the home for many years. All staff spoke of working as a team. Staff, people living in the home and visitors felt there were sufficient staff in the home. The manager monitored dependency and was able to employ more staff where required. We were told that they provided more staff at certain times of the day when there was greater need.

Training since the last inspection had included, dignity in care, health and safety, infection control, fire prevention, first aid, adult protection, moving and handling and personal care. In addition, staff were encouraged and supported to study for a care qualification (National Vocational Qualification) level 2 and 50% of staff who had obtained or were studying for NVQ. A number of staff were studying or had obtained an NVQ level 3. Staff told us, "I received a very good and supported induction when I came here which prepared me for my caring role", "I have learnt so much since I have been here", "since I have come here I have gained further qualifications and experience which has given me confidence and increased my knowledge about how to care for these people and I now supervise new staff" and "we work well together".

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 and staff benefit from the positive leadership of the management team. Management record systems show that the peoples' health, welfare, safety and choices are promoted. The management ensures that the people living in the home have the opportunity to voice their views and opinions. The management uses feedback from questionnaires from a number of sources and quality assurance systems to make improvements.

Evidence:

The manager had been in post for many years and is a registered nurse with extensive care and management experience. She had obtained a management qualification. She was also an assessor. People living in the home, visitors and staff told us they had confidence in the manager. She was supported by a deputy manager who was also a very experienced registered nurse. Staff received supervision regularly and spoke of the support received from the manager and deputy manager. Comments included, "I am very satisfied", "the manager and her deputy are actively involved in delivering care and know what is going on in the home".

Evidence:

The manager had regular meetings with the people every 3 months the last meeting was on the 18/8/2009 and had regular staff meetings. Staff also had regular supervision and an annual appraisal.

The service had a comprehensive quality assurance system. There was an annual internal audit, which was carried out by the manager in April 2008 in line with the Registered Nursing Home Association Quality Management System. This was very thorough and covered all aspects of the home. In addition, the manager carried out monthly audits of care records, medication and call bells responses. Surveys were carried out to obtain the views of visitors and people living in the home. In addition, there was a comprehensive quality assurance management meeting to look at all aspects of the home in March 2009. As a result there had been a weekly audit by the cook to learn the views of people about the food provided and other improvements. We looked at records in August 2009 and comments included "the meat is very tender", "pasta very good", "dinner very nice" and "Beef cobbler beautiful".

The home had policies and procedures including clinical procedures. Records were well maintained, up to date and accessible. Money kept on behalf of the people was kept securely with records and receipts of all transactions and signatures.

There was a detailed equal opportunities policy, which referred to discrimination, disability and victimisation. There were no communication issues or concerns about equality and diversity. The service had information about the Mental Capacity Act 2005 and this issue was also covered in the care plans.

There were comprehensive health and safety policies, which also included detailed and up to date risk assessments and a fire risk assessment. There were regular tests of the fire system as well as regular fire drills and monthly monitoring of hot water temperatures. There were also infection control policies and staff made use of alcohol hand rub bottles throughout the home to further prevent infection. We found records throughout our visit were available, well maintained and up to date.

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 or

Textphone: or

Email: enquiries@cqc.org.uk

Web: www.cqc.org.uk

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