

Key inspection report

Care homes for adults (18-65 years)

Name:	SCIC - 26 Glebe Road
Address:	26 Glebe Road Stratford on Avon Warwickshire CV37 9JU

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:
Kevin Ward	2 0 1 0 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 Adults (18-65 years) can be found at www.dh.gov.uk or bought from The Stationery Office (TSO) PO Box 29, St Crispins, Duke Street, Norwich, NR3 1GN. Tel: 0870 600 5522. Online ordering from the Stationery Office is also available: www.tso.co.uk/bookshop

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

Reader Information

Document Purpose	Inspection report
Author	Care Quality Commission
Audience	General public
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Internet address	www.cqc.org.uk

Information about the care home

Name of care home:	SCIC - 26 Glebe Road
Address:	26 Glebe Road Stratford on Avon Warwickshire CV37 9JU
Telephone number:	01789298709
Fax number:	
Email address:	
Provider web address:	

Name of registered provider(s):	Stratford & District Mencap
Type of registration:	care home
Number of places registered:	4

Conditions of registration:		
Category(ies) :	Number of places (if applicable):	
	Under 65	Over 65
learning disability	4	0
Additional conditions:		
The maximum number of service users who can be accommodated is: 4		
The registered person may provide the following category of service only: Care Home Only (Code PC) To service users of the following gender: Either Whose primary care needs on admission to the home are within the following categories: Learning disability (LD) 4		

Date of last inspection								
Brief description of the care home								
<p>Glebe Road is a semi-detached house, which offers long-term accommodation for four adults who have learning disabilities. The current service users are men. The property is rented from a housing association, with staff being provided by Stratford and District Mencap. It is not distinguishable as a care home from the other properties in the road. Car parking is limited. There are gardens to the front and rear of the property. On the ground floor there is a lounge, kitchen and separate dining room, shower room/toilet, sleeping-in room/office. On the first floor there are four single bedrooms and a bathroom. The house is on the outskirts of Stratford, which is accessible by a regular bus service.</p>								

Brief description of the care home

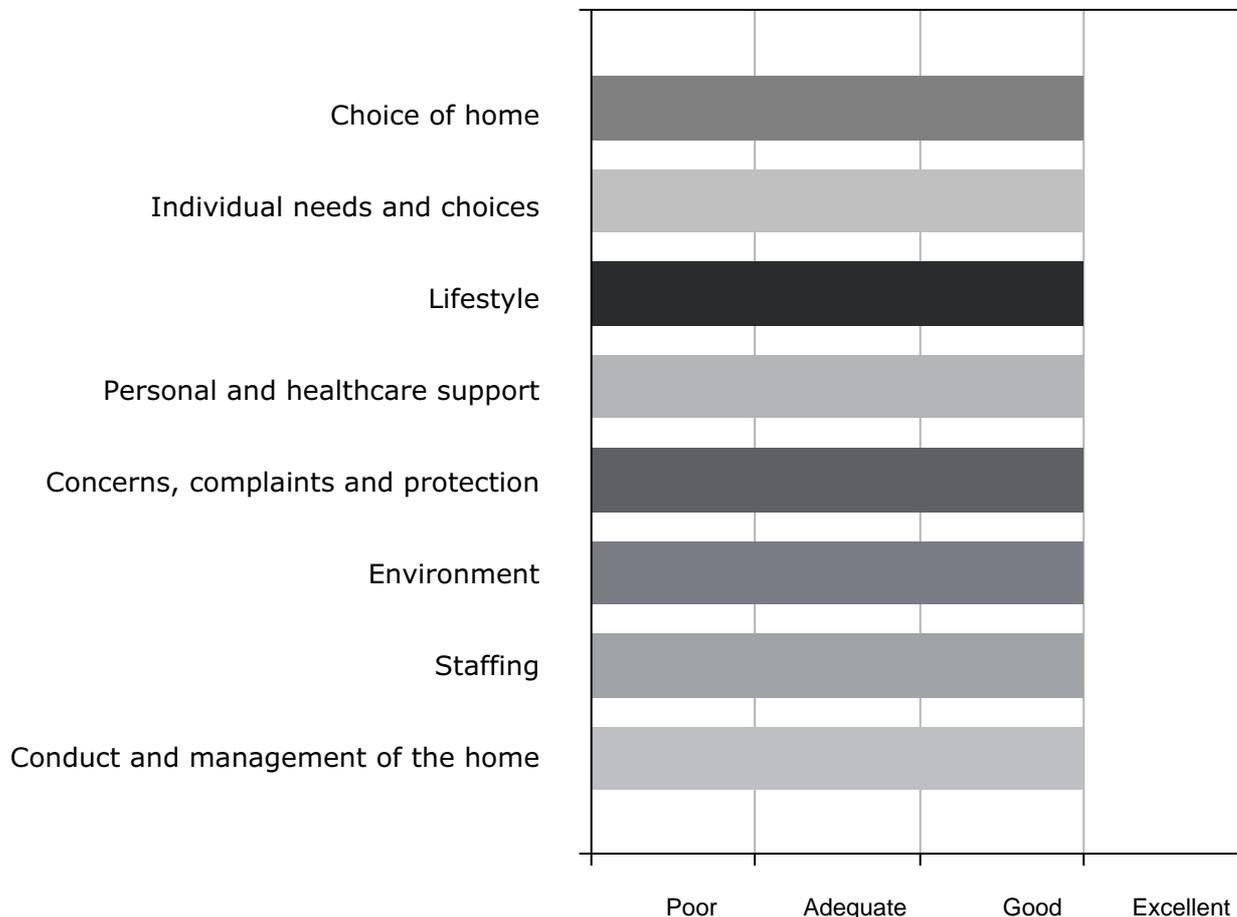
Summary

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

The quality rating for this care home is:

two star good service

Our judgement for each outcome:



How we did our inspection:

This inspection focused on assessing the main Key Standards. As part of the inspection process we reviewed information about the home that is held on file by us, such as notifications of accidents, allegations and incidents.

The manager of the home completed and returned an annual quality assurance questionnaire, containing helpful information about the home in time for the inspection.

The inspection included meeting the people at the home the home and case tracking two people's needs. This involves looking at their care plans and health records and checking how needs are met in practice.

Three people at the home completed questionnaires with support from staff, as part of the inspection process giving their views of the home.

Discussions were also held with two staff on duty and the manager. A number of records, such as care plans, complaints records, staff training certificates and fire safety records were also sampled for information as part of this inspection.

An expert by experience also attended the inspection site visit. An expert by experience is someone who has experience of using similar services. The experts by experience produced a written report of their findings and extracts are included in sections of this report.

What the care home does well:

Before people move into the home their needs are assessed and they are provided with opportunities to visit beforehand and meet with the people that live there. This is good practice and helps people to decide if the home is the right place for them to live.

Information about the service is made available to people in the home's service user guide and personal contracts in order that their rights are protected.

Everyone has a care plan in place explaining their needs so that staff can support them properly.

The people at the home are supported to get out and about and make use of places in the community, such as shops, colleges, pubs and hairdressers to help them to live a valued lifestyle.

People are supported to see relevant health professionals where necessary so that their health needs are properly monitored and met.

Staff regularly check that people are happy at the home so that any concerns can be quickly picked up and addressed. Staff at the home are receiving training to enable them to recognise and report any suspicions of abuse that might come to their attention so that people are protected from harm.

The home is clean and suitably furnished in order that people live in a place that is equipped to meet their needs.

Suitable arrangements are in place for vetting new staff to make sure they are safe to work at the home. Staff receive training so that they are equipped to meet people's needs properly.

The people that live at the home and other relevant people are periodically asked to comment on the service so that they can effect the development of the home.

Equipment at the home is serviced and maintained so that it is kept in safe working order.

What has improved since the last inspection?

Risk assessments are in place and up to date so that people are supported in a safe manner.

The kitchen and laundry room have been refurbished which has improved the look of the home for people.

Some staff have had equality and diversity training. This training helps staff towards a person centred approach to people's needs.

What they could do better:

There is scope for reviewing the weekend rota and looking at the way staff are deployed to provide the option for people who don't like going out with the rest of the

group to have an opportunity to go out on their own with staff at some point during the day.

There is a need to continue to closely monitor the needs of a person who rises during the night to see if waking night staff are necessary to keep them safe.

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

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

Details of our findings

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Choice of home

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

People are confident that the care home can support them. This is because there is an accurate assessment of their needs that they, or people close to them, have been involved in. This tells the home all about them, what they hope for and want to achieve, and the support they need.

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

This is what people staying in this care home experience:

Judgement:

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

Suitable arrangements are in place for assessing people's needs and providing them with information and support they need to move to the home in a sensitive manner.

Evidence:

Two people have moved into the home since the last inspection. Both people said that they were happy in their new home. Staff explained that the people concerned already knew the two other people living at the home so this made it easier for them to settle in. Prior to moving in both people attended social events with the people living at the home to make sure everyone got on well together. A person's file contained evidence to show that they had received support from an advocate to support them to move to the home.

Files contain contracts of terms and conditions, explaining what they may expect from the home and what they have to pay for. The contracts had been recently signed by the manager and the people at the home. Contracts are also signed by relatives or advocates, indicating that people are supported to have their rights appropriately represented.

Individual needs and choices

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

People's needs and goals are met. The home has a plan of care that the person, or someone close to them, has been involved in making. People are able to make decisions about their life, including their finances, with support if they need it. This is because the staff promote their rights and choices. People are supported to take risks to enable them to stay independent. This is because the staff have appropriate information on which to base decisions.

People are asked about, and are involved in, all aspects of life in the home. This is because the manager and staff offer them opportunities to participate in the day to day running of the home and enable them to influence key decisions. People are confident that the home handles information about them appropriately. This is because the home has clear policies and procedures that staff follow.

This is what people staying in this care home experience:

Judgement:

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

People's needs are planned for and reviewed with their involvement so that their needs can be met correctly.

Evidence:

Two people's care plans and records were looked at. Both care plans contained good levels of information to enable staff to provide the correct help and assistance to people. The care plans covered a good range of needs, such as daily living skills, health needs, dietary needs, social and emotional needs.

A staff photo board is in place in the kitchen with photographs of the staff on shift during the day. This is good practice as it helps people to remain aware of who will be supporting them. A person at the home said she had seen the board and was looking forward to seeing a member of staff who would be arriving on shift later in the day.

Risk assessments are also in place for people providing guidance for supporting people in a safe manner. The risk assessments take account of people's health needs and

Evidence:

hazards associated with everyday living, such as safety in the home, road safety and safekeeping of people's money. A protocol is in place for a person epilepsy detailing the actions that staff should take in the event that the person has a seizure. The protocol has been signed by an appropriate health professional, in keeping with good practice. A member of staff was able to demonstrate a good understanding of the protocol and how to respond in the event that the person concerned suffered a seizure.

People's care plans and health notes are dated to show that their needs are being reviewed and that they involved in this process.

The people at the home confirmed that they are involved in making everyday choices and decisions about what they eat and what they do. A communication book has been devised for a person who is unable to communicate verbally. This includes information about how the person communicates and some pictures of relevant makaton signs (sign language). A member of staff was able to demonstrate a good awareness of the makaton signs to be used and other ways in which the person makes their wishes understood.

Regular meetings are being held with people to enable them to make plans. The meeting notes show that this is also used as an opportunity to frequently check that people are happy and highlight any concerns they may have.

Lifestyle

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

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

People have opportunities to develop their social, emotional, communication and independent living skills. This is because the staff support their personal development. People choose and participate in suitable leisure activities.

This is what people staying in this care home experience:

Judgement:

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

The people at the home are provided with activities and meals they enjoy so they enjoy a satisfactory lifestyle.

Evidence:

On the morning of the site visit people were involved in choosing and making their breakfast and loading the dishwasher. Two people were seen to make cups of tea. One person also helped to prepare the vegetables for their lunchtime meal. The people at the home also confirmed that they are involved in cleaning and vacuuming their bedrooms and other parts of the home.

Three people go out to day services most of the week. Examples of activities included woodwork, dog racing, bowling trips and arts and crafts and pub meals. An older person at the home also attends a day service for older people one day a week, which they said they enjoyed.

Evidence:

One person said that they have retired (from day services). They receive support to remain at home during the week and go places they enjoy. They said that they enjoy going shopping and to the hairdressers and especially like visiting the market on Fridays. Other activities included, visiting the park, feeding ducks, charity shops, fish and chip restaurants, manicure and pedicure and hairdressers. They do not enjoy going out on Saturdays with other people, instead the person concerned prefers to do other things away from the group but there is not enough staff for everyone to go out individually. This was confirmed staff and the manager.

Three people have been supported to go on individual holidays of their choice during the year and one person did not do so due to ill health.

Three people at the home have their main meal provided by the day service during the week and have a light meal in the evening. Everyone indicated that they enjoyed the food provided to them. A meeting is held at the weekends to plan the following weeks menu. Pictures are used to help people to make their choices and their likes and dislikes are recorded in the care plan for staff to refer to also. As the group is small staff have gained a good understanding of people's likes and dislikes. One person who stays at home during the day cooks their own lunchtime meal with staff support. They have a separate menu that is printed on the notice board. Currently this is not illustrated with pictures to help the person to recall which meal they have planned for the day.

An expert by experience (i.e. a person who has had experience of using learning disability services) attended the inspection site visit. Their findings are recorded below:

"Glebe road is a supported living home for 4 adults with a learning disability. 3 men and 1 woman live there. It is not far from local shops and has good transport links such as trains and buses. When I arrived at Glebe Road I immediately noticed that it didn't seem to stand out as being a care home, it looked just like the other surrounding houses, which is great and it seemed well integrated in to the local community. I was pleased to be greeted at the door by a lady who lives there. It is my experience when doing inspections that the members of staff usually open the door so it was great to see a resident open the door, as it's their home. We were invited in and asked to sign in by the member of staff on duty.

There was the only resident at home, due to ill health, and the other 3 residents were out at day service returning about 4pm. It was great to hear that people were out

Evidence:

accessing community based activities rather than being at home as activities are an important part of peoples lives.

I asked the female resident about the things she likes to do and she said she enjoys going to church and going shopping to the market and she is supported by a member of staff to do this which is great as people should pursue their interests. She told me that she regularly visits her sister who lives nearby. She really enjoys seeing her sister and it's great that she has contact with this family member. I asked her whether she enjoyed living with 3 other men, as some people may not, she said, yes and was happy to show us pictures of all the people she lived with.

We talked about mealtimes and I was pleased that she knew what a menu was and where it was kept. I looked at the menu but I noticed that it wasn't very accessible; as it was hand written so I asked the lady what she was having for dinner that night but she couldn't tell me. She continued to tell me what her favourite meals and foods were, which I was extremely pleased to see were on the menu, suggesting the residents are very involved in choosing their meals. I would strongly recommend that the menu is made easier to understand by including pictures of the various food types so people know what they are eating.

The resident refereed to a red folder, that had her sisters number in it, but it was not clear to me what this was so she went and got it. The folder was her personal file, which although I did not need to see, it was really positive that the lady new where her file was, and what it looked like, and that she was able to get it if she needed it. This is very good practice, as people should contribute and be involved with their care plans.

The staff member asked me if I would like another drink and I was very pleased to see that she supported the lady to make my drink rather than the staff make it for me. It was fantastic to see that she is being encouraged to be independent in her own home. The lady seemed very relaxed, and showed me where all the things were kept in the kitchen. I noticed that there was a chart on the notice board in the kitchen that documented one of the resident's morning routine and their success with their continence. I did not feel the kitchen was an appropriate place for this to be as it's was personal and should be kept in their personal file to maintain confidentiality. In the kitchen was a picture board, which showed the residents clearly which member of staff was on shift that night. This is a brilliant idea, as people should be able to know in advance who is supporting them, and it was also in an accessible format for everyone. There was also a board showing clearly, in an accessible format, everyone who supported at Glebe Road.

Evidence:

The lady invited me to see her bedroom. She showed me some new items that she had bought for her bedroom, such as new duvet covers, a lamp, clock and cushions. The staff member on shift explained that the lady had chosen the things herself but staff had supported her to collect them. It's great that staff are respecting her as an individual and empowering her to make choices. Her bedroom was quite small, but had lots of pictures of her friends and sister, it was clean and appeared very homely. The lady obviously liked her bedroom, and enjoyed showing me her belongings. She was very excited to have her new belongings and said she would be sorting her bedroom out that evening. She continued to show me a holiday brochure, and said she was going on holiday. Holidays are an important part of life, and it's fantastic to see people are able to have holidays, but are really involved in the planning them.

Towards the end of my visit the other residents were due home. The staff member said that she was going to meet them off the bus as they all travel home on public transport. I think it's excellent that they are using public transport, and have their own bus passes as it gives them independence and ensures that they are part of their local community. It also gives people in the community the chance to meet people with learning disabilities and change people's perceptions. It's great that the staff member meets them off the bus, this is because the bus stop is round the corner and she explained that the people are quite vulnerable and may not sense danger. I felt their safety was being maintained, but their independence was not being compromised.

I spoke to a male resident who had come home. He told me that he had had a good day at the day service. I asked him what he likes to do and he said he likes to go to Birmingham on the train and Warwick Castle. The staff member said that additional staffing was always put in place at weekends so that people can go out. It's great that people get the opportunity to go out with the right amount of support and that their activities were varied and were their own choices. Another gentleman told me he had been on holiday to Weymouth, and had really enjoyed it. He had gone with a member of staff. I was really pleased to hear he had been on holiday, and has chosen the destination himself. It was evident he had had a great time, from all the pictures on the wall.

I spoke briefly to the member of staff about employment within the home. She said that none of the residents had expressed an interest in working, but the member of staff was very clear on how she would support a resident if this was to change. She referred to an example of this at a previous home she had worked at. I was very pleased to hear that people would be supported to work, and that their desire to work

Evidence:

would be valued. It is important that people with a disability are not excluded from employment opportunities. What was evident is that one residents had a really close and positive relationship with the staff on shift. Whilst professional boundaries were very apparent, the resident particularly enjoyed the company of the staff member and felt very at ease with her.

The home was very welcoming, and I was happy to see that the resident's independence was respected, but when support was needed it was given. The furnishings were modern, and the house felt warm. Everyone seemed very relaxed and appeared to have a really good relationship with each other".

Following the inspection visit the manager said she would remove the continence chart from the wall (referred to above) and ensure that is filed away from public view, to protect the privacy of the person concerned.

Staff explained that they are encouraging people to eat more healthily where possible by buying low fat foods, spreads, milk and low sugar drinks. Evidence of this was seen in the fridge and cupboards.

Personal and healthcare support

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

People receive personal support from staff in the way they prefer and want. Their physical and emotional health needs are met because the home has procedures in place that staff follow. If people take medicine, they manage it themselves if they can. If they cannot manage their medicine, the care home supports them with it in a safe way.

If people are approaching the end of their life, the care home will respect their choices and help them to feel comfortable and secure. They, and people close to them, are reassured that their death will be handled with sensitivity, dignity and respect, and take account of their spiritual and cultural wishes.

This is what people staying in this care home experience:

Judgement:

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

The people at the home are provided with the support necessary to meet their personal care and healthcare needs.

Evidence:

In surveys returned by three people at the home they all confirmed that they like the staff and are treated well. This was also verified with them during the inspection site visit. The two staff on duty during the site visit were very polite and friendly. The people at the home looked very comfortable and at ease when approaching staff for support and the staff were observed to respond in a patient and friendly manner.

Everyone was well groomed and dressed in age appropriate, well laundered clothing, indicating they are supported to take a pride in their appearance and to maintain a good self image. One person said that they enjoy visiting the hairdressers for a haircut every two weeks.

Two people's health records were checked. The records show that staff are closely monitoring people's health needs. Good work is taking place to arrange meetings with relevant professional workers to consider the health needs of a person who may not

Evidence:

be able to consent to treatment and to consider what is in their best interests.

Both people's records show that they are being supported to gain access to routine checks and treatment, such as chiropody and eye tests. The manager explained that no dental checks were carried out last year due to the unavailability of an NHS dentist in the area. This has since been addressed and people are now registered with a dentist and are receiving check ups.

Two staff confirmed that they had been provided with medication training and were assessed as safe to give out medication before being allowed to do so. This was verified in staff training records.

Most medication is stored in blister packs set up by the pharmacist. A member of staff explained that new medication is checked into the home to make sure it is correct and a note of the number of tablets received is recorded on the medication sheet. This was verified in entries on recent medication sheets.

Some medication is provided in boxes. A running total of each person's individual boxed medications is kept so that everyone is clear about the number of tablets in the home at any one time. Two people's boxed medications were checked and found to balance correctly against the records.

The manager explained that two weekly audits are carried of the medication system so that any shortfalls may be picked up and addressed. This was verified in audit records.

A record of medication returned to the chemist was seen. The record includes the pharmacist signature, as evidence of receipt of medication returned to the pharmacist.

Concerns, complaints and protection

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

If people have concerns with their care, they or people close to them, know how to complain. Their concern is looked into and action taken to put things right. The care home safeguards people from abuse, neglect and self-harm and takes action to follow up any allegations.

There are no additional outcomes.

This is what people staying in this care home experience:

Judgement:

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

People are supported to raise concerns and complaints and staff are trained to recognise and respond to suspicions of abuse so that people are protected from harm.

Evidence:

An accessible complaints policy and procedure is on display in the service user guide in the hallway of the home. In surveys returned by three people at the home they all indicate that they have been told how to complain. Regular meetings take place with the people at the home. The records show that staff use these meetings to check that people are happy with their life at the home and with the support they receive from staff.

There have been two minor complaints made directly to the home. Entries in the complaints log demonstrate that one of these complaints has been effectively followed up and dealt with. The notes of the second complaint are less clear as to the outcome of the complaint. This was clarified by the manager who agreed to update the complaints log appropriately.

Two staff at the home confirmed that they had received safeguarding training which is designed to enable staff to recognise and report any suspicions of abuse. This training is necessary so that people are protected from harm.

One safeguarding complaint was reported by the home after three people's money

Evidence:

went missing when it was passed to day services staff to look after. This was properly reported and the lost money was found. This has led the home and the day service to review the way in which money is passed and recorded between the staff of the different services.

Two people's money records were looked at. Any money spent on behalf of people is being logged and signed for by staff and receipts are being retained as evidence of items purchased. The manager said that staff access to people's cash cards and pin is controlled by herself and a senior worker and that all withdrawals are recorded and checked against the statements when they are received. The manager agreed to introduce a record to more closely account for the times and dates that staff have access to people's bank cards so that this can be married up with withdrawals on statements later, as a further safeguard for people's money.

Environment

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

People stay in a safe and well-maintained home that is homely, clean, comfortable, pleasant and hygienic.

People stay in a home that has enough space and facilities for them to lead the life they choose and to meet their needs. The home makes sure they have the right specialist equipment that encourages and promotes their independence. Their room feels like their own, it is comfortable and they feel safe when they use it. People have enough privacy when using toilets and bathrooms.

This is what people staying in this care home experience:

Judgement:

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

The people at the home are provided with a comfortable and clean environment that meets their needs.

Evidence:

There is a welcoming, warm atmosphere in the home and at the time of the site visit it was homely comfortable and safe.

Since the last inspection good work has taken place to refurbish the kitchen and the laundry room. Two people's bedrooms have also been redecorated. Consideration has been given to the needs of a partially sighted person by brightening up the decor and improving the lighting on the stairs.

A person at the home explained that they had recently shopped and chosen curtains and bedding for their newly decorated bedroom. Everyone's bedroom looked clean and tidy and there was ample evidence to show that people are supported to personalise these areas to their liking and taste with pictures, music playing equipment and other belongings.

Gloves and aprons are available in the home for staff to use. Staff help people to clean and tidy their bedrooms. A cleaning schedule is in place to prompt staff to clean

Evidence:

different areas of the home. The home was clean and free from any unpleasant odours. Infection control training is included in mandatory training for all staff.

Staffing

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

People have safe and appropriate support as there are enough competent, qualified staff on duty at all times. They have confidence in the staff at the home because checks have been done to make sure that they are suitable. People's needs are met and they are supported because staff get the right training, supervision and support they need from their managers.

People are supported by an effective staff team who understand and do what is expected of them.

This is what people staying in this care home experience:

Judgement:

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

Staff are appropriately vetted and trained so that people receive support from suitable staff who are equipped to meet their needs.

Evidence:

Staff were seen to relate well to the people that live at the home and be responsive to their needs. The people at the home looked relaxed in the company of staff indicating that they like them. Everyone confirmed that the staff are helpful and friendly.

Staff confirmed that the home keeps to the scheduled rota 1 or 2 staff on duty staff on duty, depending on whether people need support to go out places. There is also a member of staff sleeping in at nights in the event that any support is required by people. Comments by staff indicate that one person often rises during the night and they respond by checking the person is safe. The manager said that she would continue to monitor the impact of this on staff time at night and seek extra funding for waking night staff if necessary.

Two staff on duty each confirmed that they are provided with routine annual training updates to equip them to support people in a safe manner. This included such subjects as first aid, food hygiene, fire safety, moving and handling and medication. This was also verified in staff training records and discussions with the manager.

Evidence:

Staff also confirmed that they had been provided with access to training to achieve National Vocational Qualifications (NVQ's). The manager reports that over half the staff now hold NVQ's at level 2 or above and more staff are being supported to train for these qualifications. These courses are designed to equip staff to carry out their work effectively. Staff have also been provided with other care courses, such as epilepsy, autism and The Mental Capacity Act to enable them to meet people's needs in the correct manner.

Two staff files were checked. Both files contained evidence to show that new staff are being properly vetted, including, Criminal Record Bureau checks and references. This is necessary to ensure that people are supported by suitable staff. Staff confirmed that they receive regular planned supervision from the manager. Further evidence of this was seen in a staff members supervision records.

Conduct and management of the home

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

People have confidence in the care home because it is run and managed appropriately. People's opinions are central to how the home develops and reviews their practice, as the home has appropriate ways of making sure they continue to get things right. The environment is safe for people and staff because health and safety practices are carried out.

People get the right support from the care home because the manager runs it appropriately, with an open approach that makes them feel valued and respected. They are safeguarded because the home follows clear financial and accounting procedures, keeps records appropriately and makes sure staff understand the way things should be done.

This is what people staying in this care home experience:

Judgement:

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

Suitable arrangements are in place for involving people and for the safe management of the home.

Evidence:

The manager has worked at the home for a number of years, supporting consistency of care to the people living there. In addition to the manager, the home employs a senior worker to support in the management of the home.

The home has a number of quality assurance measures in place that are suitable for the small size of the home. Surveys have been sent to people's relatives and professionals involved with the home and compiled into a report to summarise the findings. This is good practice and enables people to contribute to the ongoing improvement of the service.

Monitoring visits are being routinely carried out by a senior manager of the organization to check that the home is running smoothly. The reports are being promptly written so that the manager is clear about any areas of improvement

Evidence:

identified.

Fire equipment tests are carried out at the home. The fire records were sampled. Entries in the log demonstrate that fire alarms and emergency lights are routinely tested to check they work properly in the event of a fire. Certificates and records confirm that a gas safety check has been carried out and that electrical equipment has been tested to make sure it remains in safe working order.

Hot water temperatures are being regularly checked to ensure the hot water temperature does not exceed 43 degrees centigrade, so that people are not placed at risk of being scalded.

Cleaning materials are kept locked away so that they do not present a hazard to anyone at the home and data sheets are in place to advise staff on the safe use of cleaning products.

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
1	13	Action should be taken to review the weekend rota to provide the option for people who don't like going out with the rest of the group to have an opportunity to go out on their own with staff at some point during the day.
2	33	Monitor the needs of the person that rises during the night to determine if waking staff support is required to keep the person safe rather than sleep-in workers.

Helpline:

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Web: www.cqc.org.uk

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