

Key inspection report

Care homes for adults (18-65 years)

Name:	Chaffinches, St Anne`s Opportunity Centre,
Address:	108 Paynesdown Road Thatcham Berkshire RG19 3TE

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

Lead inspector:	Date:
Kerry Kingston	0 7 0 4 2 0 1 0

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

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

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

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

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

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

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

Outcome area (for example Choice of home)

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

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

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

This is what people staying in this care home experience:

Judgement:

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

Evidence:

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

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

Copies of the National Minimum Standards – Care Homes for Adults (18-65 years) can be found at www.dh.gov.uk or bought from The Stationery Office (TSO) PO Box 29, St Crispins, Duke Street, Norwich, NR3 1GN. Tel: 0870 600 5522. Online ordering from the Stationery Office is also available: www.tso.co.uk/bookshop

The mission of the Care Quality Commission is to make care better for people by:

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

Reader Information

Document Purpose	Inspection report
Author	Care Quality Commission
Audience	General public
Further copies from	0870 240 7535 (telephone order line)
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Internet address	www.cqc.org.uk

Information about the care home

Name of care home:	Chaffinches, St Anne`s Opportunity Centre,
Address:	108 Paynesdown Road Thatcham Berkshire RG19 3TE
Telephone number:	01635874836
Fax number:	0163540862
Email address:	stannesopportunitycentre@btconnect.com
Provider web address:	

Name of registered provider(s):	St Anne`s Opportunity Centre Ltd
Name of registered manager (if applicable)	
Mrs Samantha Chengun	
Type of registration:	care home
Number of places registered:	3

Conditions of registration:		
Category(ies) :	Number of places (if applicable):	
	Under 65	Over 65
learning disability	3	0
Additional conditions:		
The maximum number of service users who can be accommodated is: 3		
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: Learning disability - LD		

Date of last inspection									
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Brief description of the care home
Chaffinches is a small residential home, established in 1993, offering support to three service users with complex emotional needs and moderate learning difficulties. The Service users are aged between 18 and 65. The home is one of three small homes with a similar purpose, run by St. Anne's Opportunity Centre Limited, a West Berkshire based care provider. It is a semi-detached house situated in a cul-de-sac, which leads to entrances to the local primary school, on the borders of Thatcham and Newbury.

Brief description of the care home

The purpose of the company is to facilitate the development of the individual to attain independent living skills and management of behaviour that can be challenging.

The current scale of charge ranges from £922.11p to £1,063.34p per week.

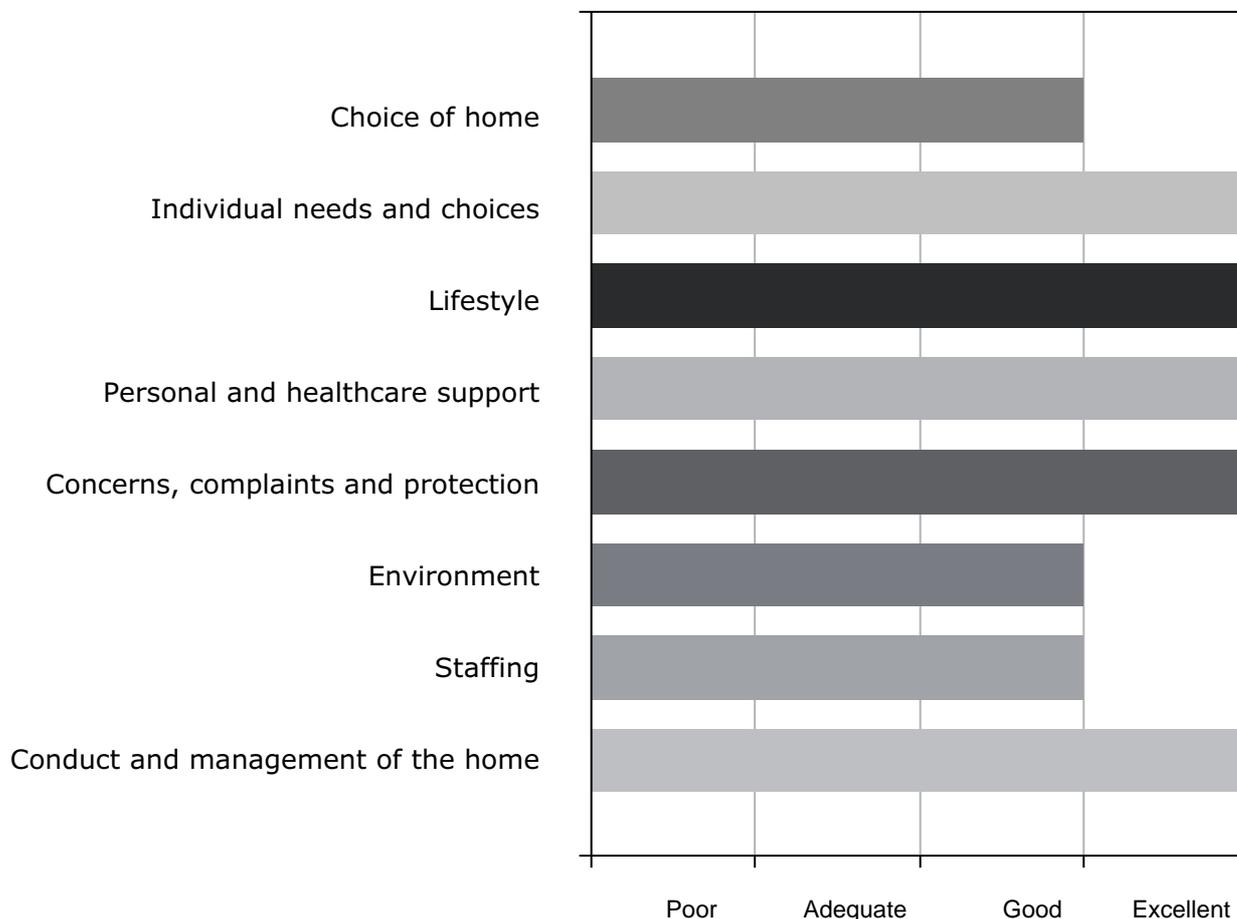
Summary

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

The quality rating for this care home is:

three star excellent service

Our judgement for each outcome:



How we did our inspection:

The last inspection on this service was completed on the 18th April 2007. This is a report for the key inspection, which included a routine unannounced site visit to the service.

This took place between 10.15 and 2.15 pm on the 7th of April 2010. The information was collected from an Annual Quality Assurance Assessment, a document sent to the service from the Care Quality Commission and completed by the registered manager, Samantha Chegun, surveys returned to us by the three people who use the service, staff of the home helped them to complete them and five surveys returned to us by staff who work in the home.

Discussions with two people who live in the home, the manager and one other staff member took place.

Limited observation of people and their interactions with staff took place during the visit to the home.

Reviewing records of the people who use the service and other records and procedures

was also used to collect information on the day of the visit.
All information received by the Commission since the last inspection, about this service was also taken into account when producing this inspection report.

What the care home does well:

The service makes sure that it writes things down very carefully so that everybody knows what people need and how staff are going to help them. The home has very good risk assessments so that people can be helped to be as independent, as they are able, as safely as possible. People are encouraged and allowed to make as many decisions about their lives, as they are able.

People are involved in planning their daily activities, which include going to work and to college, and are supported to lead a busy and happy life. People are helped to keep in contact with people who are important to them. The people who live in the home go shopping for their food and staff help them to choose and prepare it.

The home make sure that people are helped in a way that they prefer by asking them to agree to how they are to be helped and sticking to the ways of helping them that is written down. The home has written down what help people need to make sure that they stay as healthy as they can and support people to go to the Dr or nurse when they need to. The staff give people their medicine in a safe way and they also help people to be responsible for taking their own medicines, if they can.

The home make sure that people are not badly treated by anyone, they listen to what people say to them and know what to do if they are worried that people do not feel safe. People feel safe, in the home and are happy to talk to staff if they have any worries or concerns.

The home is run by a manager who has been there for a long time and knows what she is doing. People are very happy to talk to her and ask her to change things if they are not happy with them.

The people who live in the home are very involved in making any changes to improve their lives. The home make sure that they regularly check that they are giving people the best possible care.

What has improved since the last inspection?

The home has replaced the kitchen worktops and cupboards and it looks very clean and tidy.

What they could do better:

The manager agreed to look at whether the radiators are safe, because they are not covered.

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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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, 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.

The home make sure that they can continue to meet the needs of the people who live there.

They have effective referral, assessment and admission policies and procedures to ensure that any prospective resident would be properly assessed before admission.

Evidence:

There have been no admissions since September 2001. The Provider has a revised, up-to-date, referral, assessment and admission procedure which includes, introductory visits and the development of an introductory programme to meet the assessed needs of an individual.

The AQAA notes and peoples' care plans demonstrate that the home regularly review placements to ensure it continues to meet peoples' current and changing needs.

The home has a Service User Guide that is produced in an easy to read format, it includes pictures and symbols and/or simple English dependent on the needs of individuals.

Evidence:

The Statement of Purpose and Service User Guide have been reviewed and up-dated.

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

The three people who live in the home know their assessed and changing needs, they know and agree to how they are going to be supported to meet them, by the staff team.

People are supported to make as many decisions, as is possible, about their life and they are encouraged and helped to become as independent as possible.

Evidence:

The plans of care for one person were looked at, in detail. The home has extensive care planning tools, each person has three files that form the overall care plan. Information is extremely detailed and presented in an effective way to ensure it can be used as a daily working tool. Content includes contacts (social/families), financial which includes all aspects of benefits, saving plans and financial management needs, general health, daily living, relationships, person centred plans (a sort of simplified overall care plan for easy reference), an 'all about me' booklet, mental capacity assessments and aims and development plans. All records are up-to-date, informative and used as effective working tools. All areas of peoples' life is covered and emphasis

Evidence:

is placed upon equality and diversity needs, that is person centred plans are very individualised to meet all the needs of the individual such as autistic needs, relationships and emotional support.

The AQAA noted that weekly house meetings are held, the registered manager confirmed that these happen regularly and notes are taken for future reference. People also have 1:1 sessions with the manager on a weekly basis to give them the opportunity to express any worries, to discuss contracts/agreements, their agreed coping strategies and /or future plans. People contribute fully to the annual development plan for the home, one person described their input into the planning meeting , what they had said they would like and confirmed that the home had provided it. One person described the weekly 1:1 sessions and said that they could say what they liked, the manager always listened and made changes as a result of the discussions, if necessary. All daily and behavioural programmes are agreed with people before being implemented and they are enabled to change their lifestyle activities as they wish, if appropriate, with support and advice from staff.

Risk assessments are of an excellent quality and cover all necessary areas, according to individual need. They help staff to support people to be as independent as possible as safely as possible, for instance one person is able to access the local shops unaccompanied because there are no roads to cross. The risk assessment is very detailed with timings and possible risks identified and minimised. Another person is able to access some areas in the wider community unaccompanied, after an extensive community safety programme, and another able to go wherever they choose, unaccompanied.

One person has chosen to try to live more independently, the home have discussed the risks but they have made their own decision. The home are helping them to prepare for this move, as far as possible, to ensure have the best chance of successfully achieving a more independent lifestyle.

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

People are given opportunities to take part in interesting and rewarding activities, which they are fully involved in choosing. They are assisted and encouraged to take part in the community and use all available community facilities. People are offered balanced and nutritional meals that they are fully involved in choosing and preparing.

Evidence:

All three activity plans were seen, these are agreed with individuals and comprise of activities that they like doing and some that 'match' with the aims noted at reviews. People are supported to have work experiences, some have long standing work placements that staff help them to maintain. They also attend college, do daytime activities, visit the community and attend evening social activities, as they wish. One person said that they are always involved in deciding on their activity programme. The manager described how they assist people to succeed in college and work placements

Evidence:

by working with college staff or employers to help them to understand the individual and how to more successfully communicate/work with them. One person said they are always busy, they love to be busy and staff make sure that they have plenty to do, which makes them feel more calm and less anxious. They said that they like things to go 'as planned' and staff develop programmes for them to make sure that they 'usually do'. They said that they are very happy with their lifestyle and all the activities that they do and they feel that they have control over their life. Another person said that they really enjoy all their activities and feel that the home support them to do everything that they want to do. They said that they did not think that they could have worked in their job so long without the help of the staff at the house. People consistently access the local community, making use of all the local facilities and amenities. The AQAA noted that people have more trips to theatre, cinema and social activities, this was confirmed by records and by the people who use the service.

All three people have contact with their families, two people are in regular contact and one person has limited contact but all are supported to maintain and develop relationships and friendships.

People are fully involved in choosing their food, they shop for it and prepare it. Food preparation forms part of peoples' activity programme and each individual is rota'd to help with preparing a main meal. People get their own breakfast and lunch, they have an allocated budget to purchase their own food, they also take turns to buy some joint food that they will all eat. The three people are very happy with the system, people said that they like all the food and are very involved in the choosing, buying and cooking of it.

People are involved in healthy food and hygienic food preparation training.

There are, currently, no nutritional issues affecting people who live in the house but there is provision to monitor weight as an indicator of health and well being, if necessary.

Menus are recorded individually.

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

The home meet the peoples' personal and emotional needs very well.

They ensure that people are helped to stay as healthy as possible.

Medication is administered safely and people are supported to take responsibility for their own medication, as appropriate.

Evidence:

People have detailed plans of care that include person centred plans. They are fully involved in the development of the plans. Peoples' preferences and dislikes are recorded in detail, entitled 'my dreams' and 'my nightmares', that is, what people do like and what people don't like. 'Dreams' and aims are agreed and recorded at the annual review, they are subsequently developed into programmes which are constantly monitored to see if people have achieved them and/or if they need adjusting or are still relevant and desired by the individual. Plans of care are reviewed annually as a minimum and more often as necessary, for instance if needs change. Peoples' personal needs are detailed although most people are able to deal with their own personal care, any area that they may need help with is identified. Programmes are in place, as necessary to support people to achieve an acceptable standard of personal care. All programmes are agreed with individuals who are aware of how staff

Evidence:

are going to support them to meet their needs.

Everyone has a detailed health care plan, which includes all relevant information to assist with keeping them healthy. Annual health checks now include blood tests and the manager is very aware of any new medicines that may support people to control any medical conditions, such as new medication for asthma and cervical cancer immunisation. Health care plans also make reference to individuals' capacity to consent. People have a fully completed 'about me' booklet which they are able to take with them if they need to stay in hospital, this helps hospital staff to communicate with them and understand their special needs. The home has detailed records of any visits to health care professionals and all health care checks are up-to-date. There are excellent records with regard to health care activity and how to help people with any health care issues, all are individually developed with the person to ensure their agreement.

People have well developed and detailed behaviour 'contracts', as necessary. People are involved in and sign to say that they agree with the way staff will help them to adhere to the 'contracts' (behaviour programmes). The two people spoken to were very aware of how staff help them with any behaviour issues they may have. Staff are all trained in the use of 'breakaway' techniques, taught as non violent crisis interventions, they do not currently use any physical restraints.

Some people are supported to self administer medication, all the necessary risk assessments are in place, to ensure this is done as safely as possible. The home keep records to enable them to effectively monitor anyone who self administers their medication.

One person has medication administered via a monitored dosage system, records seen were accurate. All medication is stored securely, the home has no controlled drugs and no medication is used to help with behaviour control.

There was a discussion about whether the home could reduce the amount of stock of 'homely remedies' kept.

The local pharmacist visits the home on occasion and is always available to offer help and advice to the home.

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

The home has a comprehensive complaints procedure and people are confident that they are always listened to by staff, who take any action that is necessary or appropriate to alleviate any concerns. People who live in the home feel very safe and staff know how to protect people from all forms of abuse.

Evidence:

The home have a comprehensive complaints policy, produced in a user friendly format and included in the Service User Guide. People spoken to were very clear about how they would make a complaint if they needed to. There have been no complaints recorded about the home (except a neighbour complaining about slamming doors) for several years. Peoples' views are recorded in several ways, such as the house meeting book, reviews of plans of care and notes of 1:1 meetings with the manager. People said that they are always listened to and staff take action, whenever possible to make sure that they are happy.

The manager confirmed (as noted in the AQAA) that there have been no safeguarding referrals or issues. The abuse policy is simply produced for the people who use the service. Staff are trained in the safeguarding of vulnerable adults (POVA) and their training is up-dated, as necessary. The two people spoken to said that they felt very safe in the home and that they could talk to any of the staff and the manager if they had any concerns or worries. Staff spoken to had a good understanding of

Evidence:

safeguarding, knew their moral and legal responsibilities to those in their care and were aware of where to take any concerns, outside of the organisation, should it ever be necessary. They said that they are very confident that any issue raised that concerns peoples' safety or well being would be addressed, immediately. The Commission has received no information with regard to complaints or safeguarding issues, about this service since the last inspection.

Peoples' behaviour plans are produced in the form of 'contracts', agreed by the people they relate to so that everyone knows how behaviours will be dealt with and how people will be supported with them. The home does not use physical restraint although all staff are trained in the use of non violent crisis intervention, with the focus being to de-escalate behaviours. Detailed incident reports are completed, as necessary.

Individuals have a financial passport that details all income and expenditure and how people are to be supported with their finances. All deal with their own money, with varying degrees of support, as detailed in their financial passport. Receipts are kept, when appropriate, to monitor the amount of money being spent and what on.

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 house is kept to a good standard of hygiene, is comfortable and is a pleasant environment to live in. The home meets the individual and group needs of the people who live there.

Evidence:

The house is small but homely and well kept. Peoples' individual space is highly personalised and includes entertainment equipment such as music systems, TVs and D.V.Ds. The kitchen has new work surfaces and cupboards and was clean and hygienic on the day of the visit. The home has a maintenance plan, a maintenance man and a good relationship with the landlord who effects repairs when necessary. The provider is responsible for the internal decor and residents said that they choose their own colour schemes and furniture and fittings. One person was going with staff to choose bedroom curtains, on the day of the visit. Any environmental enhancements/changes made to meet the needs of an individual are negotiated with the landlord or the provider accepts financial responsibility, as appropriate.

Fire doors and additional smoke detectors have been installed to meet new fire regulations and were recommended by the fire officer.

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.

The home has a well qualified staff team, who undertake training to enhance their ability to offer a high standard of care to the people who live there. There are sufficient numbers to meet the needs of the people who live there, currently.

Evidence:

The three people who live in the home have high levels of independence, the home therefore work with one person per shift. Two people are able to access the community independently and stay in the home with no staff present. Daytime hours are from 9.30am to 9.30pm, with someone available in the house the rest of the time but not necessarily working with people, that is supervising breakfast, being available in the evenings if needed and doing a sleep-in, to be available if required. Most staff are part time, consistency is provided by the team leader or manager being on duty for part of most days and there is an on-call system that staff can access, if necessary. Additional staff are rota'd on for any special events and for some evening activities, as necessary. The home has not had anyone leave in the past year. They do not use agency staff, any shortfalls are covered by permanent staff doing extra hours or using bank staff, who the people who live in the home know.

The staff records are kept in the homes' head office, a few miles away and are always

Evidence:

accessible, if required. The manager confirmed that she sees all the staff records at interview and/or prior to employment. She confirmed that all staff have a CRB check, have two references, have identification and all the other necessary paperwork before they begin work in the home. She is part of the interview panel and residents are involved, if they choose to be, in some aspects of the recruitment procedure.

Staff are well trained, nine of the 13 permanent care workers have an NVQ 2 or above qualification, as noted on the AQAA.

The home ensures people have relevant (to the needs of individuals) training, such as mental health and autism training.

A staff member said that they get very good opportunities to complete appropriate training courses and described several that they had completed recently.

The manager and records confirmed that people also complete Learning disability framework training, if they do not have experience in this area of care work.

Training records showed that people complete and up-date all training, as appropriate.

Two people who live in the home said the staff were 'great' they will always help you but let you do 'your own thing' if you need to. Staff were seen interacting with people sensitively and positively and people who use the service appeared too be very confident and comfortable in their interactions with staff.

Staff spoken to had an in-depth knowledge of the needs of each individual, as did the manager.

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

The home is very well managed in the best interests of the people who live there. The home has ways of looking at the quality of care it offers and continues to develop to ensure it offers people the best quality of life, possible. The home keeps people as safe as possible, by adhering to its' Health and Safety Policies and Procedures and acting swiftly on any advice given from other professionals/specialists.

Evidence:

The manager has been in post for 16 years, since its' registration. She has all the necessary management and care qualifications and additional teaching qualifications so that she is able to contribute to staff training. Staff described the management as very supportive and always there if needed. People who use the service said that they can always talk to the manager if they need to and she is never too busy for them. Staff surveys noted that the management team are supportive and encouraging. The five staff surveys received were very positive with only two critical comments one being that there is not always a proper handover and the other that staff are not always consistent, the manager is aware of both of these issues and is developing

Evidence:

strategies to overcome them.

The home has robust quality assurance processes which include regular regulation 26 visits , these are recorded necessary actions are noted and checked at the next visit. The home sends out annual questionnaires to interested parties such as care managers, involved health professionals, peoples' families and the people themselves. The provider collates the responses and they are included on the annual development plan along with information taken from people who use the service (from weekly house meetings, weekly 1:1s with the manager and care reviews). All information gathered over the year is discussed in a development meeting that all residents participate in. One person described how they are involved in the annual development plan meeting, what people asked for and the outcomes of some of their requests, such as room redecorations and equipment for the garden. They said that they feel part of any changes and know that staff listen to their ideas.

The home has a comprehensive Health and Safety folder which houses all health and safety records including maintenance certificates. All necessary health and safety checks are completed under contract at the prescribed time.

Fire information is kept separately, the home recently installed some fire doors and additional smoke detectors as a result of fire officer advice. Requirements made by the fire officer have been met, he visited on 1/12/09 to check requirements were met and was satisfied that they had been, these included a new and more comprehensive risk assessment that has now been adapted to be used for other health and safety risk assessments.

Radiators in the home are not covered, the manager agreed to risk assess them, as soon as possible, to ensure that they are safe.

A thermostat was recently fitted to the boiler to make sure that water is at safe temperatures at total immersion outlets.

The home keeps detailed accident and incident records, as necessary. There have been no accidents reported during the past year.

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

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