



Making Social Care  
Better for People

Inspecting for better lives

# Key inspection report

## Care homes for adults (18-65 years)

<b>Name:</b>	Michael House
<b>Address:</b>	MacCallum Road Enham Alamein Andover Hampshire SP11 6JA

The quality rating for this care home is:

three star excellent service

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.

<b>Lead inspector:</b>	<b>Date:</b>
Peter McNeillie	0 7 0 4 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 Adults (18-65 years) can be found at [www.dh.gov.uk](http://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](http://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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## Information about the care home

Name of care home:	Michael House
Address:	MacCallum Road Enham Alamein Andover Hampshire SP11 6JA
Telephone number:	01264345800
Fax number:	
Email address:	Karen-sawyer@enham.org.uk
Provider web address:	

Name of registered provider(s):	Enham
Type of registration:	care home
Number of places registered:	23

Conditions of registration:		
Category(ies) :	Number of places (if applicable):	
	Under 65	Over 65

physical disability	23	0
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Additional conditions:

The maximum number of service users to be accommodated is 23

The registered person may provide the following category of service only: Care home only (PC) to service users of the following gender: Either whose primary care needs on admission to the service are within the following category: Physical disability (PD)

Date of last inspection								
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Brief description of the care home

Michael House is one of three of three similar registered residential facilities which is part of The Enham Organisation, a charitable trust situated in the North Hampshire village of Enham Alamein close to the towns of Andover and Newbury in Berkshire.

The home is registered to provide care and support for up to twenty three residents with a physical disability, the majority of whom participate in work of their own choosing at the at the resource and development centre on the same site.

Michael House is a modern, purpose-built two-storey building fitted with a range of electrical and mechanical aids and equipment designed to assist residents maintain as independent life as possible.

### Brief description of the care home

The establishment also incorporates an assessment suite, where prospective residents are invited to stay prior to a permanent admission.

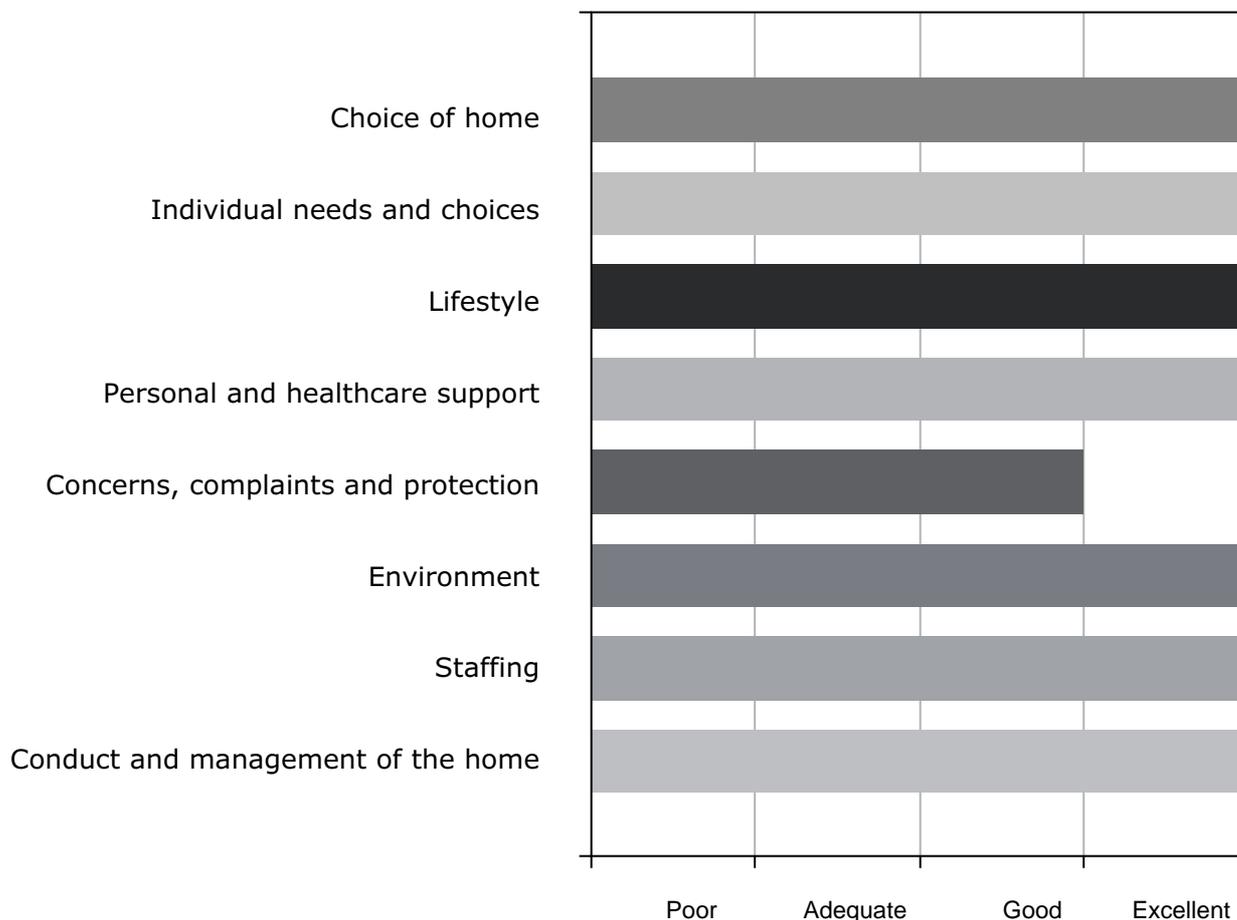
## Summary

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:

This report was written after taking into consideration a number of sources of evidence and information, including a site visit to the premises and sampling residents and staff training/ recruitment records.

We also talked with residents, staff and management and received a response by the manager to a pre inspection Annual Quality Assurance Assessment. (AQAA). Responses were also received from staff, residents, resident's representatives and visiting health care professionals to clients to a CSCI pre inspection satisfaction survey.

During this inspection which took place on 06/04/09 between the hours of 9.00 am and 1.30 all of the key standards for younger adults were inspected The results and

findings contained in this report will determine the frequency and type of future inspections.

The fees at the time of our visit ranged from six hundred and eleven and six hundred and thirty five pounds per week.

The charge for an initial three week assessment was two thousand seven hundred and seventy pounds.

**What the care home does well:**

The home provides care and support by a stable, well-managed supported, motivated, trained and qualified staff team who work in a manner that recognises clients need for personal privacy, dignity and the the need to achieve or regain independence. Outcome areas of particular note were the assessment and care planning processes, lifestyle, personal and health care support, the environment, staffing and the management of the service all of which we rated as excellent.

**What has improved since the last inspection?**

Since the last inspection the outcome areas rated as excellent have increased to include lifestyle, personal and health care support, staffing and the management of the service.

**What they could do better:**

There were no areas of concern. No requirements or recommendations have been made following our inspection for the third successive time.

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](http://www.cqc.org.uk). You can get printed copies from [enquiries@cqc.org.uk](mailto: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, 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 **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 system of assessing and identifying residents needs in which the resident participates which ensures residents safety and their assessed needs can be met.

Evidence:

The manager in the AQAA informed us, that all admissions are carried out in accordance with an admissions policy and procedure that requires that no resident be admitted without a full assessment of needs and attendant risks being carried out.

The procedure requires that, following a referral (usually from a local authority care manager) the prospective resident would be invited to visit the home. Should all parties feel that the home could meet the individuals needs, a more detailed self assessment form is completed by the resident and /or their representative on receipt of which arrangements are made for an in house three week formal assessment to be undertaken.

## Evidence:

At the commencement of the three-week assessment a multidisciplinary pre assessment meeting takes place. This meeting allows all parties to update, identify or clarify any areas of concern as well as identifying any special requirements the person might have during the assessment as well as answering any worries or concerns. Also if the formal assessment takes place some time after the initial referral information can be updated to take these changes into account.

During the initial three-week assessment period the prospective residents who would live in an assessment flat is also invited to visit and stay in any of the two sister homes to allow a comparison between the various facilities on site.

At the end of the three-week assessment period a multidisciplinary review of the placement is undertaken at which the prospective resident indicates whether they wish to be admitted to the home and for its part the home assesses whether it can meet the residents needs and expectations in a safe manner.

If all parties agree plans are then made to admit, initially for a trial period of three months following which a further review of the placement takes place prior to a permanent place being offered and accepted.

To confirm that the policy and procedure was being adhered to we viewed four residents assessments chosen at random and were satisfied the procedure as described above had been followed.

## 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 home has a well-developed system of planning and reviewing care which takes into account the wishes and aspirations of residents and ensures their needs are met within a risk management policy.

Evidence:

At previous inspections care plans were found to be well written and comprehensive.

To ensure continued compliance, as part of our inspection plan, we viewed a random sample of four residents care plans chosen at random.

All of the detailed care plans which included confirmation that residents or their representative were involved in producing, were based on pre admission assessments to identify what help and support individuals needed and any attendant risks and any other issues that could affect their welfare as described in the previous section of this report.

## Evidence:

Information seen included details about what is important to the service user, and gave guidance for staff on how to provide effective support. Ways of communicating were described and information about living skills, personal care needs, health and medication was also recorded.

All staff spoken with demonstrated that they had a very good knowledge and understanding of each person's needs, the contents of individual care plans, risk assessments and were able to explain how the care plan was put into day-to-day practice.

Regular reviews of care plans are also undertaken to which the residents representative (if the resident agrees) health and social care professionals attend. The review focuses on positives in an individual's life and to develop strategies to help staff to provide effective support.

In their verbal response to us and in reply to our pre inspection survey residents informed us they were satisfied with the care and support they received which was given by staff in a discreet manner in private in a non patronising and respectful manner. One resident wrote, " Love living in Michael house, do not want to move".

Resident's right, and the opportunity to take risks are seen as fundamental. Where restrictions, which are all, recorded in the care plan, are in place these are only implemented following a detailed risk assessment a process, which identifies individual risks and how they were to be managed including confirmation the resident was involved in the decision making process.

This was confirmed by a resident in their response to our survey when they wrote " I have agreed that staff can remove me from the dining room when I am disruptive. Staff always treat me ok." Records show that any risk that residents are exposed to is documented in considerable detail. Staff have been provided with very clear guidelines to ensure that residents are kept safe, whilst enjoying as good a quality of life.

Residents spoken with, in confirming they were encouraged to make their own decisions, and take responsibility for their own lives also acknowledged that all decisions should take into consideration all risks and if appropriate be made in consultation and support from staff.

The home takes issues of equality and diversity seriously, in response to our question in the AQAA with regard to these issues the home told us: "Included in Induction Policy across the organisation, regular staff training in equality and diversity. Equal

Evidence:

opportunities policy in both staff folder and service user guide. Ratifying and introducing the relationships policy. Route to independence modules to be introduced which covers this topic."

## 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.

The social activities, arrangements for ongoing family contact and the provision of varied and nutritious meals were well managed and reflected residents interests and choices.

Evidence:

Opportunities exist for residents to participate in structured programmes of their choice at the development resource centre and workshop, situated on the same site as the home. Residents taking part in the workshop are expected to show commitment such as working to deadlines. This expectation is intended to foster individual responsibility and help people develop skills for employment.

Records viewed, comments from staff and residents plus notices seen during the inspection confirmed a full programme of activities and social opportunities both in

## Evidence:

house and community based were available.

Since our visit we have been advised a activities coordinator is being employed to oversee and improve the opportunities available to residents .

All of the resident's staff spoken with confirmed participation in any activity was by choice and only undertaken following a risk assessment.

Residents also confirmed they were encouraged and supported to participate and access the local community if they wished unaided. We were informed that the homes management are part of a local initiative that gives access to a special bus that can be booked by residents, this is of particular importance to those wheelchair dependant residents and allows individual residents the freedom to organise their own time and not be dependant on transport provided by the home.

Whilst support and assistance is available, residents are encouraged and supported to be proactive in seeking out local facilities, maintain family contact, establish friendships and if they wished, develop safe sexual relationships as part of them leading independent lives.

Residents confirmed any limitations on them exercising choice was discussed and agreement reached based on the need for personal safety and respect for others.

All residents had access to in house public telephones. Many residents owned a mobile phone and have access to a personal computer.

All residents bedrooms are fitted with a lock under the resident's control, as is the main door, which is fitted with an entry phone, which allows residents to choose who they allow, enter.

A menu based on healthy eating guidelines and residents likes and dislikes was displayed. Residents spoken to say they were satisfied with the food provided and confirmed, if they did not like what was available an alternative they could choose was always provided. Staff and guidelines to assist residents who required assistance in eating was were also available. Most of the residents spoken to were able to communicate well with us, however, to ensure that residents with communication or reading difficulties are able to make meaning full choices we were informed that pictorial menus are in the process of being developed

As part of the guidance available and to encourage health eating nutritional assessments are available as is support from a weight loss group at which attendance

Evidence:

is voluntary

## 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.

Satisfactory arrangements are in place, ensuring the personal, emotional, health care and medication needs of residents are met.

Evidence:

Any decision taken that affects individuals always seeks to empower them by taking into consideration their choices, wishes, aspirations and need for independence. These were reflected in the manner in which the home is run and day-to-day life conducted. This is in line with the staffs perception of themselves as enablers first and carers second.

Residents spoken with confirmed they are able to exercise choice in all aspects of their lives including, the gender of staff who provides personal care, bedtimes, clothes, food, activities, GP, dentist optician and key worker being quoted as examples.

Many of the residents are independent with regard to their personal health care needs and only require a minimum of help or prompting with regard to personal hygiene. Should assistance is required staff and management informed the inspector this would

Evidence:

be delivered in private, this was confirmed by residents who told us most of the time they try to be independent and take care of themselves.

Residents informed us were able to see the doctor of their choice or any other health and social care professional when they needed to. The records viewed indicated that apart from doctors (Who conduct twice weekly clinics on site), district nurses, the local community disability team, the local mental health team and speech therapists other specialists would be consulted as required. Including physiotherapists, and occupational therapists that are based on site.

Residents confirmed that they felt staff and management were fully aware of their individual needs and quick to respond should specialist external sources of support be indicated.

Records were kept of all appointments with all internal and external health and social care professional and included details of any advice and treatment given.

All drugs are which securely stored are administered disposed of and recorded in accordance with a medication policy and procedure by trained staff. Records of administration and disposal of unwanted drugs and medicines viewed were complete and accurate.

All residents are encouraged to take responsibility for their own drugs and medicines if appropriate following a risk assessment. At the time of the inspection four residents had responsibility for their own drugs and medication, which are all individually securely stored in lockable facilities.

## 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.

The home has clear policies and procedures based on best practice guidelines in place which ensures residents are able to complain and are protected from abuse .

Evidence:

The complaints procedure, which was also included in the service users guide included information on how to contact The Commission for Social Care Inspection (C.S.C.I),. The manager informed us this will be changed to the Care Quality Commission CQC to reflect the recent changes to the regulator).

A record of complaints, which included time scales within which complaints must be dealt with is maintained. No complaints have been received by CSCI or CQC since the last inspection.

Residents confirmed they felt confident and comfortable in discussing any concerns they had with the homes manage. Staff also confirmed they to felt confident in discussing issues with management on behalf of any resident.

A whistle blowing and Adult Protection Policy and Procedure based on the "No Secrets" publication had been implemented to work in tandem with the multi agency procedure produced by Hampshire County Council.

Evidence:

All management and staff spoken confirmed they had received training in recognising various types of abuse and were aware of and were able to demonstrated to the procedure to follow should they witness or suspect the abuse of a resident.

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

Residents benefit from living in a purpose built environment which is clean, homely, free from adverse odours and equipped with a large number of aids and adaptations designed to maximise the independence, comfort and safety of the residents.

Evidence:

The purpose built building had been designed, built and equipped with the needs of persons with a disability, including person's dependant of the use of a wheelchair in mind.

The building, which had no obvious hazards to health.

Residents told us it met their individual and collective needs and was always kept tidy, clean and free from any adverse odours. Fire safety arrangements were all being observed.

Throughout the building doors including the main door and lights operated automatically on being approached allowing the residents free use of their hands, large wide corridors, wide doors to bedrooms ensure the free and easy movement of wheelchairs. In bedrooms personal fitted overhead hoists, special beds, baths or

Evidence:

showers grab rails low plugs etc had all been fitted.

All communal rooms were fully decorated and had large window all were equipped with furniture designed to meet residents needs including the equipment in the homes kitchen, which could be raised and lowered as required.

At the time of our visit some walls were bare, stark and not very homely. The manager informed us this had been recognised and as a consequence artwork produced by the residents was being framed and would then be displayed in the home.

Not only have the needs of the residents been taken into account, so have the needs of the staff enabling them to deliver a high quality service in a pleasant safe environment.

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

Resident's needs are met by sufficient numbers of well trained and supported staff who are recruited and selected using a procedure designed to protect all residents.

Evidence:

In our view, at the time of the inspection the numbers and deployment of staff was sufficient to meet residents needs.

In talking with residents they confirmed there was always staff available and they rarely had to wait for any help or assistance which throughout our visit staff were seen to deliver in a non-patronizing and discreet manner.

The manager informed us the planned staffing level for the home is 7am to 3pm three or at times four care staff plus a cleaner, cook and the manager for part. 2pm to 10 pm three care staff plus a cleaner, cook and the manager for part. At night one awake care staff one sleeping care staff plus telephone back up for emergencies.

She also informed us staffing could be raised if residents needs increased or a particular days programme required additional staff.

## Evidence:

As part of this inspection, we viewed four staff recruitment and training files selected at random.

All files viewed included evidence that staff are employed in accordance with a robust equal opportunities recruitment, and selection procedure, which is designed to protect residents.

This involves the completion of an application form, the signing of a rehabilitation of offenders declaration, an interview, and satisfactory Criminal Record Bureau (CRB) disclosure, Protection of Vulnerable Adults (POVA) and reference checks.

Following their appointment, records seen confirmed that all staff are subject to an in house induction and sector skills common induction and a training programme that include first aid, handling medication, food handling, moving and handling, safeguarding and infection control.

Following completion of their induction programme All staff are expected to undertake a National Vocational Qualification (N.V. Q.) Course. Information provided by the Manager indicated that 54.5% of staff had been trained to NVQ level 2, 18.2% to NVQ level 3, 9.0% to NVQ level 4 and one was on a course leading to a level 4 qualification.

Those responsible for this result are to be commended.

## 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 management of the home ensures the health, safety and welfare of residents and staff are promoted and the home is run in the best interests of the residents whose views about living in the home are formally sought.

Evidence:

The registered manager who has had care and management experience both with Enham and other organisations is RNMH qualified, is currently undertaking the NVQ level 4 Registered Manager Award (RMA), on site managers.

Comments made by residents confirmed they can speak to the manager and all care staff at any time and they are always willing to listen and give them time.

This view that was also echoed by the staff who described the manager as available and approachable. Staff also confirmed that there is a clearly defined management structure and that they operate an open door policy, and encourages them to share any concerns or ideas they have for the betterment of the service.

## Evidence:

It was also evident from our observations that the manager has enthused the highly motivated staff team who were all fully aware of their responsibilities, worked within clear lines of accountability and guidelines and recognized and promoted the ability of the individual residents not the disability.

Residents, resident's relatives/representatives and visiting social and health care professionals views are sought regarding the service through satisfaction surveys and at regular residents meetings and in placement review meetings.

Views expressed are seen as important in contributing to policies and procedures that reflect best practice in service that seeks to evolve to meet the ever changing and complex needs of residents.

A health and safety policy and procedure was in place which protects staff and residents by ensuring the maintenance of a safe working environment including the regular maintenance and servicing of equipment/ machinery in use within the premises. During our visit no obvious hazards to health and safety were seen. Protective clothing, gloves, control of substances hazardous to health (COSHH) assessments, risk assessments, equipment servicing and accident records were available as were training records to confirm all staff have received training in the techniques of moving and handling first aid health and safety and the procedures to follow in the event of fire, including evacuation.

The home has a laundry procedure and a washing machine, which is capable of disinfecting soiled items.

We were informed that all of the hot water supplies to baths were fitted with thermostatic controls set at 43 degrees centigrade and all radiators and hot pipes were covered to protect both residents and staff from injury.

Are there any outstanding requirements from the last inspection?

Yes

No

## Outstanding statutory requirements

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

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

### Immediate requirements:

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

No.	Standard	Regulation	Requirement	Timescale for action
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### Statutory requirements

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

No.	Standard	Regulation	Requirement	Timescale for action
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### Recommendations

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

No.	Refer to Standard	Good Practice Recommendations
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## Helpline:

**Telephone:** 03000 616161 or

**Textphone:** or

**Email:** [enquiries@cqc.org.uk](mailto:enquiries@cqc.org.uk)

**Web:** [www.cqc.org.uk](http://www.cqc.org.uk)

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