



Making Social Care
Better for People

Inspecting for better lives

Key inspection report

Care homes for adults (18-65 years)

Name:	136d Warminster Road
Address:	136d Warminster Road Norton Lees Sheffield S8 8PQ
The quality rating for this care home is:	two star good 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.

Lead inspector:	Date:
Stephanie Kenning	0 4 0 3 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 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 Commission for Social Care Inspection aims to:

- Put the people who use social care first
- Improve services and stamp out bad practice
- Be an expert voice on social care
- Practise what we preach in our own organisation

Our duty to regulate social care services is set out in the Care Standards Act 2000.

Reader Information

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Internet address

www.cqc.org.uk

Information about the care home

Name of care home:	136d Warminster Road
Address:	136d Warminster Road Norton Lees Sheffield S8 8PQ
Telephone number:	01142583304
Fax number:	
Email address:	steven.danford@sheffield.gov.uk
Provider web address:	

Name of registered provider(s):	Sheffield City Council - Disabilities Services Division
Name of registered manager (if applicable)	
Mr Steven Danford	
Type of registration:	care home
Number of places registered:	2

Conditions of registration:		
Category(ies) :	Number of places (if applicable):	
	Under 65	Over 65
learning disability	2	0
Additional conditions:		

Date of last inspection										
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A bit about the care home

Warminster Road is a care home providing short-term care for up to two adults with learning disabilities. It is in a residential area of Sheffield with good access to public services and amenities (e.g. bus services, shops, libraries and pubs). The home is a two-storey house. Accommodation consists of a lounge/diner and kitchen area on the ground floor. On the second floor there are two bedrooms. There are sufficient toilet and bathing facilities. The cost of the

service varies dependent upon the age of the service user, the fees at the time of the inspection were £77.50 per week for people under 25 years, £90.00 per week for people aged 25-59 years and £127.75 for people aged 60-65 years. These fees included all meals, and are under review.

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:

Choice of home

Individual needs and choices

Lifestyle

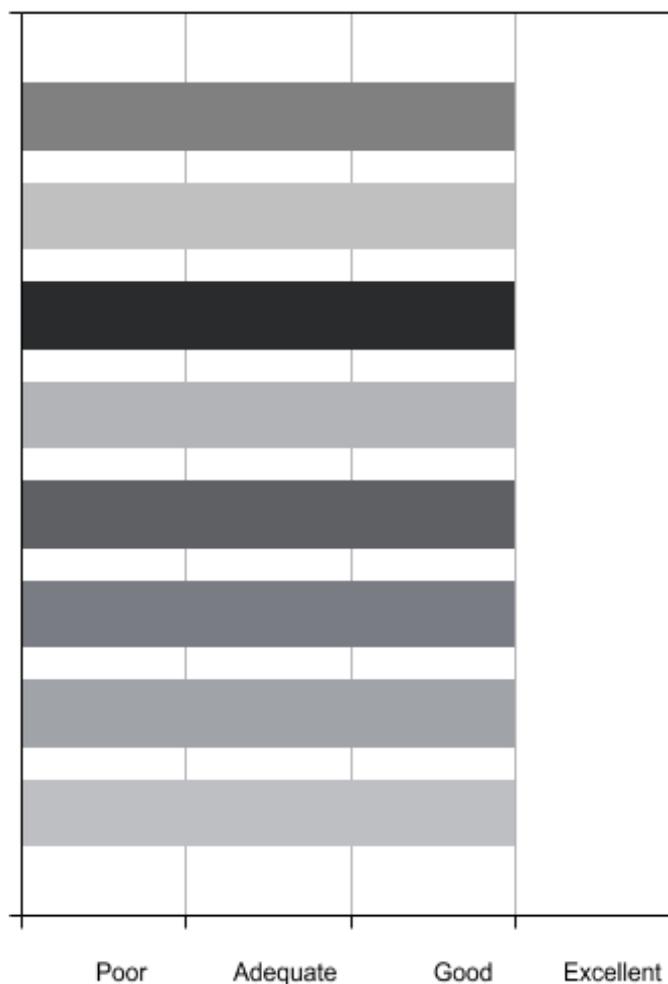
Personal and healthcare support

Concerns, complaints and protection

Environment

Staffing

Conduct and management of the home



How we did our inspection:

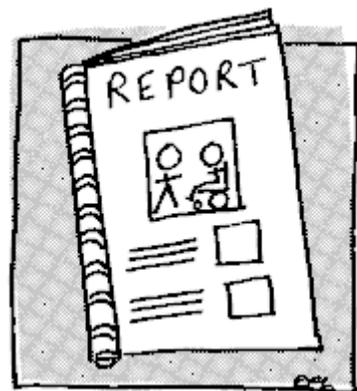


This is what the inspector did when they were at the care home

This was an unannounced key inspection carried out by Stephanie Kenning, Regulation Inspector. The site visit took place on two occasions 26/02/09 and 4/03/09 and was a total of 5 hours. The registered Manager Steven Danford was present on both visits and the Responsible Individual Ann Marie Okotie was present during part of the second visit.



Prior to the visit the manager had submitted an Annual Quality Assurance Assessment (AQAA) which detailed what the home was doing well, what improvements they had made and any plans for improving the service in the next twelve months. Information from the AQAA is included in the main body of the report.



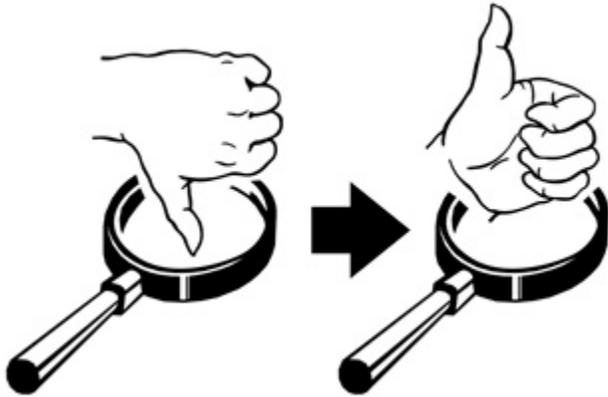
During the site visits opportunity was taken to make a tour of the premises, inspect a sample of care records, check records relating to the home and check some of the policies and procedures. Time was spent observing and interacting with people. Staff and people staying at the home contributed to the findings. The inspector checked all the key standards and some additional standards.

The inspector wishes to thank the people at the home for their time, friendliness and co-operation throughout the inspection process.



What the care home does well

People felt that the home provided individualised care, with good attention to detail, and input from all the relevant sources. People enjoyed their stays at the home and liked the staff. They were able to continue their preferred activities and had opportunities to try new ones if they wanted. There was good communication with the people staying at the home including prior to their visits. This helped to ensure that staff were up to date with people's needs and plans for the stay could be discussed.



What has got better from the last inspection

There was evidence of staff training being up to date in areas like adult protection and medication. The responsible Individual was doing monthly monitoring visits and completing the regulation 26 reports required by CSCI, that ensures that the provider is aware of the issues at the home. Some of the home had been redecorated and some new furniture was in place.



What the care home could do better

There were no requirements made at this visit, and some minor areas recommended to improve the service. The storage of gloves and aprons in the bathroom could be improved to help the dignity of people staying there. The financial accounts could be audited externally to further protect people's money. A system could be set up in case the Responsible Individual is unable to carry out the required regulatory visits so that the service is not in breach of regulations.

	<p>If you want to read the full report of our inspection please ask the person in charge of the care home</p>
	<p>If you want to speak to the inspector please contact Stephanie Kenning CQC St Nicholas Building St Nicholas Street Newcastle Upon Tyne NE1 1NB</p>

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

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

Details of our findings

Contents

Choice of home (standards 1 - 5)

Individual needs and choices (standards 6-10)

Lifestyle (standards 11 - 17)

Personal and healthcare support (standards 18 - 21)

Concerns, complaints and protection (standards 22 - 23)

Environment (standards 24 - 30)

Staffing (standards 31 - 36)

Conduct and management of the home (standards 37 - 43)

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

People who use this service have information about the home and opportunities to visit before deciding whether to stay there. The needs assessment means that their personal diverse needs are identified and planned for before they stay at the home.

Evidence:

We wanted to understand people's experiences when they decide whether to choose to stay in this home, and what it is like for people if they did decide to stay there. We spoke to one person staying for a short visit, the manager and staff of the home. We looked at the information the home give to people and how they assess whether they can meet people's needs.

People are visited at home by the service before they decide to stay there. They are referred to the service through the care management system, and an assessment has already taken place. The staff from the home add to this when visiting in order to ensure that they can meet the needs of the individual. Some people return for regular visits and staff contact them before the next visit to ensure they are up to date with any changes. People felt that this was a good way of keeping in touch and liked the contact. Staff from the home use photographs to help them describe the home to new people that they are visiting at home. People liked being able to see the pictures of individual rooms before they visited. Most people visit before staying at the home so that they can decide if they want to stay.

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 who use this service are supported to meet their individual needs and are able to make choices about their daily lives.

Evidence:

We wanted to find out if people's individual needs and choices were being met. We looked at the care plans of two people staying for respite care, and spoke to staff about their care. We observed a little of daily life at the home and watched the interactions of the people staying there with the staff.

People staying at the home appeared to enjoy their stays and were comfortable with the staff. Many of the people that stay at the service have day centre or other placements that they attend during the day, except at weekends. The care plans had been drawn up using input from day care placements as well as families where appropriate. This meant that everyone was working towards the same goals for the individuals, ensuring consistency and a better chance of achievement. Different routines were recorded so that at weekends, for example, someone might choose to stay in bed later because they did not have to attend day care. Specific needs were very detailed, for example, someone needed a soft diet, with food cut up into small pieces, preferred certain foods, needs to be sat close to the table and upright. This shows a good level of detail to assist staff in supporting the individual in the best way for that person.

Records also showed that people were making decisions about different aspects of their stays, such as when they stayed, the activities they chose to do, the meals they wanted to eat, when they went to bed. People were assessed for risks that applied to

Evidence:

that individual, and covered a range of risks, such as, bathing, safe sex, going missing, and money. These were reviewed regularly and changed accordingly.

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 people using this service have individualised lifestyles with appropriate activities and opportunities for their development.

Evidence:

We wanted to understand people's daily experiences and opportunities for personal development and leisure. We observed what they did and spoke to them and the staff about what they liked to do. We looked at the records of activities, routines and meals.

The people staying at the home have individualised placements outside this service that usually happen during the weekdays. These are usually at day centres or work based placements, such as working in a library. Some people have a number of different placements within each week giving opportunities to develop practical life skills such as communication, keeping fit, and using a computer. The records show that the service supports people to continue with these placements by ensuring transport or bus routes are arranged, that people take equipment with them such as swimming things on the right days, and that an appropriate packed lunch or drinks are available.

People also undertake activities outside placements such as going to football matches, Gateway club, walks, meals out, cinema, beauty treatments, or relaxing at the home with magazines, books, music or television. People are supported to maintain personal relationships with outings or visits to the home, if appropriate. Consideration is given to the booking of respite stays and some periods may be allocated as female only, for

Evidence:

example, to help with people's preferences. Individual preferences and routines are respected and recorded so that staff are able to support them in these. Records also show what involvement that person wants in household tasks, and people are encouraged to be independent according to their risk assessment

People are able to choose when and what they eat. Prior to each admission staff contact them to check that they are up to date with specific requirements and they use this opportunity to plan activities and meals for the forthcoming stay. The high staff ratio means that any changes can usually be accommodated.

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. People staying at the home have their personal and health care needs met and receive medication safely.

Evidence:

We wanted to understand how people had their health and personal care needs met. We spoke to people in the home and to staff, observed practices in communal areas, and looked at records and medication systems.

The support plans gave very detailed instructions for staff to follow, in a step by step sequence and there was some information about why it was important to do it that way. This shows understanding of the needs of individuals and a respect for their preferences. The plans were comprehensive and covered all the areas identified in the assessments.

Health needs were considered and the home took over the role as main carer whilst people were staying so that they would action agreed treatment and contact health professionals if they were concerned about something. Usually they would do this by liaising with the family or others involved. Records showed health information and treatments, even when they were not given at the home, showing that they keep comprehensive information about an individual.

When people are on medication there are suitable lockable facilities available for individuals use or for staff to support them. All staff are trained in medication administration and updated annually. There was no one receiving medication on the day of the visit therefore practices could not be observed.

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 living at the home are protected by the policies and procedures in place.

Evidence:

We wanted to understand how people were protected from abuse or neglect and how the service responds to complaints. We looked at records, policies and procedures and spoke to people at the home.

Written procedures for making complaints and dealing with vulnerable people were available and all staff had been given a copy of the new safeguarding procedures. Staff were in the process of being trained in the new procedures so that they would be able to deal with any allegation or suspicion arising whilst they were on duty. Some of the information for people staying at the home was in pictorial form to try to assist people who may want to raise concerns. There had not been any complaints or safeguarding referrals during the last year. The manager said that having regular contact with people, and doing annual surveys, gave them feedback about the service and changes that improved the stays for individuals.

People staying at the home were at ease with the staff, and staff demonstrated their understanding of the individuals' behaviors, showing that there was a good level of communication between them, which would help people be listened to.

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
People stay in a home that is safe, comfortable and meets their needs.

Evidence:

We wanted to understand what it was like to stay in the premises and whether they were appropriate for the lifestyles of the individuals staying there. We were shown around the premises including the two bedrooms, and spoke to people and staff about the facilities. We looked at records of routine checks and maintenance to ensure that the equipment was working well and safely.

The house is a normal family type house on a small complex set back from Warminster Road. It has two floors accessed by a staircase which means that people have to be physically able to stay at the home as both bedrooms are upstairs. The house is clean, tidy, warm and comfortable, and is well maintained for people's safety. There is a small shared bathroom, a lounge/dining room, a kitchen, and access to a garden. There were some gloves, and aprons on display in the bathroom which should be put away to promote people's dignity.

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

People are supported by staff who are recruited to thorough procedures and trained well, to protect and develop individuals.

Evidence:

We wanted to understand how staff were recruited and trained to ensure that they could carry out their jobs well. We talked to people in the home including staff. We checked the recruitment files and the training records to see if the procedures had been followed.

People were very positive about the staff and about staying at the home. Staff felt well supported and trained to do their jobs. The very low staff turnover meant that no one has been recruited for some time, offering consistency and stability in the service. Usually people are supported by a good ratio of staff so that they can pursue their choice of activity.

The recruitment files showed that all the necessary checks and procedures had been followed before people were recruited, and CRBs were rechecked after 3 years. This offers good protection to the people at the home. The training records showed that people working at the home had a thorough induction to the home and explored many aspects of working with people with a learning disability. They have covered the required training to keep people safe and 3 out of 7 staff have NVQ level 2 or above with more staff in progress.

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. The home is well managed and people are protected by the policies and procedures of the service.

Evidence:

We wanted to understand how the home was managed and ensuring the quality of service for the people living there. We talked to people including staff and the managers of the service, and the operations manager for the service.

The Registered Manager is Steven Danford who has many years experience with people with a learning disability and as a manager. Ann-Marie Okotie visits the service at least monthly to complete the required regulation 26 visit reports that monitor how the service is performing for the provider. During a period of absence these visits were not continued as required and a system should be put in place for future unforeseen absences.

The atmosphere at the home was friendly and welcoming, and staff were available to people when required. People were contacted prior to their stays for up to date information and annual surveys were sent out giving the service valuable feedback.

Records were kept as required though it was noted that no external auditing of accounts was done to safeguard the people using the service. Safe working practices were followed with staff trained in the relevant safety procedures, and no obvious hazards were noted.

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	Description	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	Description	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
1	24	Put items such as gloves and aprons away in cupboards to promote people's dignity.
2	39	Put in place a system for maintaining regulation 26 monitoring visits in the post holders absence to avoid breach of regulations.
3	39	Consider external auditing of accounts to ensure the safety of people's monies.

Helpline:

Telephone: 03000 616161 or

Textphone : or

Email: enquiries@cqc.org.uk

Web: www.cqc.org.uk

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