Key inspection report

Care homes for older people

<table>
<thead>
<tr>
<th>Name</th>
<th>Leivers Court Care Home</th>
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<tr>
<td>Address</td>
<td>Douro Drive</td>
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<td></td>
<td>off Kilbourne Drive</td>
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<td></td>
<td>Arnold</td>
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<td>Nottingham</td>
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<td>NG5 8AX</td>
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The quality rating for this care home is: three star excellent service

A quality rating is our assessment of how well a care home is meeting the needs of the people who use it. We give a quality rating following a full review of the service. We call this full review a ‘key’ inspection.

<table>
<thead>
<tr>
<th>Lead inspector:</th>
<th>Date:</th>
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<tbody>
<tr>
<td>Mary O'Loughlin</td>
<td>1 9 0 4 2 0 1 0</td>
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</table>
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.

<table>
<thead>
<tr>
<th>Outcome area (for example Choice of home)</th>
<th>These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:</th>
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<tbody>
<tr>
<td>This box tells you the outcomes that we will always inspect against when we do a key inspection.</td>
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<tr>
<td>This box tells you any additional outcomes that we may inspect against when we do a key inspection.</td>
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**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 Older People can be found at www.dh.gov.uk or bought from The Stationery Office (TSO) PO Box 29, St Crispins, Duke Street, Norwich, NR3 1GN. Tel: 0870 600 5522. Online ordering from the Stationery Office is also available: www.tso.co.uk/bookshop

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**

<table>
<thead>
<tr>
<th>Document Purpose</th>
<th>Inspection report</th>
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<tbody>
<tr>
<td>Author</td>
<td>Care Quality Commission</td>
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<td>Audience</td>
<td>General public</td>
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<td>Further copies from</td>
<td>0870 240 7535 (telephone order line)</td>
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| Internet address | www.cqc.org.uk |
### Information about the care home

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<td>01159209501</td>
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<tr>
<td>Fax number:</td>
<td>01159209501</td>
</tr>
<tr>
<td>Email address:</td>
<td><a href="mailto:julie.allsop@nottscc.gov.uk">julie.allsop@nottscc.gov.uk</a></td>
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<tr>
<td>Provider web address:</td>
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<tr>
<th>Name of registered provider(s):</th>
<th>Nottinghamshire County Council</th>
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<tbody>
<tr>
<td>Name of registered manager (if applicable)</td>
<td>Julie Allsop</td>
</tr>
<tr>
<td>Type of registration:</td>
<td>care home</td>
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<tr>
<td>Number of places registered:</td>
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### Conditions of registration:

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<th>Category(ies)</th>
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<tr>
<td></td>
<td>Under 65</td>
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<tr>
<td>dementia</td>
<td>19</td>
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<td>old age, not falling within any other category</td>
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<td>physical disability</td>
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Additional conditions:
- Out of the total number of beds (38), 5 may be used for PD 55 and over
- Out of the total number of beds (38), there will be 19 beds for DE 55 and over and/or DE(E)
- Service users shall be within category OP

### Brief description of the care home

Leivers Court is a care home that provides personal care and accommodation for 38 older people. There is a 20 place Day Centre attached to the home, which operates over 7 days. The home is owned and managed by Nottinghamshire County Council.
**Brief description of the care home**

Leivers Court is a purpose built single storey building located within a housing estate approximately 1 mile from Arnold town centre.

The accommodation is provided in four units, each unit has a fully fitted kitchenette/dining and sitting area, as well as communal toilets and a bathroom or shower room.

All of the bedrooms are for single occupancy and have wash hand basins; there are no ensuite facilities. There are enclosed secure garden areas.

The weekly accommodation charges for those people who self fund is £450.00.

A copy of the most recent inspection report is available in the home.
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:

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<th>Outcome</th>
<th>Poor</th>
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<th>Good</th>
<th>Excellent</th>
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How we did our inspection:

The focus of inspections undertaken by the Care Quality Commission (CQC) is upon outcomes for the people using the service and their views on the service provided.

This process considers the provider's capacity to meet regulatory requirements, minimum standards of practice and focuses on aspects of the service that need further development.

Prior to our visit an analysis of all the information we have received about the home since our last inspection was undertaken.

We looked at what the operations manager had told us in the Annual Quality Assurance document (AQAA) and the responses we received from our 'Have Your Say' surveys which we sent to people who live at the home and staff who are working there.
The main method of inspection used was called 'case tracking', which involves looking at the quality of care received by a number of people living at the home. We use evidence from our observations, from speaking to people about their experience of living at the home, talk to staff about their understanding of people's needs and the training they receive to support them in their role.
What the care home does well:

Detailed assessments are carried out so that it is clear that a person's needs can be met at Leivers Court before they come to stay there.

People are consulted about the care they wish to receive and have opportunities to discuss what is working well or what needs to change.

Medicines are managed safely to make sure that people's health and wellbeing are protected.

People know that their concerns or complaints would be taken seriously and they have told us they feel safe and protected.

Leivers Court provides homely and comfortable accommodation for the people who live there and the staff welcome the involvement of families and friends.

The staff are properly trained and receive regular refresher training to ensure they are up to date.

Health and safety within the home is made a priority, and checks are in place to help make sure that the home provides a safe environment for people living there.

The manager is experienced and well qualified, and the home is run in the best interests of the people who live there.

Many of the National Minimum Standards are exceeded and the manager demonstrates to us the continued improvement of the service.

What has improved since the last inspection?

Our inspection found that the service has many strengths and has a sustained track record of managing improvements. Where areas of improvement have emerged they have recognised and managed them well.

The home has undergone complete redecoration and many furnishings have been renewed.

There has been continued improvement that reflects the manager ensures any new guidance or legislation is properly understood and implemented which ensures people are receiving up to date care at Leivers Court. This includes new laws about how people need to be supported to make decisions about the care they receive.

The manager has endorsed the Government's dignity challenge which sets out a national expectation of what constitutes a service that respects people's dignity.

What they could do better:

We have not made any requirements as a result of this inspection.
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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Daily life and social activities (standards 12 - 15)
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Management and administration (standards 31 - 38)
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:

<table>
<thead>
<tr>
<th>People are confident that the care home can support them. This is because there is an accurate assessment of their needs that they, or people close to them, have been involved in. This tells the home all about them and the support they need. People who stay at the home only for intermediate care, have a clear assessment that includes a plan on what they hope for and want to achieve when they return home.</th>
</tr>
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<tbody>
<tr>
<td>People can decide whether the care home can meet their support and accommodation needs. This is because they, or people close to them, have been able to visit the home and have got full, clear, accurate and up to date information about the home. If they decide to stay in the home they know about their rights and responsibilities because there is an easy to understand contract or statement of terms and conditions between them and the care home that includes how much they will pay and what the home provides for the money.</td>
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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 service is efficient and consistent at obtaining comprehensive assessments of each person's individual needs before they agree admission.

Evidence:

We last inspected the home in 2007 and since that time the manager has continued to demonstrate to us through the Annual Quality Assurance documents that she has consistently worked to ensure that people have the right information and an opportunity to visit the home, have trial stays and respite stays which enabled them to make a fully informed decision to stay at the home permanently.

During the inspection visit we looked at the admission records of two people. We saw that for each person there was a detailed assessment which was carried out before they moved into the home. This helps staff to be confident that the person's needs can be met there. We also found that the staff had obtained another assessment which
Evidence:

was completed by social workers involved with each person, they used the information within those assessments to build a clear picture of each person.

The assessments contained information about the individual needs of the person and staff had ensured that people were involved in decisions about their care or represented by relatives in their best interests.

We saw in the records how during the first week's stay at the home people are invited to participate in completing a quality survey about their experiences of the admission, their first thoughts about the home, the staff and the future. This information is used to improve and make a difference to the experiences people have when they first come to stay.

We spoke to both the people we case tracked about their experiences of the home and their comments included, "I came to stay for a few weeks but I liked it so much I decided to stay permanently" "The staff are wonderful, I was unable to walk or feed myself, and now I can do both with the help and loving care I receive from staff".

We saw how information about the home has recently been reviewed and updated by Nottingham County Council, this provides people with information about the home, its facilities and services and is displayed in each person's bedroom. The information was available in formats that were suitable for the people we case tracked.

The home does not provide Intermediate care.
Health and personal care

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

| People’s health, personal and social care needs are met. The home has a plan of care that the person, or someone close to them, has been involved in making. If they take medicine, they manage it themselves if they can. If they cannot manage their medicine, the care home supports them with it, in a safe way. People’s right to privacy is respected and the support they get from staff is given in a way that maintains their dignity. |
| If people are approaching the end of their life, the care home will respect their choices and help them feel comfortable and secure. They, and people close to them, are reassured that their death will be handled with sensitivity, dignity and respect, and take account of their spiritual and cultural wishes. |

This is what people staying in this care home experience:

Judgement:

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

People have their health and personal care provided according to their needs and wishes and receive their medicines safely.

Evidence:

We looked at the records of three people living at the home and saw evidence that people were being invited to be involved in care plan reviews which ensures that people can discuss what is working well for them and what needs to change.

Each of the three care plans we looked at described in detail how people needed supporting with their health and personal care. We saw how staff regularly assessed health risks such as the risk of developing pressure sores and ensured that where needed people were supported to access external health professionals who prescribe treatment or advice on the management of health problems.

We saw how staff monitored people's weight and one person we case tracked was being referred to the Doctor to discuss their recent weight loss.
Evidence:

We saw records of regular multi disciplinary meetings taking place to ensure that a person who presented with seizures was regularly monitored to ensure the condition was controlled effectively.

Each care plan had information about what was important to the person, their family, previous interests and goals for the future, showing staff respect people's individuality and preferences and have expert knowledge about individual personal needs when providing support.

We received four responses from people living at the home to our 'Have Your Say' surveys which told us that they all felt they received the medical care they needed and always received the care and support they needed.

One of the people we case tracked told us; "There is every type of equipment available here to help me be as independent as possible".

The manager has endorsed the Government's dignity challenge which sets out a national expectation of what constitutes a service that respects people's dignity. She told us in the AQAA that "Our residents feel they are treated with respect and in a dignified way and this is evidenced on feedback. Staff have received Dignity awareness raising training and literature. Team Leaders and some staff are dignity champions".

We observed staff interacting with people throughout this inspection and found them to be respectful and supportive to people. People told us they are helped to be as independent as possible and care plans show people have lots of opportunity to express their needs and wants. We talked to a key worker to one of the people we case tracked and they knew all about the person's needs. The resident told us they knew the key worker well and felt safe and supported by them.

During this inspection we found that medicines were being managed safely. The staff training records showed that staff administering medicines received appropriate
Evidence:

training to do so.

The manager informed us that they have now installed air conditioning within the medicine storage room to ensure medicines were held at appropriate temperatures, preventing them degrading. We saw that all medicines were being administered as prescribed and the manager told us that she audits the compliance of medication management every three months. We observed that on two medicine record charts staff had hand written medicines but had not signed and witnessed these entries which would be recommended good practice to reduce the risk of errors.

We saw that there was a risk of contamination within the medicine fridge as a non sterile item was mixed with cold storage medicines and could present a risk of cross infection. We discussed this with the manager and she took immediate action to ensure this was rectified.
Daily life and social activities

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

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

There are no additional outcomes.

This is what people staying in this care home experience:

Judgement:

People using this service experience 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 access to social and recreational activities inside the home and the community. The service actively encourages the involvement of relatives and friends.

Evidence:

We saw how the home provides separate 'carer's corners', these are areas which provide space and privacy for families visiting, they provide comfortable seating, fresh fruit was provided in these areas and literature about the home was displayed. There are also separate refreshment facilities in each of the four units and a central bar and shop.

The manager told us in the AQAA that 'There is also spiritual worship each month. We endeavour to support community links with shopping visits, trips to the bank etc whenever we can provide and arrange appropriate transport. We have a highly motivated fund raising group of staff and relatives who ensure additional outings and entertainment can be achieved'.

We saw displayed on each unit a programme of activities available for people to see
Evidence:

and decide if they wish to participate in, these included, bingo, movement to music, sing-a-long and bar evenings. The manager told us there was a weekly bus trip where people choose what they want to do for example visit garden centres or shopping.

We received four responses to our 'Have Your Say' surveys which told us there were always or usually activities available which they could participate in and that they always or usually liked the meals provided.

We saw how in each unit there was a kitchen area where people could acess hot drinks and snacks and the manager told us that these areas where risk assessed to ensure any hazards were controlled. The dining tables are placed in these areas and provide a small homely feel, tablecloths were in place and all areas clean and tidy.

We spoke to the cook who showed us written records of the times she speaks to each resident about their preferences with their diet and these records were used to inform meal provisions and support special dietary needs.

We saw within the staff training records that they had received food hygiene training and the AQAA tells us that 12 staff have received training in malnutrition care and how to provide people with assistance with eating.

In each of the units we saw that staff held records of people's diet and hydration where close monitoring was required to maintain an adequate level of nutrition and hydration.

We spoke with the two people we case tracked about their satisfaction with the meals provided and both said the food was appetising and they enjoyed it.

We observed lunch being served, it appeared appetising and nutritious. We saw a visitor enjoying lunch with his relative whilst visiting and the manager told us that this was usual practice if relatives wanted to spend long periods at the home.
Complaints and protection

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

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

People’s legal rights are protected, including being able to vote in elections.

This is what people staying in this care home experience:

Judgement:

People using this service experience good quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service. The service encourages people to discuss concerns to improve the experiences of people living at the home and the staff team are trained to safeguard people from abuse.

Evidence:

The manager told us in the AQAA that; 'We ensure we are proactive with responding to complaints. We have policies and procedures around protection and complaints. We ensure service users staff and relatives are aware of complaints procedures'.

We received four responses to our 'Have Your Say' surveys and this told us that three people felt the staff always listened to them and acted on what they said, that they knew how to make a complaint and that there was always someone they could speak with if they had concerns. The fourth respondent felt staff were sometimes available to speak with but they did not know how to make a complaint.

We saw how the home displays the complaint procedure prominently to ensure people know what they can do if they have concerns.

During discussion with the manager she told us that she welcomes complaints and
Evidence:
always asks people about any concerns or suggestions they have at the regular resident meetings they have.

The manager informed us of one safeguarding investigation this year following an altercation between two people who live at the home. During this inspection we saw the records of the investigation which showed that the safeguarding of adults procedure was correctly followed and steps have been taken to control any further risks to the person.

The commission have not received any complaints about the service since we last inspected in 2007. The manager tells us in the AQAA that they have dealt with nine complaints which have all been addressed within the timescales.

We saw from staff training records that they are regularly trained in how to safeguard people from abuse and respond appropriately to any allegations. Staff also receive training in how to manage any aggression to ensure people are safely supported at all times.

We saw from records that the staff recruitment and selection procedure reflects that robust policies are followed in practice to make sure that anyone known to be unsuitable to work with vulnerable adults is not employed at the home.
Environment

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

| People stay in a safe and well-maintained home that is homely, clean, pleasant and hygienic. |
| People stay in a home that has enough space and facilities for them to lead the life they choose and to meet their needs. The home makes sure they have the right specialist equipment that encourages and promotes their independence. Their room feels like their own, it is comfortable and they feel safe when they use it. |

This is what people staying in this care home experience:

Judgement:

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

The home provides a clean and spacious environment for people to live.

Evidence:

We received four responses to our 'Have Your Say' surveys which told us that the home was always or usually fresh and clean.

The manager told us in the AQAA that; 'We have a planned maintenance programme. There is an essential repairs budget. We have a caretaker who can carry out routine repairs and decoration. We have an electronic door entry system. We have an electronic fire alarm with a direct link to the fire brigade. We have secure gardens and gardeners. Provide appropriate lighting and furnishings. Have regular Health & Safety audits and inspections.'

The main entrance to the home is kept secure and keypad controlled.

During this inspection visit we found that the home has been completely re-decorated and provided a clean and homely feel. Wide corridors provided access to people's individual bedrooms which were clean and fresh and provided people with their own
Evidence:

private and lockable space where they could have their personal possessions.

People told us that they had a range of equipment that they needed to help them remain as independent as possible and we saw suitable hoisting and bathing equipment was in place with annual records of servicing to ensure they were properly maintained and safe to use.

Each of the four units accommodates people with different needs to enable staff and resources to be used effectively.

The outside space is now fully secure and allows for people in all four units to use the entire garden area. There is seating provided and safe areas to walk and the manager told us she has further plans to develop the areas outside with fresh planting.

The manager told us in the AQAA that they have an action plan to deal with Infection control and 35 staff have been trained in infection control practices. A recent outbreak of a winter virus was managed appropriately by the manager and all external health care agencies were informed to provide suitable advice and guidance.

We saw that everyone coming to the home has access to hand cleansers to control infection and staff are provided with protective equipment to ensure there is no spread of infection.

The home has improved its waste disposal systems, providing macerators to reduce the clinical waste disposal and sluicing equipment to control infection. All laundry areas were seen to be secure and well maintained, clean laundry is stored separate to dirty laundry as is required.
Staffing

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

People have safe and appropriate support as there are enough competent staff on duty at all times. They have confidence in the staff at the home because checks have been done to make sure that they are suitable to care for them. Their needs are met and they are cared for by staff who get the relevant training and support from their managers.

There are no additional outcomes.

This is what people staying in this care home experience:

Judgement:

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

Adequate staffing levels are maintained and staff are trained in the needs of the people they are caring for. Recruitment practices show people are safeguarded from those who may be unsuitable to work with vulnerable adults.

Evidence:

We received four responses to our 'Have Your Say' surveys which told us there was always or usually enough staff available when they needed them. One comment we received was "The staff are all lovely".

We received one response to our 'Have Your Say' surveys from a staff member who told us that they where always given up to date information on the needs of people they cared for, received training that was relevant to their role which helped them keep up to date and understand about health care and medication. They told us they were supervised regularly by the manager and that there was usually enough staff to meet peoples needs.

We examined the recruitment files of three people and we saw that the records demonstrated that the recruitment procedure is robust and is followed in practice. We saw that each staff file contained all the paperwork that is needed, including proof of
Evidence:

identity, satisfactory references and a CRB (Criminal Records Bureau) Enhanced Disclosure. We also found that there was evidence that staff had an induction soon after starting work to ensure they were not put in situations they could not handle. The induction programme is a recognised Skills for Care programme that sets out minimum learning outcomes for new staff over the first twelve weeks of their employment to ensure they are prepared for their expected roles.

The staff records also show that there are assessments that staff receive during their probationary period and the home also completes its own record of induction training along with supervision for each person which is service specific. This exceeds the National Minimum Standard and shows that the manager only confirms employment if they are satisfied that the person is competent in their role.

The manager reported to us in the AQAA that 75% of the staff team have achieved level 2 in National Vocational training which exceeds the minimum standards and ensures that people are always in safe hands.

The people we case tracked during our inspection told us that the staff were 'very kind and provided loving care'.

During this inspection we found that the environment was properly clean and maintained and the personal laundry was washed and ironed very well.

We have not received any information which would suggest that the numbers of staff are not sufficient.
Management and administration

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

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<thead>
<tr>
<th>People have confidence in the care home because it is led and managed appropriately. People control their own money and choose how they spend it. If they or someone close to them cannot manage their money, it is managed by the care home in their best interests. The environment is safe for people and staff because appropriate health and safety practices are carried out.</th>
</tr>
</thead>
<tbody>
<tr>
<td>People get the right support from the care home because the manager runs it appropriately with an open approach that makes them feel valued and respected. The people staying at the home are safeguarded because it follows clear financial and accounting procedures, keeps records appropriately and ensures their staff understand the way things should be done. They get the right care because the staff are supervised and supported by their managers.</td>
</tr>
</tbody>
</table>

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 managed in the best interests of the people living there.

Evidence:

There is a registered manager in post who has provided consistent management and leadership at the home for many years. The manager completed the homes AQAA within the timescale and the information within it provided us with a clear picture of the home and the improvements that were taking place. The manager showed that she was aware of changes in legislation and planned improvements in the service as a result.

The manager tells us in the AQAA; ‘Part of the Skills for care training identifies equality and diversity within the workplace. I have attended a diversity equality briefing and all supervisions reflect that these issues are discussed. I have also been delivering the training for challenging inequality in Nottinghamshire within the unit. Service users are encouraged to accept a level of risk in order to live a fulfilled life that
Evidence:

they are in control of i.e residents will go to town on the local bus.'

'We ensure care plans are accessible and easy to read for all service users. Staff are trained on induction to understand the issues of inequality and discrimination and the impact this can have on lives.'

From discussion with the manager during this inspection she demonstrated that she values the views of people who use the service. She told us that the quality of the services provided at the home is assessed regularly. There are monthly quality audits completed and service managers visit the home and produce a report for the homes manager, any areas for improvement are recorded and actions taken are monitored at the next audit.

During our inspection we saw that the home does not manage people's personal finances but they do have secure facilities to hold valuables and small cash floats. One person we case tracked had money held in this way and when we looked at the records held we saw that there are suitable financial accounting records to ensure people are protected.

The manager informed us that she is taking part in a pilot scheme that will inform how care plans record peoples choices and decisions in accordance with new laws about ensuring people are supported to make decisions or are referred for an assessment of their capacity. The staff team are receiving training in the Mental Capacity Act and associated safeguards to ensure they are aware of how to support people.

Notifications of significant incidents or occurrences at the home have been made to us without delay.

The AQAA confirmed to us that suitable systems are in place to comply with health and safety law and at inspection the manager told us that improvements have been made in the home to provide swing free doors for people's bedrooms which reduce accidents and also comply with Fire safety legislation All other doors have been fitted with self closing devices.
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.

<table>
<thead>
<tr>
<th>No.</th>
<th>Standard</th>
<th>Regulation</th>
<th>Requirement</th>
<th>Timescale for action</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>
## 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.

<table>
<thead>
<tr>
<th>No.</th>
<th>Standard</th>
<th>Regulation</th>
<th>Requirement</th>
<th>Timescale for action</th>
</tr>
</thead>
</table>

### 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.

<table>
<thead>
<tr>
<th>No.</th>
<th>Standard</th>
<th>Regulation</th>
<th>Requirement</th>
<th>Timescale for action</th>
</tr>
</thead>
</table>

### 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.

<table>
<thead>
<tr>
<th>No</th>
<th>Refer to Standard</th>
<th>Good Practice Recommendations</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>9</td>
<td>Sign and witness all hand written medicines.</td>
</tr>
<tr>
<td>2</td>
<td>9</td>
<td>Ensure that the medicine fridge is not used for items that may present a risk of contamination.</td>
</tr>
</tbody>
</table>
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