# Key inspection report

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

<table>
<thead>
<tr>
<th>Name:</th>
<th>Church Street Care Home</th>
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</thead>
<tbody>
<tr>
<td>Address:</td>
<td>84 Church Street</td>
</tr>
<tr>
<td></td>
<td>Eastwood</td>
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<tr>
<td></td>
<td>Notts</td>
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<td>NG16 3HS</td>
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The quality rating for this care home is: one star adequate 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>Susan Lewis</td>
<td>0 4 0 2 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>
</tr>
</thead>
<tbody>
<tr>
<td>These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:</td>
</tr>
<tr>
<td>This box tells you the outcomes that we will always inspect against when we do a key inspection.</td>
</tr>
<tr>
<td>This box tells you any additional outcomes that we may inspect against when we do a key inspection.</td>
</tr>
<tr>
<td>This is what people staying in this care home experience:</td>
</tr>
<tr>
<td>Judgement:</td>
</tr>
<tr>
<td>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.</td>
</tr>
<tr>
<td>Evidence:</td>
</tr>
<tr>
<td>This box describes the information we used to come to our judgement.</td>
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</tbody>
</table>
We review the quality of the service against outcomes from the National Minimum Standards (NMS). Those standards are written by the Department of Health for each type of care service.

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

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

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

**Reader Information**

<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>
</tr>
<tr>
<td>Audience</td>
<td>General public</td>
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<tr>
<td>Internet address</td>
<td><a href="http://www.cqc.org.uk">www.cqc.org.uk</a></td>
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</table>
### Information about the care home

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<thead>
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<tr>
<td>Telephone number:</td>
<td>01773765494</td>
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<tr>
<td>Fax number:</td>
<td>01773532404</td>
</tr>
<tr>
<td>Email address:</td>
<td></td>
</tr>
<tr>
<td>Provider web address:</td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of registered provider(s):</th>
<th>Nottinghamshire County Council</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of registered manager (if applicable)</td>
<td>Mrs Valli Brownlow</td>
</tr>
<tr>
<td>Type of registration:</td>
<td>care home</td>
</tr>
<tr>
<td>Number of places registered:</td>
<td>8</td>
</tr>
</tbody>
</table>

### Conditions of registration:

<table>
<thead>
<tr>
<th>Category(ies) :</th>
<th>Number of places (if applicable):</th>
</tr>
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<tbody>
<tr>
<td></td>
<td>Under 65</td>
</tr>
<tr>
<td>learning disability</td>
<td>8</td>
</tr>
</tbody>
</table>

**Additional conditions:**

- The maximum number of service users who can be accommodated is 8
- The registered person may provide the following categories of service: Care Home PC only To service users of the following gender Either Whose primary care needs on admission to the home are within the following categories: Learning Disability Code LD

### Date of last inspection

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### Brief description of the care home
Summary
This is an overview of what we found during the inspection.

The quality rating for this care home is: one star adequate 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:

The quality rating for this service is 1 star this means that people who use the service experience adequate quality outcomes.

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

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

This inspection involved one inspector; it was unannounced and took place over 7 hours.

The main method of inspection used was called 'case tracking' which involved selecting
two residents and looking at the quality of the care they receive.

We looked at the information held about these people, along with the service's ability to meet their needs and expectations. We found it difficult to communicate with people using the service so in order to find out more about the care people receive we used surveys from family members.

We also spent time talking with the manager and staff to find out more about the support they give people and their training and knowledge about this.

We used information provided by the service and other sources since the home's registration. We also looked at other documents and records held by the service to learn more about the care they provide.
### What the care home does well:

People are supported by staff who go through a robust recruitment process and get lots of training and support before they work with people. All staff then continue to receive training around the skills and knowledge they need to care for people using the service.

Staff show good understanding for people and respect for their choices.

### What has improved since the last inspection?

This is the services first inspection under its new registration.

### What they could do better:

Information in the Service User Guide does not reflect the changes that have happened in the service since Nottinghamshire County Council took over as registered providers.

Support plans could be written in a more person centred way and in a way that is more accessible to people's different abilities.

The building needs to be updated and improved to ensure that people using the service are provided with their care and support that provides them with choice. The bathroom must be made more accessible to people with different mobility needs. The kitchen work surfaces must be replaced to ensure that people who use them are not at risk of infection. People who use the kitchen should be risk assessed to minimise any risk of being burnt by the electric hob.

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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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.

The assessment process ensures the home can meet people's needs

Evidence:

The manager told us in information we received before the inspection, 'Potential service users receive a comprehensive assessment, before agreeing admission the project carefully considers the needs of the potential service user against the dynamics and needs of the existing users.

We looked at support plans for people using the service and saw that they were assessed prior to moving to the service. Staff spoken with had a good understanding of what happened when someone new was due to move into the home including people are offered the chance to sleep over and for other people who use the service to get to know them.

We looked at the Service User Guide to see if it showed clearly what the service offered and who it was run by. It did not show that the service has been taken over by Nottinghamshire County Council and has been re registered.
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:

<table>
<thead>
<tr>
<th>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.</th>
</tr>
</thead>
<tbody>
<tr>
<td>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.</td>
</tr>
</tbody>
</table>

This is what people staying in this care home experience:

Judgement:

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

People who live in the home are supported to make their own decisions and risks are considered. However people are not always involved in developing their plan and they are not created in a way that style that people would understand.

Evidence:

The manager told us in pre inspection information. 'We are committed to continuous improvement around consultation systems and the promotion of choice and dignity'.

We looked at two people's support plans to see what information the home had about how to provide support to people.

Plans looked at how people's personal and social support and healthcare needs are to be met. Each person had three different plan files looking at different aspect of their needs. However some of the plans within the files were blank or incomplete, this meant it might not be clear how a person needed to be supported.
Evidence:

We saw that some people had restrictions on what they could do and the reasons for this were clear. There was no evidence that plans had been drawn up with the involvement of people who lived at the home or their families and they were not available in format that was suitable to the needs of the people who lived at the home. There was very little evidence that they were created in a person centred way.

The plans we saw showed that where possible staff tried to support people to make decisions about how they spent their day and over their lives. Staff spoken with were able to tell us how they supported people to spend their day. 'We always ask them what they want to do, such as if they want to go for a meal, they choose where they want to go'.

'We started to using puppet shows to help get information across about different things they need to understand and it really helps'.

Staff spoken with also told us that the home has key workers for each person and they help support people in the best way possible. We observed staff speaking to people in a respectful manner and supporting them with household chores such as the laundry and cleaning.

Relatives told us that they felt their loved one received the support and care that they had agreed to and they felt staff had the right skills and experience to care for them.

We also saw in each person's plan risk assessments that showed staff at the service took action to minimise the risk to someone living at the home without limiting their life and preferred activity.
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 who use the service have the opportunity to develop and maintain important personal and family relationships. People are involved in meaningful daytime activities of their own choice and according to their individual interests, diverse needs and capabilities.

Evidence:

The manager told us in pre inspection information that, 'Individuals are supported to have regular, meaningful contact with significant others. Service users have individual time to pursue their specific likes and interests and we have a menu with a variety of choices to suit individual preference'.

We looked at people's support plans and these showed that people spent time with their relatives and were supported through phone calls and visits to maintain this contact. Relatives told us 'Staff consult me about different things like what my relative
Evidence:

'My relative likes to do at home. They bring my relative to religious meetings. They take me on shopping trips with them and invite me to concert parties'.

Support plans and diary notes showed that people who used the service spent their time as they wanted some went to day services and others spent time at the home involved in household chores such as the laundry. We also saw that staff arranged for people to go away on holidays and trips out. During the inspection visit we heard staff talking to people about going to the local pub for lunch. We saw evidence in people's support plans of trips to local the cinema and local pubs.

Staff told us that in their role as key worker they make sure that relatives are kept informed of how their loved one is and find out what sort of things people are interested in. Staff told us that they had arranged a Burns Night recently and went to the Pantomime at Christmas that families were invited to.

Staff also said that they were creating a news letter to keep people informed about different things that are happening at the service.

We saw photographs of different activites that had taken place over previous years including gardening competitions and trips out.

We looked at the meals that are available to people who use the service and saw that there was plenty of varied food available and staff told us that they use a variety of different methods to find out what people want to eat. Including pictures and salt dough models of foods. 'We are constantly looking at different methods to communicate with people, we are always trying to get people involved'.
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.

  - There is evidence in the care plan of health care treatment and intervention, and a record of general health care information. There are some gaps in information but staff are able to think in a person centred way and are able to give a verbal update.

Evidence:

- The manager told us in information received before the inspection that, 'They provide regular reviews, ensure people have annual healthcare checks with their GP, access to healthcare services such as chiropodist, dentist and optician'.

- We looked at people's support plans and saw that people had their healthcare care needs described and that they were supported to see the GP or other healthcare professionals as they needed. Support plans were not written in a person centred way and there was no evidence that people who use the service or their families were consulted in creating the plans. However comments received from relatives told us that, 'my relative does not talk and it is not easy to diagnose what is wrong, but they (staff) had tests done and had the doctor check out what was wrong to make sure everything was alright.'
Evidence:

Staff spoken with said that handovers were very important in passing on information about people's needs and if anything had changed. Staff spoken with were very aware of people's needs and how they liked things doing.

We looked at the records kept for medication and saw that there were no unexplained gaps, however where a code was used the recording sheet asked for it to be defined. It had not been done, so it was not always clear why a person had not had their medication. The medication is currently stored in a small cupboard under the stairs, this room becomes very warm, however suitable arrangements are in place to make sure that the medication is stored at a safe temperature at all times. Over the last few months the manager has notified us of a number of medication errors when staff have given medication to people who use the service. The manager told us that all staff are being reassessed to look at their competency to administer medication. Evidence for this was seen in training records and staff confirmed that they were receiving updates to their medication training.
Concerns, complaints and protection

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

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

There are no additional outcomes.

This is what people staying in this care home experience:

Judgement:

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

People are safeguarded from abuse.

Evidence:

The manager told us in the information we received before the inspection that, 'There are policies and procedures in place for the monitoring of protection, complaints and concerns. There are strong links with a variety of professionals for support advice and guidance where concerns about the health safety and well being of service users are identified. The service has a sound safeguarding procedure and policy that the project adheres to. Staff aware of their responsibilities.'

The manager told us no complaints had been received and no concerns had been received by the commission since its new registration.

We spoke with staff who told us how they would support people who used the service to make a complaint and also what they would do if they suspected a person using the service was being abused. Staff told us that they received training and knew where the policies and procedures regarding this area were stored.

We looked at training records and all staff had undergone safeguarding adults training within the last twelve months and all new staff had been checked through Criminal Records Bureau before they started working 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:

<table>
<thead>
<tr>
<th>Outcomes</th>
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<tbody>
<tr>
<td>People stay in a safe and well-maintained home that is homely, clean, comfortable, pleasant and hygienic.</td>
</tr>
<tr>
<td>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.</td>
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</table>

This is what people staying in this care home experience:

Judgement:

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

The home is clean and people are able to personalise their bedrooms. Bathrooms do not contain sufficient and appropriate aids and adaptations to meet the specific needs of residents. The kitchen could be unsafe for people.

Evidence:

The manager told us in information we received before the inspection that, 'Service Users live in a clean, safe, homely and welcoming environment'.

We looked at communal areas and a selection of bedrooms and saw that all these areas were clean and well maintained. However the bathrooms did not provide suitable equipment to support people with limited mobility to have a bath. Staff spoken with said that some people who used the service were unable to have a bath as they could not get in or out.

The kitchen looked tired and the work tops had started to break up making them a risk of infection. As the kitchen is open plan and anyone using the service can access this area the electric cooker needs to be risk assessed as there is no cover on it to minimise people burning themselves when it still hot after it has been used then turned off.
Evidence:

Staff spoken with said that routine maintenance takes place and anything needs to be done is reported and is written in a book. Staff were aware of the out of hours maintenance contact person if they needed something doing after 5 pm or at weekends.

The laundry is in a separate part of the building and is suitable for its purpose and staff told us that they are provided with suitable personal protective equipment to prevent the risk of infection.
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.

Sufficient trained staff are always available to meet people's needs.

Evidence:

The manager told us in information received before the inspection that, 'regular supervising of staff, 4-6 week shadowing period for new staff and sound recruitment and induction policy, procedure and programme'.

We looked at some of the staffing records and these showed us that two references and the results of a Criminal Records Bureau check had been obtained prior to the new people starting work at the home. An induction programme was used and recorded for all new staff.

We looked at the rota and this told us that there were enough staff on duty to ensure that people who used the service were able to do the things they wanted to do. Staff also told us that there was usually enough staff on duty to meet the individual needs of the people who use the service.

Staff told us that they received training that is relevant to their job and keeps them up to date with new ways of working. We also looked at training records and saw that staff were supported to attend a variety of training including infection control, first aid.
Evidence:

and National Vocational Qualifications.

We saw from records that staff receive regular supervision to help them understand their role and discuss any training needs they may have.

Relatives told us that, 'I think the service at Church Street from what I have seen is very good.' and 'The staff at Church Street are invariably dedicated above and beyond the call of duty'.
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 managed in the best interests of people who live there and their health and safety is supported.

Evidence:

The manager told us in information received before the inspection that, 'there are now monthly visits by a project officer for regulation 26 inspections. The registered manager is qualified. There are regular audits and checks for evaluating and reviewing performance. Policies and procedures are in place. Documenting systems are in place for evidencing what occurs within and for each 24 hour period'.

The manager is registered with the Commission as a fit person to be in charge of a registered care service.

We looked at records and these showed that since the service has been re registered following Nottinghamshire County Council assuming responsibility for the service they are visited by someone from the council to carry out monitoring.
Evidence:

We looked at safety records and these showed that the suitable tests are carried out to ensure the safety of equipment such as electrical and gas equipment.

We also checked accident records and these showed that the manager had reported any incident that had adversely affected the well-being of a person using the service to the Commission.

Staff spoken with told us how they used different methods of communicating with people who use the service to ensure that they understand their safety needs. We were shown personal escape plans where scale models of people's bedrooms were used as a way of showing someone how to escape from their bedroom in the event of a fire.
Are there any outstanding requirements from the last inspection?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
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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>
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</thead>
</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>
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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.

<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>1</td>
<td>1</td>
<td>5</td>
<td>The Service User Guide must be updated to include the information about who is the provider. This is to ensure that people who want to use the service have all the information to make their choice.</td>
<td>09/03/2010</td>
</tr>
<tr>
<td>2</td>
<td>6</td>
<td>15</td>
<td>Support plans must be made available to people who use the service in a format that they understand. This is to ensure people who use the service receive the support they need and want in the way they are happy with.</td>
<td>31/03/2010</td>
</tr>
<tr>
<td>3</td>
<td>24</td>
<td>13</td>
<td>Unnecessary risks are identified and and so far as possible eliminated. The electric cooker must be made safe to ensure people who have access to this area</td>
<td>31/03/2010</td>
</tr>
</tbody>
</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>
<tbody>
<tr>
<td>4</td>
<td>24</td>
<td>13</td>
<td>The kitchen must be kept in a good state of repair. Where the work surfaces are damaged they must be repaired to minimise the risk of infection.</td>
<td>30/04/2010</td>
</tr>
<tr>
<td>5</td>
<td>24</td>
<td>13</td>
<td>People must be free from avoidable risks in all parts of the home they have access to. The bathroom must be made accessible and suitable for the needs of all people using the service.</td>
<td>30/04/2010</td>
</tr>
</tbody>
</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>6</td>
<td>People’s support plans could be written in a more person centred way to ensure they reflect the needs of the person they are for.</td>
</tr>
<tr>
<td>2</td>
<td>20</td>
<td>When using codes to describe why medication has been missed ensure the reason has been defined.</td>
</tr>
</tbody>
</table>
Helpline:

Telephone: 03000 616161  
Email: enquiries@cqc.org.uk  
Web: www.cqc.org.uk

We want people to be able to access this information. If you would like a summary in a different format or language please contact our helpline or go to our website.

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