

# Key inspection report

## Care homes for older people

<b>Name:</b>	Oakwood Care
<b>Address:</b>	192 West End Road Bitterne Southampton Hampshire SO18 6PN

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

<b>Lead inspector:</b>	<b>Date:</b>							
Nick Morrison	1	2	0	1	2	0	1	0

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

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

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

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

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

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

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

**Outcome area (for example Choice of home)**

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

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

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

**This is what people staying in this care home experience:**

Judgement:

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

Evidence:

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

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

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

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

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## Information about the care home

Name of care home:	Oakwood Care
Address:	192 West End Road Bitterne Southampton Hampshire SO18 6PN
Telephone number:	02380466143
Fax number:	02380466112
Email address:	karenperrin11579@hotmail.com
Provider web address:	

Name of registered provider(s):	G & A Investments Projects Ltd
Name of registered manager (if applicable)	
Mrs Karen Lynn Perrin	
Type of registration:	care home
Number of places registered:	28

Conditions of registration:		
Category(ies) :	Number of places (if applicable):	
	Under 65	Over 65
dementia	0	0
mental disorder, excluding learning disability or dementia	0	0
old age, not falling within any other category	0	0
Additional conditions:		
The maximum number of service users to be accommodated is 28.		
The registered person may provide the following category/ies of service only: Care home - to service users of the following gender: Either Whose primary care needs on admission to the home are within the following categories: Old age, not falling within any other category (OP) Dementia (DE) Mental Disorder, excluding learning disability or dementia (MD)		
Date of last inspection		

### Brief description of the care home

The service is situated in a quiet area off a main road. It has parking at the front and to the rear. The accommodation is on the ground floor and first floor, which is accessed by stairs and a chair lift. The home has pretty gardens and seating outside as well as a lounge and dining area. There are two double rooms that are separated by a curtain and both rooms have two sinks. The other rooms are all single with en-suite facilities.

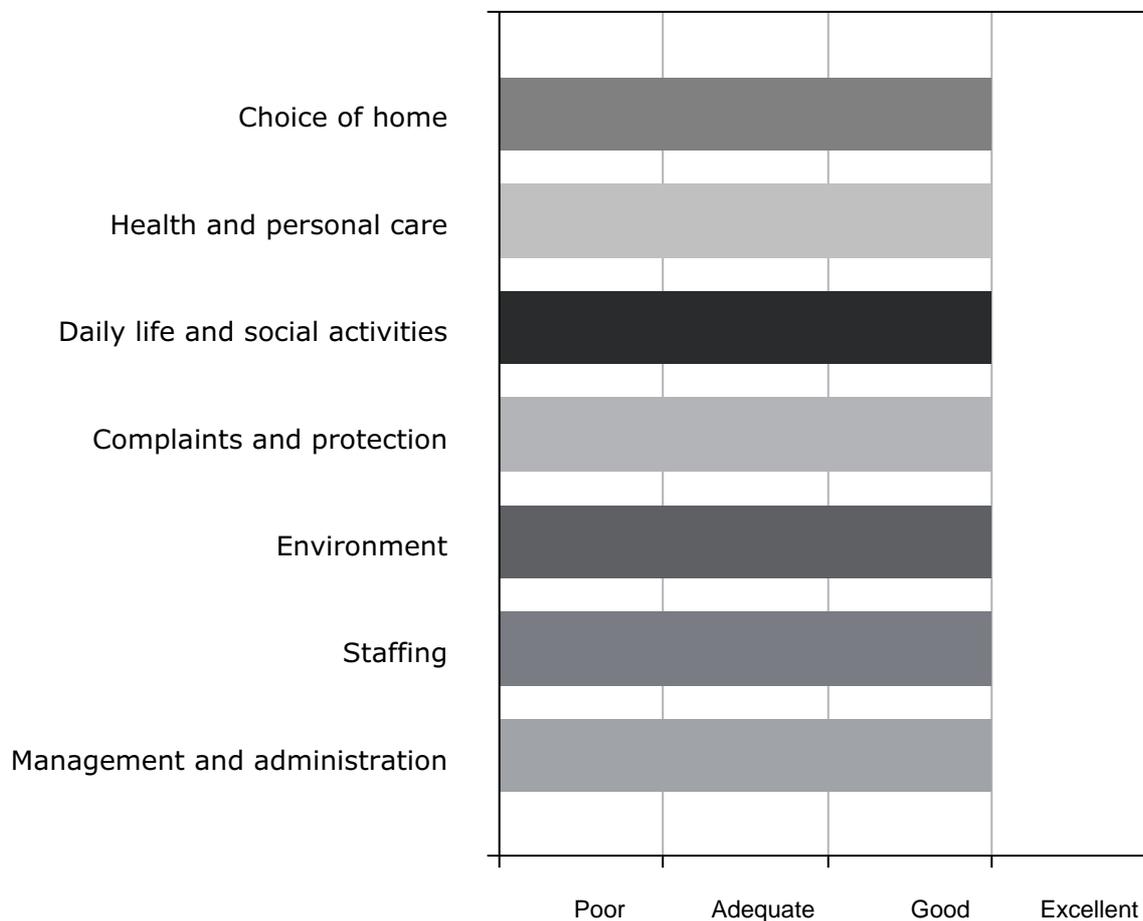
## Summary

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:



### How we did our inspection:

This report represents a review of all the evidence and information gathered about the service since the previous inspection. This included a site visit that occurred on 12 January 2010 and lasted from 10:00am until 3:00pm. During this time we toured the premises, looked at five service users' files and spoke with three people living in the home. We also met with the Manager and spoke with two other members of staff. All records and relevant documentation referred to in the report were seen on the day of inspection visit. We have also referred to the Provider's Annual Quality Assurance Assessment (AQAA).

The previous Key Inspection for this service occurred on 6 May 2009. Since that time we have made three further Random Inspections of the service to ascertain whether or not the requirements made in May 2009 had been addressed. A Random Inspection took place on 24 July which found that requirements had not been met. We sent the home a Statutory Requirement notice on 13 August 2009 which they had failed to comply and as a result there were further Random Inspections on 1 September and 2

November 2009.

### **What the care home does well:**

The service has a good care planning process in place and the needs of people living there are clearly identified and addressed. There is close and effective liaison with the District Nursing team regarding the healthcare needs of people living in the home. There is a good range of activities on offer in the home. People living in the home also have good and nutritious food. There is a clear and accessible complaints procedure in place and good processes for recording and responding to any complaints. The environment is clean and homely and staff appeared to be supportive and respectful towards people living in the home.

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

Since the previous Key Inspection on 6 May 2009 the home has met the nine requirements made at that time as well as two further requirements made at the Random Inspection on 24 July 2009.

Improvements have been made in the management, recording, administering and storage of medication. Infection control procedures are being followed and staff have received, or are receiving, the training they need to carry out their roles.

Safety in the home is now managed better and the provider is undertaking monthly visits to monitor service delivery.

There has been a change in the management roles within the home which has resulted in the Manager having more time and opportunity to monitor all aspects of the service. This has contributed to the fact that requirements made at the previous inspection have now been addressed and that the standard of service delivery has improved.

### **What they could do better:**

No requirements were made as a result of this inspection.

The home is moving towards identifying its own improvements necessary for the service.

These improvements need to be maintained and ongoing improvements needed to the service should be identified and responded to by the service.

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](http://www.cqc.org.uk). You can get printed copies from [enquiries@cqc.org.uk](mailto:enquiries@cqc.org.uk) or by telephoning our order line 0870 240 7535.

## Details of our findings

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## 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 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.

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.

**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.

Service users benefit from having their needs assessed prior to moving into the home and have the information they need about the service.

Evidence:

We looked at the files of six people who use the service, including the two most recent admissions. The home requires full assessments for all service users prior to deciding whether or not they can meet the person's needs in the home. Service users' files showed that these assessments were in place and had been completed prior to the person moving in. Assessments were comprehensive and contained details of all needs.

Clear information about the service was available to all people moving into the home and was also available in the entrance to the home.

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

Service users benefit from having clear care plans in place and from having their needs met and are now protected by the home's medication practices.

Evidence:

We had made a requirement at the previous Key Inspection on 6 May 2009 regarding the managing, recording and administering of medication. This was still unmet at the Random Inspections on 24 July 2009 and 1 September 2009, but was met by the time of the Random Inspection on 2 November 2009. We made a further requirement at the Random Inspection on 24 July regarding the storage of controlled medication in the home. We found at the time of this current inspection that this requirement had been met.

At this inspection we looked at the medication records for eleven people who live in the home. We found that there were no gaps in the records and all records were kept in good order. Storage of medication had been addressed. All medication was stored safely and the home now had a cabinet for the storage of controlled medication. We observed good, safe practice when observing a member of staff administering the

## Evidence:

medication and records were referred to throughout the process to ensure that people were receiving the correct information. Hygiene practices were followed by the person administering the medication and she also wore a tabard indicating to other staff that she was administering medication and should not be disturbed while doing so. This was to aid concentration and prevent mistakes. The home is in the process of changing the chemist who supplies the medication and this will include further training for staff. Clear policies were in place for all aspects of medication management and these were followed on the day of the inspection visit.

We looked at the files and care plans of five people who live in the home. Since the previous inspection care plans had been reorganised and the files now contained different sections so that the care plans and risk assessments were easier to use and view by staff. The plans were written in clear, precise terms so that staff were all able to see exactly what support was needed by each person and how the support needed to be delivered. This contributed to consistency of care for people living in the home. Care plans contained risk assessments where an element of risk had been identified and measures were put in place to minimise risks to people. The effectiveness of the care plans and risk assessments was assessed on a monthly basis and long-term needs were assessed on an annual basis. People's care plans also contained behavioural assessments and plans where necessary, according to the needs of each person. There was information in the back of each care plan so that staff in the home knew how to use the care planning system in a consistent way. The files also contained daily records used to identify any pressure areas, bruises or any other physical problems with instructions on reporting these directly to the management team. The home has also introduced a keyworking system. Each of the four senior staff are responsible for monitoring the care for a list of service users and they have named care staff to support them in this. The home liaises closely with the District Nursing staff in monitoring the health needs of people living in the home and provides a workplace for them. The District Nurses monitor people's healthcare needs and report to the Manager of the home if there are any concerns. Information is then used in updating people's care plans. We discussed with the Manager the need to ensure that the home was also closely monitoring health needs and responding to them in a timely manner. An illustration of this was that the District Nurses had recently highlighted concerns about a person's loss of weight. While the home responded to the concerns raised, they had waited for the issue to be raised by the District Nurses when it was already clear from the home's own records that some intervention was required. The Manager acknowledged this and said that closer monitoring would be put in place.

Observation throughout the inspection showed that staff treated service users with

Evidence:

respect and maintained their dignity at all times.

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

Service users are supported to maintain contact with their friends and family and from a range of activities being available in the home. Service users also benefit from having varied and nutritious meals and from being able to exercise control over their lives.

Evidence:

The home has a good range of activities on offer for people living there. The activities for each day are highlighted on the notice board in the front entrance and this includes pictures of the activities to make them more easily understood. Since the previous inspection there has been an improvement in the way individual involvement in activities is recorded and the Manager informed us she is in the process of making further improvements in this area to ensure that it is clear how much involvement individual people are enjoying. Service users are supported to maintain contact with their friends and relatives. This was confirmed by those people we spoke with and the visitors' book showed that most people living in the home received visitors on a regular basis. Staff in the home also supported service users to read and write letters to relatives who were not able to visit on a regular basis.

Observation throughout the inspection and discussion with service users showed that

## Evidence:

people living in the home were supported to exercise choice wherever they could. We saw staff asking service users which, if any, activities they wanted to be involved in, where they wanted sit during lunch times and we observed that people were able to choose to have their meals in their room if they preferred. Service users told us they were able to spend as much time as they wanted in their rooms and also felt they could spend time in any other part of the building whenever they wished to.

Menus showed that the food in the home was varied and nutritious. Observation of the kitchen area on the day of inspection showed that fresh ingredients were used and that meals were freshly prepared wherever possible. Alternative meals were made available for people who needed specific diets or who did not like what was on the menu. Diabetic needs were catered for.

Service users had their food individually plated according to their wishes and preferences and had it served to them by members of staff. This was done in a respectful and unobtrusive manner.

Staff support was available throughout the lunchtime period for those people who needed it and we observed that people were made comfortable in order to eat their meals.

The mealtime we observed was a social occasion and people spent the time chatting to their friends.

During the morning we observed the cook going around to people asking them what they wanted to eat that day. The menu was explained and alternatives were offered to people who did not want what was on the menu. Rather than just ticking off a list, the cook used this time to sit down and spend time talking with service users. This included discussions about their ideas for future menus.

## 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.

Service users benefit from a clear complaints policy and are protected by the service's safeguarding policies and procedures.

Evidence:

The home has a clear and effective complaints policy in place. The policy is made available to service users and their families on admission and a copy is also available in the front entrance of the building.

The home has a very positive attitude to complaints and actively encourages people to complain. There is also a suggestions box in the main entrance which service users and visitors are encouraged to use. There had been no complaints since the previous inspection.

The home has clear adult protection policies and procedures in place and the Manager was clear that people living in the home needed to be protected from any form of abuse.

Examination of training records showed that there had been an improvement in the number of staff in the home who had received training in adult protection issues. Further training had been booked for staff who had not yet received this. The Manager was clear about the local reporting procedures for adult protection issues.

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

Service users benefit from living in a clean and homely environment and facilities and are protected by the home's hygiene practices.

Evidence:

All parts of the building were kept clean and the home retained a homely and comfortable appearance. The lounge has three distinct areas where people could watch television, listen to music or sit quietly. We had made a requirement at the previous Key Inspection on 6 May 2009 regarding infection control practices in the home. This was still unmet at the Random Inspections on 24 July 2009 and 1 September 2009, but was met by the time of the Random Inspection on 2 November 2009. The home has Infection Control policies in place and there are reminders throughout the building for staff to wash their hands as necessary and guidance on how to do this effectively. Staff practices observed on the day of the inspection visit caused no concern about hygiene practices. Staff training in infection control is being managed and the domestic staff in the home had all received training in this area. Staff support and supervision session records showed that domestic staff were supported to understand hygiene issues in relation to the people living in the home and the need to ensure that good hygiene practices were followed.

We had made a requirement at the previous Key Inspection on 6 May 2009 regarding a broken lock on a toilet door. This was still unmet at the Random Inspections on 24

Evidence:

July 2009 and 1 September 2009, but was met by the time of the Random Inspection on 2 November 2009. During this current inspection we found that the home was in a good state of repair and that maintenance issues were highlighted and dealt with within reasonable time frames with good records kept of work done.

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

Service users benefit from being supported by adequate numbers of staff and are protected by the home's recruitment practices. The service is in the process of ensuring that all staff are trained for the work they do.

Evidence:

We looked at the recruitment files of four members of staff and found that all the required pre-employment checks had been undertaken prior to the person beginning work in the home. There were four staff on duty each morning, including a senior member of staff. In the afternoon there were three members of staff, including one senior. At night there were two members of staff on waking night duty. In addition to these staff there was the Manager, the Chef and the Cleaner.

We had made a requirement at the previous Key Inspection on 6 May 2009 regarding staff receiving the training necessary to carry out their roles. This was still unmet at the Random Inspections on 24 July 2009 and 1 September 2009, but was met by the time of the Random Inspection on 2 November 2009.

Training records seen on the day of this inspection showed that there had been an improvement in the number of staff trained in key areas of their role. The Manager had prioritised training to ensure that staff were having training that would contribute to service users receiving a service safely. There were still some outstanding training

Evidence:

needs for some staff, but the Manager was able to show us correspondence showing that these needs were going to be met through training that had been planned for this year.

Records of staff support and supervision sessions showed that they were being supported to identify their own training needs. These records also showed that the sessions were being used to inform staff about issues relating to their work. The records for one of the domestic staff showed that health and safety issues were discussed and related to the needs of people living in the home so that the member of staff understood why issues were important.

Observation throughout the day showed that staff interacted very well with people living in the home and took time to ensure they given choices and made comfortable.

## 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:**

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.

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.

**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.

Service users' financial interests are protected and the home is run in their best interests.

Service users are protected by the home's management of health and safety issues.

Evidence:

We had made a requirement at the previous Key Inspection on 6 May 2009 regarding the monitoring of the service. We found at this current inspection that this requirement has now been met. There had been a significant reorganisation of duties within the home since the previous Key Inspection. The four senior members of the care team have now had responsibilities delegated to them and are each responsible for ensuring that specific aspects of service provision are delivered appropriately. The Manager's role has changed so that she now has responsibility for monitoring the effectiveness of those aspects of the service that have been delegated. Since the previous inspection the home had also employed the services of a consultant to help with service improvements.

## Evidence:

We had made a requirement at the previous Key Inspection on 6 May 2009 regarding the Provider's obligation to make monthly visits to the service and to provide reports of these. We found at this current inspection that this requirement has now been met. The Provider had begun to visit the service and make records of the visits. This demonstrates the Provider's monitoring of the service. The records contained information on recent events, new staff, policies, developments, training and social events.

We had made three requirements at the previous Key Inspection on 6 May 2009 regarding health and safety issues in the home. These related to an unsafe electrical control unit for the stairlift, the use of a gate on a service user's door and the home not ensuring that control measures identified to reduce risks were in place at all times. All of these requirements had been addressed by the time of this current inspection.

We looked at records of the money the home holds on behalf some service users and found that these matched with the amount of money each person had. There were receipts for each item of expenditure and the records were kept in good order.

Are there any outstanding requirements from the last inspection?

Yes

No

## Outstanding statutory requirements

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

No.	Standard	Regulation	Requirement	Timescale for action

## Requirements and recommendations from this inspection:

### Immediate requirements:

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

No.	Standard	Regulation	Requirement	Timescale for action

### Statutory requirements

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

No.	Standard	Regulation	Requirement	Timescale for action

### Recommendations

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

No	Refer to Standard	Good Practice Recommendations

## Helpline:

**Telephone:** 03000 616161

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

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

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