

## Key inspection report

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

<b>Name:</b>	South Park
<b>Address:</b>	10 & 11 Park Drive South Gledholt Huddersfield West Yorkshire HD1 4HT

<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>
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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 Adults (18-65 years) can be found at [www.dh.gov.uk](http://www.dh.gov.uk) or bought from The Stationery Office (TSO) PO Box 29, St Crispins, Duke Street, Norwich, NR3 1GN. Tel: 0870 600 5522. Online ordering from the Stationery Office is also available: [www.tso.co.uk/bookshop](http://www.tso.co.uk/bookshop)

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:	South Park
Address:	10 & 11 Park Drive South Gledholt Huddersfield West Yorkshire HD1 4HT
Telephone number:	01484315551
Fax number:	01484315551
Email address:	compass.care@ntlworld.com
Provider web address:	

Name of registered provider(s):	Compass Care Homes Ltd
Type of registration:	care home
Number of places registered:	10

Conditions of registration:		
Category(ies) :	Number of places (if applicable):	
	Under 65	Over 65
learning disability	10	0
Additional conditions:		
The maximum number of service users who can be accommodated is: 10		
The registered person may provide the following category of service only - Care home only - Code PC, 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
<p>South Park is a care home providing accommodation and personal care for ten people who have varying degrees of learning disability. The business is privately owned through a limited company.</p> <p>The accommodation consists of two linked dormer bungalows. All the bedrooms are for single occupancy. There are two lounges, a separate dining area, and a garden with an area of decking to the rear of the property. There is also a small amount of off road car parking to the front of the property.</p> <p>The home is sited adjacent to Greenhead Park in a residential suburb of Huddersfield.</p>

#### Brief description of the care home

There are some shops within walking distance and good transport links into the centre of the town.

Fees at the home start at £724.24-£1083.40 per week.

Items not covered by the fee include: Hairdressing and toiletries.

Information about the home and the latest Commission for Social Care Inspection report are available from the home.

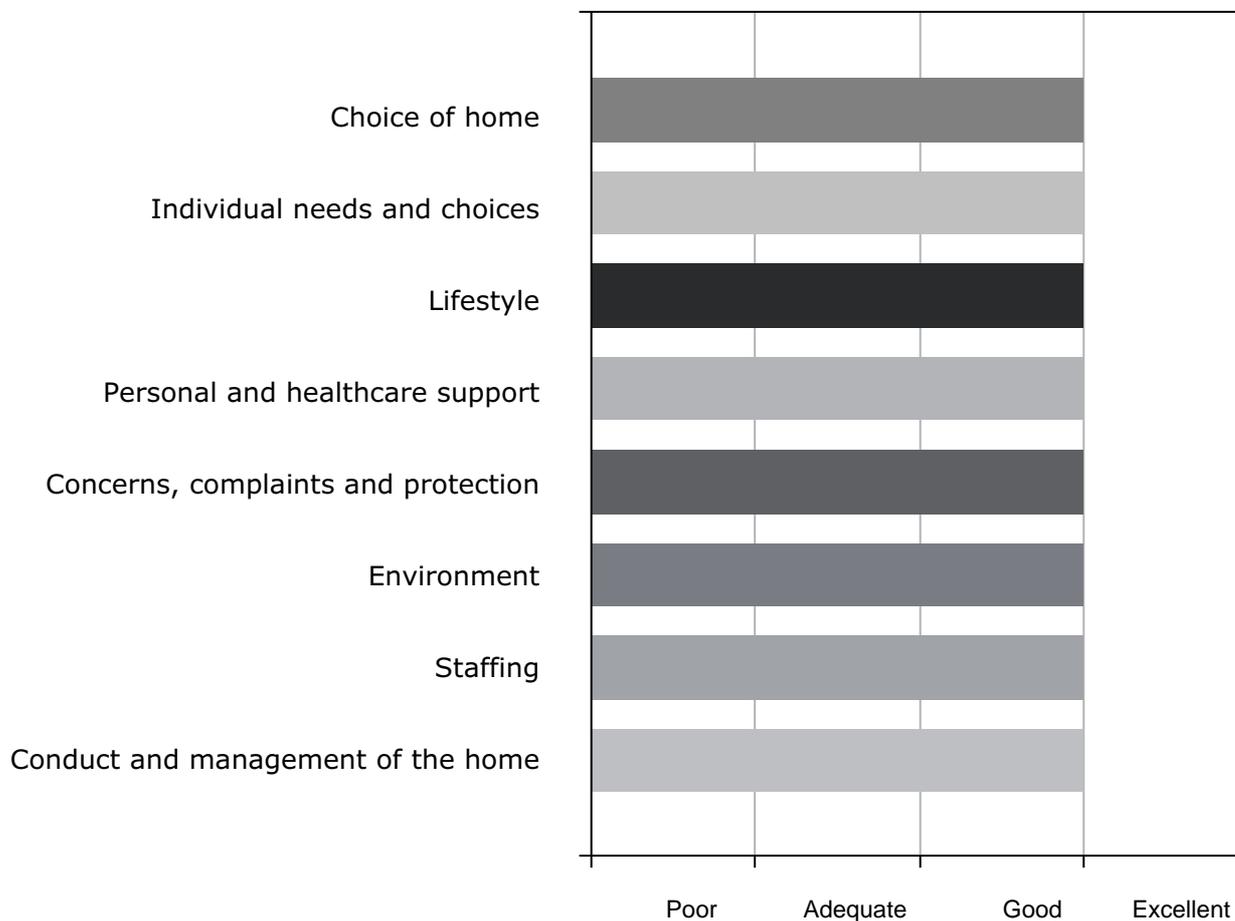
## Summary

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:

The quality rating for this service is two star. This means the people who use this service experience good quality outcomes.

This report refers to an inspection, which included an unannounced visit by two inspectors on the 8th July 2009, commencing at 9.40am, and the length of the inspection was 6.5 hours. The last key inspection was in July 2007.

At the time of the inspection the manager was new to the service and had started working at the home that week. He has a number of years experience in the care of people who have learning disabilities and is studying for a National Vocational Qualification level 4 in management and care. On the day he was accompanied by the deputy manager who has many years experience and has been working at the home for several year.

As part of the inspection in order to provide information to help us form judgments about the quality of the service, the proprietor is asked to complete an annual quality assessment (AQAA) document. As the assessment has not been requested this year, the assessment that we received last year was used, and this document provided the Care Quality Commission (CQC) with a lot of information about the way the home is run, and what they hope to achieve in the future.

To enable people who use the service to comment on the care it provides, we sent surveys to ten people living at the home, four of which were returned, ten to staff, one of which was returned, six to local doctors and health care workers (social workers, community nurses), one of which were returned. The information was positive about the support and care provided for people who live at the home.

We focused on the key standards and what the outcomes are for people living in the home, as well as matters, which were raised at the last inspection.

We have reviewed our practice when making requirements, to improve national consistency. Some requirements from previous inspection reports may have been deleted or carried forward into this report as recommendations but only when it is considered that people who use services are not being put at significant risk of harm. In future, if a requirement is repeated, it is likely that enforcement action will be taken.

We would like to thank all people who gave feedback about the home, and would like to thank the manager and staff for their co-operation on the day of the visit.

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

People living at the home lead an active lifestyle, are supported to keep in touch with family and friends, and have their rights respected.

One of the surveys returned from a health professional states that the service provides, "Excellent quality of care/ social activities for residents."

People living at the home and their relatives and friends can be confident that their complaints will be listened to, taken seriously and acted upon. People are protected from abuse.

As a tribute to the standard of food provided the home has received a four stars, "Very Good" award in association with Kirklees Council's Health Choice Award. "Scores on the doors." The award is a five star rating scheme providing information about the standards of hygiene and compliance with legislation in food premises within Kirklees.

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

Since the last inspection areas around the home have been re decorated, and a large, flat screen television, new curtains, mirror and lighting have all been replaced in the lounge. The downstairs toilet has also been upgraded, and the staff said that the registered person also plans to upgrade the laundry room in the near future.

The cleanliness of the home has also improved and people who live there said that it was always or usually fresh and clean.

The care plans have also been revised so that all current information is held in one place and this makes it much easier for staff to access.

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

In order to make sure that peoples assessed needs are met, the individual care plan should include all the areas where it has been identified that people need support.

In order to ensure that individual's health care needs are being met, guidance and instructions from healthcare professionals should be followed as agreed, and clear records should be kept in respect of this.

So that people's best interests are protected, any limitations on facilities, (which in this instance means the access to the kitchen,) or restrictions on choice and freedom to prevent harm, should be agreed and recorded as part of the care plan.

The manager should have an NVQ level 4 both in management and care to ensure that he has the necessary skills and knowledge to manage the home.

Fifty percent of care staff should have an NVQ level 2 in care or equivalent, as qualified staff have a better understanding of peoples needs.

Further guidance and advice should be sought from the fire prevention officer to explore if there is any specialist equipment that would be suitable for people with

hearing difficulties to alert them to the fire alarm being activated.

Clear information must be available to staff about when 'as required' medication is to be given. Arrangements must be made for the safekeeping, recording and administration of such medication when the individuals concerned are out in the community. Care plans/risk assessments should be updated to reflect any changes. This is to make sure that people are receiving their medication exactly as prescribed.

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, what they hope for and want to achieve, and the support they need.

People can decide whether the care home can meet their support and accommodation needs. This is because they, and people close to them, can visit the home and get full, clear, accurate and up to date information. If they decide to stay in the home they know about their rights and responsibilities because there is an easy to understand contract or statement of terms and conditions between the person and the care home that includes how much they will pay and what the home provides for the money.

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

Judgement:

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

People are assessed prior to them moving into the home to ensure that their needs can be met.

Evidence:

Records relating to three people were looked at during the visit. Each of the individuals records showed that they had lived at the home for several years. Care management assessments were in place in each of the files looked at. There was evidence in the records that regular reviews take place where individuals needs are reassessed so that the care plan can be updated.

## Individual needs and choices

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

People's needs and goals are met. The home has a plan of care that the person, or someone close to them, has been involved in making. People are able to make decisions about their life, including their finances, with support if they need it. This is because the staff promote their rights and choices. People are supported to take risks to enable them to stay independent. This is because the staff have appropriate information on which to base decisions.

People are asked about, and are involved in, all aspects of life in the home. This is because the manager and staff offer them opportunities to participate in the day to day running of the home and enable them to influence key decisions. People are confident that the home handles information about them appropriately. This is because the home has clear policies and procedures that staff follow.

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

Judgement:

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

People are supported to make choices and decisions about their lives. Good information is available about how to meet peoples needs and minimize risks. Ensuring that all information relevant to peoples current needs is transferred to the care plans and risk assessments, may improve the planning, care and support for individuals.

Evidence:

Since the last inspection visit the format of the care plans has been revised so that all current information is held in one place. This makes it much easier for staff to access. Care plans for three people were looked at and each contained detailed information about how individuals needs should be met. A record of who had been consulted as part of the care planning process is kept. In each of the records examined there was evidence that six monthly reviews take place. Although there was a record of who had been invited to these reviews it was not always clear who had actually attended. Records should reflect who has participated in the review process. It was noted that some significant areas of peoples care that was referred to in the daily records had not

## Evidence:

been included in individuals plans. For example, there was no information on how an individual should be supported with new hearing equipment, and there was no evidence to demonstrate that any monitoring had taken place. In order to ensure that individuals care needs are met it is essential that identified needs are included as part of the care plan. A recommendation has been made in respect of this. There was no record in the care plans of any agreement about people having restricted access to the kitchen. Where restrictions about peoples freedom and choice have been imposed, this needs to be agreed and recorded clearly explaining the rationale.

Through discussions with staff it was apparent that people living at home are supported to make decisions about their lives. On the day of the visit, a trip in a limousine had been organised to celebrate an individual's birthday as this was something they had always wanted to do. There was evidence in the records of people make decisions about their lives on a regular basis for example, if people decided they did not want to attend daycare on a particular day, records suggested that this was discussed with the individual and that their decision was respected.

Records show that people are supported to take reasonable risks as part of an independent lifestyle. Risk assessments were in place in the three files that were examined. For the most part there was clear information about what the identified risk was, and what steps should be taken to minimise the risk. Further information is required in relation to the management of an individual's epilepsy and the associated risks, however this is discussed in more detail in outcome area four. There was evidence that risk assessments are reviewed regularly.

## 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 living at the home lead an active lifestyle, are supported to keep in touch with family and friends, have their rights respected and have a healthy and varied diet.

Evidence:

The deputy manager explained that the people living in the home have varied interests and preferences about how to spend their day. she reported that most people attend a day service or college for part of the week.

On the day of the visit several people were at day placement. A range of activities are planned for those people staying home during the day, and these are recorded on staff duty rota so that staff are clear about what has been planned for the day.

A small group of people went out in a limousine as part of a birthday treat for an individual. The deputy manager said that a surprise holiday had been arranged for

## Evidence:

someone as part of their birthday celebration. She reported that the chosen destination is somewhere that the individual has always wanted to go.

Daily records showed that people living in the home access community facilities on a regular basis, for example, pubs, restaurants, local shops. A car is available for people to use to enable them to pursue their chosen activities, and each person makes a financial contribution to wards this. Records show that each individual goes on holiday at least once a year and people spoken to reported enjoying these holidays. Lots of holiday photographs were displayed around the home showing a range of holiday destinations.

One of the surveys returned from a doctor stated that the service provides, "Excellent quality of care/ social activities for residents."

Two people who use the service said that they do make decisions about what they do each day. One person said that they usually did, and a fourth person said that they sometimes make decisions about what they do each day.

There was evidence in the records that people are supported to maintain contact with family and friends, and staff spoken to confirmed this. The records suggest that people are supported to develop and maintain friendships with people of their choice, whilst being mindful of supporting people to make informed, appropriate decisions.

People living at the home have unrestricted access to all areas except the kitchen. The manager explained that the kitchen door is kept locked to prevent people entering without staff supervision. He reported that when staff were in the kitchen, the door is kept open so that people can come in and out freely. Restrictions to peoples freedom of movement and individual choice should be agreed within the individual plan. A recommendation has been made in respect of this under standard 6. Staff were observed to knock on bathroom and bedroom doors before entering.

The menus were varied and take into consideration the likes and dislikes of people living there. As a tribute to the standard of food provided the home has received a four stars, "Very Good" award in association with Kirklees Council's Health Choice Award. "Scores on the doors." The award is a five star rating scheme providing information about the standards of hygiene and compliance with legislation in food premises within Kirklees.

## 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.

Medicine management is good overall, people receive personal support in the way they prefer and require, and generally peoples health care needs are met appropriately.

#### Evidence:

Information about how people prefer to be supported with their personal care was recorded in the records that were examined. This included information about what time people prefer to go to bed, get up, and what support is required with personal hygiene etc. Staff spoken to explained that routines such as the times for going to bed, having baths, meals and other activities are flexible.

During the inspection visit several examples of discreet and sensitive care being offered were observed, although an individual was seen to be guided by a member of staff inappropriately. The manager agreed to address this matter.

Some of the people living at home require specialist equipment for moving and handling. Staff were observed to use this appropriately, explaining to the individual

Evidence:

what was happening.

Records showed that people receive additional specialist support and advice where needed from physiotherapy, psychiatric services, audiology, community nurse etc. It was noted that although people are provided with good support to access specialist services, the records did not demonstrate that the required follow-up action or advice offered was always implemented. For example, a record of an individual's mood, requested by the community nurse, had not been completed; advice regarding an individual's specific oral care needs had not been transferred onto the care plan and there was no evidence that it was being implemented; an instruction to monitor an individual's weight by weighing monthly had not been carried out according to the records; there was no evidence of monitoring how an individual was getting on with new hearing equipment or how they should be supported to use/care for the equipment. In order to ensure that individual's health care needs are being met, guidance and instructions from healthcare professionals should be followed as agreed, and clear records should be kept in respect of this.

Further information regarding the management of an individual's epilepsy needs to be made available to staff. Clear guidance about how staff should respond when out in the community if the individual has a seizure must be agreed and recorded.

Some records show that routine screening had been offered to individuals, however this has not always been taken up. The deputy manager reported that some individuals living at home would be reluctant to co-operate with some of these procedures due to their learning disability. It is recommended that this be explored further with specialist healthcare professionals to ensure that wherever possible people are receiving the appropriate general health screening. Records of this should be kept.

Medication for four people was examined. All medication tallied with the records kept and good systems are in place to audit medication. The deputy manager reported that only staff who have received the appropriate training administer and handle medication. One member of staff is responsible for checking in medication and records of this are kept.

During the visit an individual was administered an 'as required' medication following a seizure. The explanation as to why this medication had been given was not consistent with what was written in the risk assessment. Clear guidance must be available for staff about under what circumstances as required medication should be given. This should be developed in consultation with the appropriate healthcare professionals and

Evidence:

if possible the individual for whom it is prescribed. Account should also be taken of what procedure should be followed for administering, storing and recording the medication when the person is out of the home. The risk assessment and care plan should be updated to reflect any changes. A requirement has been made in respect of this.

## Concerns, complaints and protection

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

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

There are no additional outcomes.

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

Judgement:

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

People living at the home and their relatives and friends can be confident that their complaints will be listened to, taken seriously and acted upon. People are protected from abuse.

Evidence:

People said that they knew who to speak to if they were not happy and with the exception of one person, everyone knew how to make a complaint. Evidence showed that there had been one complaint since the last inspection which had been dealt with appropriately and which was not the fault of the home. The information from the health care professional said that the service always respond appropriately when any concerns had been raised.

Training records showed that staff have had safeguarding training (protection of vulnerable adults training,) and when spoken with staff were aware of the procedure to follow, and also the whistle blowing procedure.

## Environment

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

People stay in a safe and well-maintained home that is homely, clean, comfortable, pleasant and hygienic.

People stay in a home that has enough space and facilities for them to lead the life they choose and to meet their needs. The home makes sure they have the right specialist equipment that encourages and promotes their independence. Their room feels like their own, it is comfortable and they feel safe when they use it. People have enough privacy when using toilets and bathrooms.

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

Judgement:

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

The home offers people a homely, comfortable and clean environment.

Evidence:

As part of the inspection a tour of the home took place, which included the communal areas, laundry and garden. Since the last inspection areas around the home have been re decorated, and a large, flat screen television, new curtains, mirror and lighting have all been replaced in the lounge. The downstairs toilet has also been upgraded, and the staff said that the registered person also plans to upgrade the laundry room in the near future.

With the permission of people living at the home a sample of bedrooms were also inspected. The rooms were individualised with personal belongings, and reflected the personalities and tastes of the people living there.

Within the small lounge the arms of the settee were showing signs of wear. The downstairs hall was clean however; it was starting to look faded. These issues were discussed with the staff at the time. The stairs handrail was also loose. The manager said that he would take steps to deal with the situation that day.

People who live at the home said that it was always or usually fresh and clean.

## Staffing

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

People have safe and appropriate support as there are enough competent, qualified staff on duty at all times. They have confidence in the staff at the home because checks have been done to make sure that they are suitable. People's needs are met and they are supported because staff get the right training, supervision and support they need from their managers.

People are supported by an effective staff team who understand and do what is expected of them.

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

Judgement:

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

People living at the home benefit from being supported by qualified, competent and supervised staff, that have had all the necessary checks before working with people so that they are kept safe.

Evidence:

The duty rotas and staff training files were inspected and there was evidence to suggest that the staffing levels and skill mix were sufficient to meet the number and needs of people living at the home.

Evidence was seen in the staff records that they had received training to enable them to do their job. Staff also confirmed that they had induction training, supervision, and that they had the experience and knowledge to meet the different needs of people who live at the home. Staff continues to work towards achieving an NVQ 2 in care.

Staff recruitment files contained the relevant information and documentation.

## 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 manager has the experience to competently manage the home. The health, safety and welfare of people who live at the home is protected.

Evidence:

At the time of the inspection the manager was new to the service and had started working at the home that week. He has a number of years experience in the care of people who have learning disabilities and is studying for a National Vocational Qualification level 4 in management and care. On the day he was accompanied by the deputy manager who has many years experience and has been working at the home for several year.

Records show that the staff attend regular training and up dates of existing training, these include fire, movement and handling, health and safety and first aid.

The fire alarms had been tested weekly however, a week in May and June 2009 had not been recorded. The deputy manager explained that the person who usually tests the alarms was on holiday during these times. She also said that senior staff were

Evidence:

having training to ensure that the alarm system is tested weekly.

It was noted in an individual's risk assessment that they would have difficulty in hearing the fire alarm when they were in bed due to hearing difficulties. Further guidance and advice should be sought from the fire prevention officer to explore if there is any specialist equipment that would be suitable for the individual.

Meetings with people who live at the home take regularly and minutes were seen for May and June this year. The minutes of the meeting showed that the views of the people were taken into account and also recorded, what the individuals wished to talk about for example, new clients, entertainment, birthdays, holidays, likes and dislikes, the employment of new staff and any changes at the home.

There are presently ten people in residence and there was evidence that surveys are sent out annually to their relatives/ advocates/ friends. In addition to this the people living at the home have a review of their care every six months and everyone who has involvement in their care is invited to attend.

A newsletter is published which includes forth-coming events at various times throughout the year.

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
1	20	13	<p>Clear information must be available to staff about when 'as required' medication is to be given. Arrangements must be made for the safekeeping, recording and administration of such medication when the individuals concerned are out in the community. Care plans/risk assessments should be updated to reflect any changes.</p> <p>This is to make sure that people are receiving their medication exactly as prescribed.</p>	20/08/2009

### Recommendations

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

No	Refer to Standard	Good Practice Recommendations
1	6	In order to make sure that peoples assessed needs are met, the individual care plan should include all the areas where it has been identified that people need support.

## 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
2	6	So that people's best interests are protected, any limitations on facilities, or restrictions on choice and freedom to prevent harm, should be agreed and recorded as part of the care plan.
3	19	In order to ensure that individual's health care needs are being met, guidance and instructions from healthcare professionals should be followed as agreed, and clear records should be kept in respect of this.
4	30	Fifty percent of care staff should have an NVQ level 2 in care or equivalent, as qualified staff have a better understanding of peoples needs.
5	37	The manager should have an NVQ level 4 both in management and care to ensure that he has the necessary skills and knowledge to manage the home.
6	42	Further guidance and advice should be sought from the fire prevention officer to explore if there is any specialist equipment that would be suitable for people with hearing difficulties to alert them to the fire alarm being activated.

## Helpline:

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

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