

Key inspection report

Care homes for adults (18-65 years)

Name:	The Heathers
Address:	1 St Pauls Road Manningham Bradford West Yorkshire BD8 7LU

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

Lead inspector:	Date:
Stephen Marsh	0 3 0 6 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 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

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Internet address	www.cqc.org.uk

Information about the care home

Name of care home:	The Heathers
Address:	1 St Pauls Road Manningham Bradford West Yorkshire BD8 7LU
Telephone number:	01274541040
Fax number:	P/F01274541040
Email address:	
Provider web address:	

Name of registered provider(s):	Yorkshire Regency Health Care Ltd
Name of registered manager (if applicable)	
Type of registration:	care home
Number of places registered:	29

Conditions of registration:								
Category(ies) :	Number of places (if applicable):							
	Under 65				Over 65			
past or present alcohol dependence	29					0		
Additional conditions:								
The maximum number of service users who can be accommodated is: 29								
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 category: Past or present alcohol dependence - Code A								
Date of last inspection	1	0	0	3	2	0	1	0
Brief description of the care home								
The Heathers Residential Care Home is privately owned by Yorkshire Regency Health Care Limited, which also owns other care homes in the area.								
The home is a detached adapted property located close to Bradford City centre and within walking distances of Lister Park, local shops and other amenities. It is on a main bus route and there is a car park to the front of the property.								

Brief description of the care home

Bedrooms accommodation is provided on the ground, first and second floors of the building. A passenger lift provides access to all floors to assist people with mobility problems.

In 2008 the home changed the category of people it is registered to care for and now only provides care and support to people who have past or present alcohol dependency.

The fees for the service currently range from 441:00 pounds and 650:00 pounds per week depending on need.

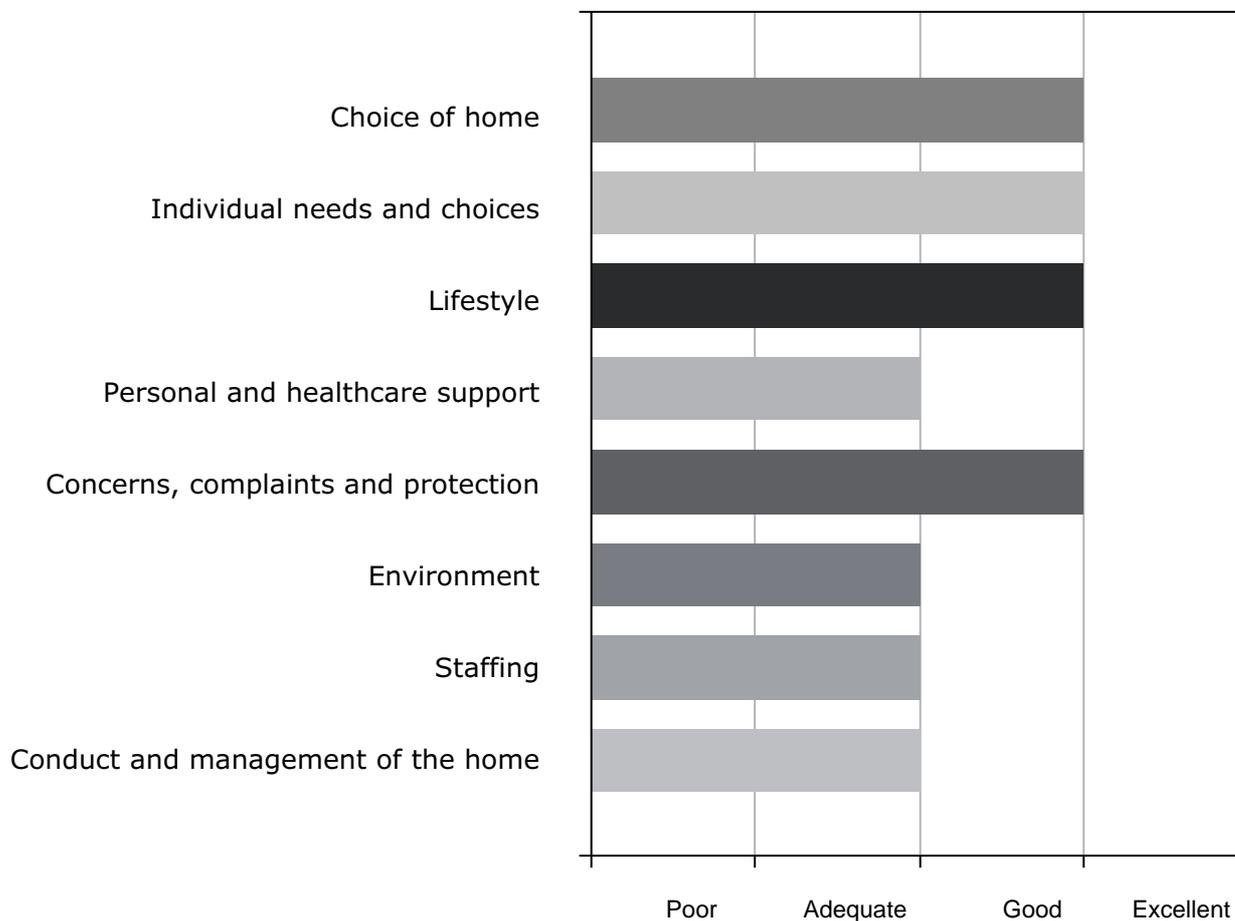
Summary

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:



How we did our inspection:

The last key inspection of this service was carried out on 8 December 2009. The overall quality rating for the service at that time was poor and we made three requirements relating to pre-admission assessments, care plans and the need to implement effective quality assurance monitoring systems. One requirement was outstanding from a previous inspection.

On the 10 March 2010 we carried out a random inspection visit and found that the home had taken action to address all three requirements and therefore they were carried forward as recommendations, which are good practice guidelines.

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 enforcement action will be taken

The purpose of this inspection was to assess what further progress the home had made and the impact of any changes made on the quality of life experienced by people using the service. On this occasion we did not ask the home to complete an Annual Quality Assurance Assessment form and we did not send surveys questionnaires to people living at the home, their relatives or other health care professionals.

The visit was unannounced and was carried out by one inspector between the hours of 09:30 and 17:00. During the visit we talked to people using the service, visitors, staff and management. We also spent time observing care practices.

At the end of the visit we gave feedback to the registered providers and manager about our findings.

What the care home does well:

The providers and manager continue to have a positive approach to the inspection process and show a willingness to work with us to maintain and improve standards.

The manager and staff are approachable, have a caring attitude and try hard to create a homely atmosphere.

The home has established a close working relationship with other health care professionals, which makes sure people's health care needs are met in line with their care plan.

People told us that the food is good, they said there is always a choice and alternatives are available if they don't like what is on the menu. The home has been awarded a 4* (5 is the highest) by Environmental Health for its standard of food safety and hygiene.

What has improved since the last inspection?

The manager and senior staff team are now more proactive and identify shortfalls in the service quickly instead of them being brought to their attention through the inspection process.

There are now clearer lines of communication and accountability both within the home and external management, which means that the home is being managed more effectively and in the best interest of people living there.

Staff morale has improved significantly since the last inspection and staff now have a more positive attitude, are better motivated and want to move the service forward.

Improvements have been made to the admission process and people will now not be admitted to the home unless the manager is sure that staff are able to meet their needs.

The service user guide has been revised and it now clearly sets out the homes aims and objectives and the facilities available. The service user guide is available in different formats include large print and on CD.

Improvements have been made in the care planning system and care plans are now person centred and provide staff with clear guidance on how to meet people's needs.

The home is now more pro-active in providing people with a range of social and leisure activities and encourages people to participate in activities organised both within the home and wider community.

What they could do better:

The storage and recording of controlled drugs must be improved so that people can be confident that their medication is given as prescribed.

A thorough staff recruitment and selection procedure should be carried out at all times, so that people can be confident that their care and support is being provided by staff

suitable to work in the caring profession.

All staff should attend drug and alcohol awareness training and challenging behaviour training so that the home can clearly evidence that they can meet people's needs.

The home needs a period of stability and clear leadership so that it can move forward and improve outcomes for people.

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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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.

Improvements have been made to the admission procedure and people will now not be admitted to the home unless the manager is sure that staff are able to meet their needs.

Evidence:

Since the last key inspection the providers have produced a new service user guide which clearly sets out the homes aims and objectives and the services and facilities available. Information provided by the manager shows that the service is now available in different formats including large print and on CD.

The home has also introduced a new pre-admission assessment form and people are now not admitted to the home unless a full needs assessment as been carried out and the manager is confident that staff can meet their needs. We looked at the pre-admission assessment for the last admission to the home and found that it provided staff with good information about the person's health, personal and social care needs. It also clearly indicated who had been involved in the assessment process, which is good practice.

Evidence:

The manager confirmed that pre-admission assessment visits are always made to see people either in their own homes or temporary place of residence. Before admission people are encouraged to visit the home to meet the people who already live there and the staff. This means that staff can get to know the person's needs and the individual can see at first hand the accommodation and facilities provided. People are also able to move into the home for a trial period if they are still undecided about living in a residential setting.

The manager confirmed that people offered a place at the home are supported through the admission process and care is taken to make sure they settle into their new environment.

The home will take emergency admissions, but have recently reviewed the procedure for admitting people under these circumstances to safeguarding everyone concerned. Full details of the admission procedure can be found in the service user guide.

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.

Improvements have been made in the care planning system and care plans are now person centred and fully reflect people's needs.

Evidence:

A new care planning system has recently been introduced at the home which covers all aspects of people's health, personal and social care needs. The care and support plans we looked at showed that improvements have been made since the last key inspection visit and they now provided staff with clear guidance on how to meet people's needs. The manager confirmed that staff are now using the care plans as working documents and there was clear evidence to show that wherever possible people are involved in the care planning process. This means that they are consulted about how they want their care and support to be provided.

Risk assessments are in place where areas of potential risk relating to people's general health or well-being have been identified including falls, tissue viability, nutrition and

Evidence:

moving and handling. Risk assessments and behaviour charts are also completed for individuals if they exhibit anti-social behaviour, which might pose a risk to them self or others. For people continuing to drink alcohol while living at the home a written agreement about the amount they are allowed to drink on a daily basis is put in place. People are made aware of the consequences of breaking the agreement, which may include reviewing the existing agreement or even terminating their contract with the home if it is felt that staff can no longer meet their needs.

At the last key inspection we had concerns that some people were being allowed to drink excessively at the home which caused upset for other people living there and problems for the staff team. However, the manager has now make it very clear to people that this type of behaviour will no longer be tolerated in the home and people have to take responsibility for their own actions.

Staff spoken with said that there had been significant improvements in some people's behaviour since being made aware of the consequences of their actions but acknowledged that that working at The Heathers would always be a challenging. Our observations during the visit showed that the interaction between people and staff was relaxed and friendly.

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.

The home is now more pro-active in providing people with a range of social and leisure activities.

Evidence:

At the last key inspection we were concerned that not enough was being done to support people to make the most of their abilities and follow their own personal interests. It was therefore pleasing to see that more emphasis has now been placed on providing people with the opportunity to participate in a wider range of social and leisure activities both within the home and wider community.

The activities organiser makes a record of what people have taken part in and what they have declined and whether or not they have enjoyed any particular activity. This record shows that people are being offered a range of activities that reflects their personal interest and abilities.

Evidence:

One person has recently taken an interest in growing flowers and vegetable in an area at the rear of the home and he confirmed that the manager and staff had encouraged him to do so and had provided him with plants, seeds and two small greenhouses. Other people living at the home were taking interest in what he was doing and the garden had become a real talking point and focus of attention.

Another person confirmed that he was currently on a computer course at a local college and had a personal computer in his room. Feedback from other people spoken with also confirmed that the level of social and leisure activities has improved since the last key inspection and the manager is always looking at ways of providing them with the opportunity to improve their personal and daily living skills. Comments included "there is now a lot more going on in the home, which is great for everyone" and "staff now seem to have more time to spend with you than they did before and the atmosphere appears more relaxed and friendly."

A number of people use the shops and other local facilities and one person had recently enjoyed a trip out to Liverpool and was planning further outings during the summer months. The manager confirmed that a group trip to Scarborough is also planned for later in the year and some people are now going to the swimming pool on a weekly basis.

The home has held two theme days in April and May 2010 whereby staff came to work in fifties and sixties dress, which everyone spoken with enjoyed and a world cup party is planned.

Staff support people to maintain and meet their cultural and religious needs by encouraging them to attend religious services and by following their beliefs both within the home and the wider community. The manager also confirmed that people are encouraged to keep a close relationship with family and friends, and visitors are welcome at the home at any time.

Mealtimes at the home are unhurried and people said they like the meals and said that they were always offered an alternative if they did not like what was on the menu. Comments included "the food is very good and there is plenty of choice" and "I have always enjoyed the food at The Heathers and if anything meals have got better over recent weeks" The meals are planned to include the wishes of the people who live at the home and menus are now displayed on the table. Tea, coffee and soft drinks are available throughout the day.

Evidence:

During the course of the visit we had the opportunity to have a brief conversation with the cook and she was very knowledgeable about people's different dietary needs and confirmed that special diets could be catered for on request.

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

People's health care needs are met in a way that maintains their dignity and independence. However, senior staff are not following good practice guidelines when storing and recording controlled drugs, which is unsafe practice.

Evidence:

The manager confirmed that the daily routines of the home are flexible and based around the needs of the people living at the home. People spoken with said that they could generally plan their own day and restrictions were not placed on them unless they formed part of their agreed care and support plan.

All people living at the home are registered with a general practitioner and are supported in having access to the full range of NHS services. People spoken with said they usually attended the surgery if they needed to see a doctor but were aware that staff would arrange an home visit if necessary. The community matron also holds a clinic at the home every Wednesday to see people with minor ailments. The input of other health care professionals is clearly recorded in the documentation available, which shows that staff are seeking advice if they have any concerns about an individual's health care.

Evidence:

Feedback from one health care professional visiting the home at the time of the visit confirms that the home is pro-active in seeking advice and staff were providing care and support to one person who was reluctant to allow other health care professionals deal with their health care needs.

Through discussion with staff it was clear that they continue to have a good knowledge and understanding of people's needs and encouraged them to take control of their own health care if possible.

On reviewing the medication system we found that overall medicines stored and administered from the drug trolleys are safely managed. However, we had concerned about a prescribed medicine stored in the controlled drug cabinet which had been dispensed by staff from its original container into a number of envelopes. This is unsafe practice and following a discussion with the manager it was agreed that medication would in future only be administered from the original container. We also found that the stock control figure for another prescribed medicine stored in the controlled drug cabinet was one more than the actual number of tablets in stock. We have therefore asked the manager to investigate this matter and inform us of the outcome.

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.

There are now suitable systems in place to make sure that complaints are taken seriously and people are protected from abuse.

Evidence:

There is a clear complaints procedure in place and feedback from people living at the home shows that they would have no problems in approaching the manager and staff if they had any concerns. We looked at the complaints register and found that all complaints received had been dealt with appropriately and letter sent out to the complainant informing them of any action taken following the investigation of their complaint. All complaints had been dealt with within the agreed timescales.

Adult protection (safeguarding) procedures are in place and information provided by the manager shows that all staff are to attend safeguarding training in June 2010 to make sure that they are aware of their roles and responsibilities in this area of their work.

At the last key inspection we had concerns that the policy on the involvement of the Police following an alleged assault was not clear as it appeared that it was left to the victim to decide if they should be contacted or not. This matter was discussed with the providers at the time and they have now changed the policy and the Police are now routinely contacted following an alleged assault or any act of criminal activity. The victim then has the option of not pressing charges if they wish to do so.

Evidence:

Policies and procedures are in place to protect people from financial abuse, which precludes staff from being involved in the making of, or benefiting from people's wills.

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

There is an ongoing programme of refurbishment and renewal in place to make sure the standard of accommodation at the home is maintained and improved.

Evidence:

Some areas of the home are still in need of upgrading and there is an ongoing programme of refurbishment and renewal in place.

All the communal areas including lounges, dining room and conservatory are situated on the ground of the home. One of the lounge areas is currently used as a games room with a pool table and table football available for people to use.

Bedrooms are located on three floors of the home and consist of fifteen single and seven double rooms, the majority have some en-suite facilities. On admission people are encouraged to bring personal possessions into the home to personalise their room and it was evident during the tour of the building that many people had done so. The standard of decor and furnishings in the bedrooms we looked at varied but generally it was found to be satisfactory although some rooms would benefit from refurbishing. People spoken with said that they were happy with the accommodation and pleased they had been able to furnish their rooms with personal possessions. We did however find evidence that some people are smoking in their rooms even though they are

Evidence:

made aware on admission that they must only smoke in the designated smoking areas. The home must continue to monitor this situation and make sure that people's health and safety is not compromised.

The providers are in the process of creating two independent living flats on the top floor of the home, which will be used to assess and improve people's daily living skills. An automatic washing machine has also been installed in a room on the first floor so that people can wash their own personal clothing if they wish to do so.

Bathroom and toilet facilities are located throughout the home and following consultation with people living at the home a new shower room has recently been installed on the first floor of the building.

The home was clean, tidy and free from offensive odours on the day of the visit.

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

More emphasis has recently been placed on staff training. However, not all staff have yet attended drug and alcohol awareness training or challenging behaviour training, which they require so that the home can clearly evidence that they are able to meet people's needs.

Evidence:

The home has a thorough staff recruitment and selection procedure, which includes obtaining at least two written references and a Criminal Record Bureau (CRB) before new staff start work unsupervised. This makes sure only people suitable to work in the caring profession are employed. However, we found that in two instances the recruitment process had not been as thorough as it should have been. For example the application forms were poorly completed and there were no interview notes or reference request letters on file. This matter was discussed with the manager and providers and they confirmed that the home was in the process of reviewing the procedure and would make sure that this matter was addressed.

The manager confirmed that all new staff receive induction training using the Skills for Care Common Induction Standards. These are nationally agreed induction standards designed to help new staff get the skills and knowledge they need to care for people.

Evidence:

Following induction training there is an expectation that staff will study for a National Vocational Qualification (NVQ) at level two or above depending on the post they hold. Information provided by the manager shows that currently six staff have achieved a NVQ at level 3 and three staff have achieved a NVQ at level 2.

The home has recently introduced a staff training matrix, which has helped to highlight both the training needs of individual members of staff and the staff team as a whole. The training matrix will assist in developing a staff training programme for the coming year. Planned training includes safeguarding vulnerable adults, continence care, Parkinson's disease and person centred care planning.

The manager confirmed that the some staff had still not completed drug and alcohol awareness training or challenging behaviour training as she is finding it difficult to find a training provider. However, she is aware that this training should be mandatory for all staff providing such specialised care and support, so that the home can clearly evidence that it can meet people's needs.

Staff spoken with said that they were very happy with the level and standard of training provided and were clear about their roles and responsibilities. Records show that since her appointment all staff have had formal one-to-one supervision with the manager or one of the senior staff team. Supervision meetings are important as they support staff to plan their personal and professional development and give them the opportunity to discuss any areas of concern.

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

Improvements have been made and with the appointment of a new manager the home is in a position to move forward and continue to improve quality outcomes for people using the service.

Evidence:

Since the last inspection Mrs Denise Smith has been appointed to the post of manager and is in the process of applying for registration. Mrs Smith was until recently the area manager for Yorkshire Regency Health Care Ltd and has many years experience in the caring profession.

The home has not had a registered manager for about two years and with the change in registration in 2008 this has been an unsettling time for people living and working at the home. It is hoped that the new manager will give the home some stability and provide clear leadership which will enable it to move forward and improve outcomes for people.

Staff confirmed that the manager has an open and approachable management style

Evidence:

and has moved the service forward in the short time she has been in post. Comments included "staff morale has improved since the new manager took up post and we now all work as a team" and "we are now kept better informed of any changes in policies and procedures and are fully involved in all aspects of people's care and support."

The providers have employed an independent consultant to help them make improvements to the service. The consultant is providing support to the manager, assisting to update policies and procedures. and making regular visits to check the quality of the service.

The home has started to introduce quality assurance monitoring systems and survey questionnaires were recently sent out to people who live at the home and their relatives as part of this process. The questionnaires give people the opportunity to express their views and opinions of the service and provide valuable information on what improvements they would like to see. The results of the survey have been evaluated and a summery report is on display on the notice board in the entrance hall.

The manager has also started to have regular meetings with people living at the home and staff so that shortfalls in the service are identified quickly and people do not lose confidence in the management team.

Information provided in the self-assessment form completed by the home for the key inspection in December 2009 shows that policies and procedures are in place to make sure staff follow safe working practices and all equipment is serviced in line with manufacturers guidelines. People can therefore be sure that their health and safety is not being compromised.

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
1	20	13	The storage and recording of controlled medication must be improved. So that people can be confident that their medication is being given as prescribed.	09/07/2010

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
1	34	A thorough staff recruitment and selection procedure should be carried out at all times, so that people living at the home can be confident that their care and support is being provided by staff suitable to work in the caring profession.
2	35	All staff providing care and support should attend drug and alcohol awareness training and challenging behaviour training, so that the home can clearly evidence that it can meet people's needs.

Helpline:

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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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