



Making Social Care
Better for People

Inspecting for better lives

Key inspection report

Care homes for adults (18-65 years)

Name:	Buxton Street (131-133)
Address:	131-133 Buxton Street Whitechapel London E1 5AR

The quality rating for this care home is:

two star good service

A quality rating is our assessment of how well a care home, agency or scheme is meeting the needs of the people who use it. We give a quality rating following a full assessment of the service. We call this a 'key' inspection.

Lead inspector:	Date:
Robert Cole	1 6 0 6 2 0 0 9

This is a report of an inspection where we looked at how well this care home is meeting the needs of people who use it. 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.

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

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- Put the people who use social care first
- Improve services and stamp out bad practice
- Be an expert voice on social care
- Practise what we preach in our own organisation

Our duty to regulate social care services is set out in the Care Standards Act 2000.

Reader Information

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Internet address	www.cqc.org.uk

Information about the care home

Name of care home:	Buxton Street (131-133)
Address:	131-133 Buxton Street Whitechapel London E1 5AR
Telephone number:	02072472004
Fax number:	02072472004
Email address:	rtapader@outward.org.uk
Provider web address:	

Name of registered provider(s):	Outward
Type of registration:	care home
Number of places registered:	5

Conditions of registration:		
Category(ies) :	Number of places (if applicable):	
	Under 65	Over 65
learning disability	5	0
Additional conditions:		
No persons with wheelchair dependency		
Date of last inspection		

Brief description of the care home
<p>131-133 Buxton Street is a 24 hour residential service for 5 people who have learning disabilities and complex needs. It is situated in Tower Hamlets in a central location close to public transport links and with local shops and a market. The home is located in a pair of terraced cottages which have been converted to provide two independent flats - 131 and 133. The flats have separate front doors but there is an intercommunicating door inside. The upper flat is occupied by three more independent service users. The lower flat is occupied by one service users who has rather higher needs. The homes share a small but pleasant and private garden. They are run separately from one office which is located on the ground floor in number 133. The staff team consists of a manager, and several care staff. The cost of a placement at the service is #1320.01 per week.</p>

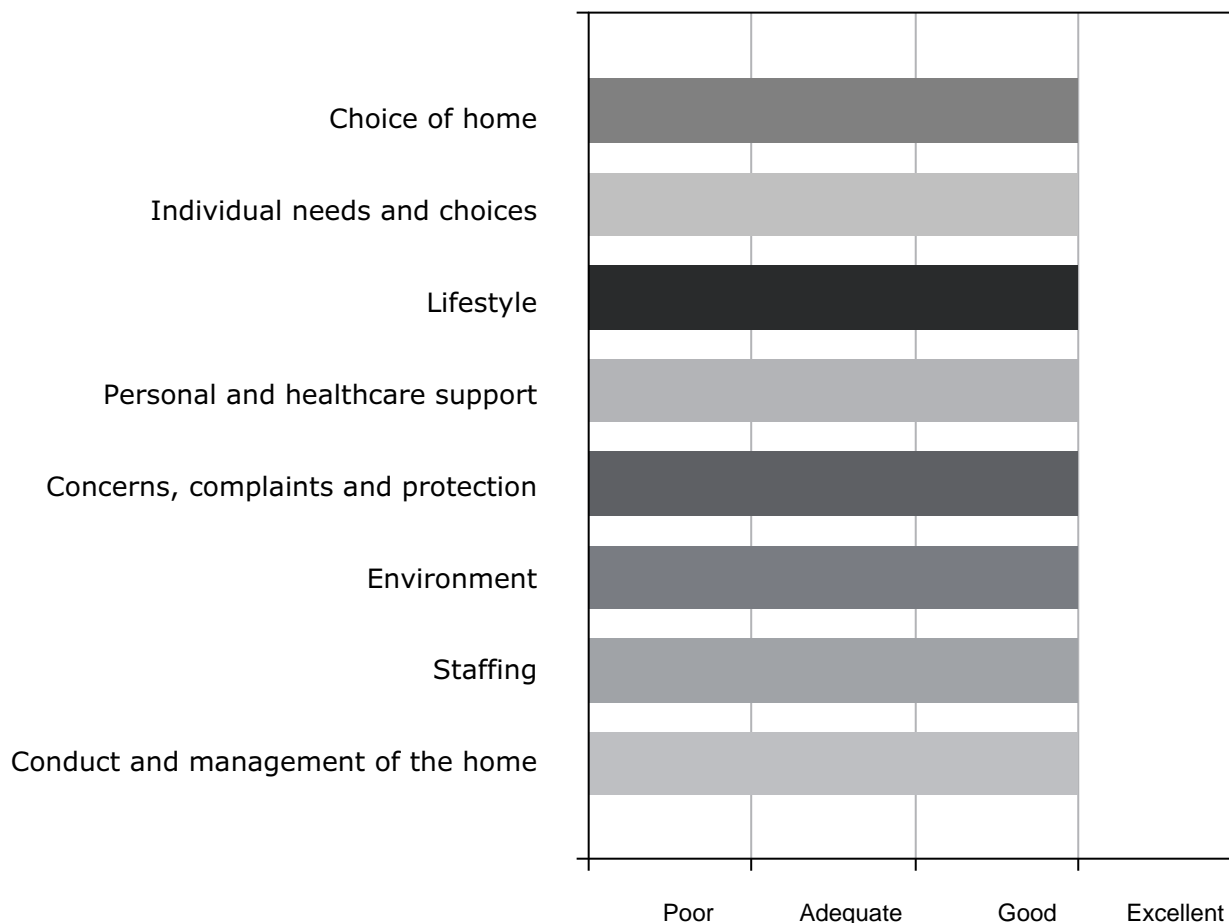
Summary

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 inspection took place on the 16/06/09 and was unannounced. The inspector had the opportunity of speaking with service users, staff from the home, and the homes manager was present for much of the inspection.

In addition to these discussions the inspector was able to observe staff interactions with service user. The inspection also included a tour of the premises, and an examination of records and other documents.

Prior to the date of inspection, the home completed an Annual Quality Assurance Assessment (AQAA) at the request of the CQC. Information provided within this document has contributed to the overall inspection process, and to judgements made

within this report.

What the care home does well:

The home presents as friendly and homely, and service users spoken to expressed satisfaction with the care and support they receive. Service users made positive comments about the home, such as "I like living here, the staff are alright." and "I chose my own paint and carpet in my bedroom."

Care plans in the home were seen to be of a good standard, as was record keeping generally. There was evidence that service users have control over their daily lives, and that they are provided with the opportunity of being involved in the day to day running of the home.

What has improved since the last inspection?

There have been improvements at the home since the previous inspection, and the overall number of requirements set has fallen. Pre admission assessments are now carried out on prospective service users, and the Service User Guide now contains required information. All staff with responsibility for administering medications have now received training in this area, and effective systems have been put in place for the storage and management of COSHH products.

What they could do better:

Despite these improvements, there are still some areas that must be addressed, and a total of four requirements have been made in this report. In particular, the home must ensure that staff undertake all necessary statutory health and safety training. There are some minor maintenance issues that must be addressed. Regulation 26 visits need to be undertaken monthly, and a report produced from these visits.

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 set out 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.

It is the judgement of the inspector that service users are provided with sufficient information about the home to enable them to make an informed choice as to move in or not. This information is provided through written documentation and the opportunity of visiting the home.

Evidence:

The home has both a Statement of Purpose and a Service User Guide in place. Both documents were examined, and found to contain some inaccuracies, for example details of the regulatory authority and of the gender of service users. These inaccuracies were brought to the attention of the homes manager, who was able to amend the documents during the course of the inspection, so that they were in line with National Minimum Standards.

The Guide has been produced in pictorial form to help make it more accessible to service users, thus helping to meet needs around equality and diversity issues. The Guide contained details of the homes physical environment and of its complaints

Evidence:

procedure. All service users are provided with their own copy.

One service user has moved in to the home since the previous inspection. It was found that they moved in in line with the homes policy and procedure on admissions, which states that service users would be given the opportunity of visiting the home before making a decision as to move in or not. There was a detailed transition plan in place, which indicated that the service user had been able to visit the home on several occasions. The service user had also been involved in the transition planning process, for example they were able to choose new furniture and decor for their bedroom. An assessment of their need had been carried out before they moved in to the home.

All service users are provided with a written contract/statement of terms and conditions. These are signed by the service user and a representative of the home. Contracts include details of fees payable, and the rights and responsibilities of both parties.

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.

It is the inspectors judgement that service users have control over their daily lives, and that they have the opportunity of been involved in the day to day running of the home.

Evidence:

Comprehensive care plans are in place for all service users. These are drawn up with the involvement of service users, who sign their own care plans to indicate their involvement with and agreement to the plan. Plans are subject to regular review.

The plans consist of a pen picture of the service user, a checklist which indicates what are service users require support with, and a detailed plan of care for each area identified. These include needs around personal care, social and leisure needs, cultural and religious needs and needs around mobility. Plans are written in the first person, for example one plan states "I need to be supported with issues around budgeting and I need to be supported by staff to access my money from the bank."

Evidence:

Risk assessments are in place for all service users, and as with care plans these are of a satisfactory standard. Assessments identify any particular risk, and include strategies to manage and reduce those risks. Assessments seen by the inspector covered challenging behaviour, accessing the community and falls. There was evidence that service users are able to take reasonable risks, for example one assessment indicated that there was a risk presented to the service user whilst cooking, but steps have been put in place to support them with this activity in a relatively safe manner.

There was evidence that service users have a large measure of control over their daily lives, for example when to get up and go to bed, what to eat, what to wear etc. When the inspector arrived at the home on the day of inspection, one service user was waiting to go to a day centre, they informed the inspector that this was what they wanted to do. Another service user was still in bed, and was able to get up at a time of their choosing.

The home has systems in place to help involve service users in the day to day running of the home. One service user has been working with a speech and language therapist, developing an objects of reference programme to aid their communication skills, and to enable them to be better able to make choices.

Regular service user meetings are held once a fortnight. Service users are able to contribute to the agenda, and minutes are maintained of these meetings. The meetings include a menu planning session, where visual aids are used to help support service users to plan the menu for the coming weeks, which helps to meet needs around equality and diversity issues. Meetings also discuss activities and issues raised in the homes listening book. The listening book provides service users the opportunity to record any issues of concern or interest to them which they would like some further discussions or action on. Recent examples of entries in the listening book include a service user requesting that her picture gets a frame, and a service user wanting a Christmas tree for their bedroom.

It was positively noted that service users are involved in choosing any new decor or furniture for the home. For example one service user recently bought a new bed, and informed the inspector that they were able to choose this themselves.

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.

It is the judgement of the inspector that service users are supported to live valued and fulfilling lives. Service users have access to a variety of activities, and food was of a good standard.

Evidence:

No service users are currently involved in any employment or educational opportunities. Three of the four current service users regularly attend day services. These provide opportunities for developing and maintaining friendships, along with various activities such as day trips, literacy skills and arts and craft sessions. One service user teaches Makaton at a day service they attend. Service users also have access to other community based facilities such as shops, banks, parks, hairdressers and service users use public transport.

Evidence:

The home arranges various community based activities, service users go swimming, to restaurants and pubs and to the cinema. Service users attend a disco on Fridays, and Outward, the organisation that runs the home, holds a monthly social event. The home arranges occasional day trips, for example to Southend and Westfield shopping centre. All service users are offered a weeks holiday away from the home as part of their basic contract price. At the time of inspection, one service user was on holiday in Portugal, another informed the inspector that they were going to Italy soon, which they were looking forward to. There was evidence that service users are involved in choosing and planing their holidays.

In house service users have access to a variety of activities, such as television, DVDs, music, looking good sessions and one service user plays the guitar. No service users currently visit a place of worship, although a recently deceased service user did visit church regularly. All service users were able to attend the funeral for this person. One service user goes to a Caribbean music night once a month, and also attends a Caribbean drop-in centre.

As mentioned, service users are involved in planning menus. Menus indicated that service users have a varied, balanced and nutritious diet. The home has two kitchens, both of which were clean and tidy, but in need of some maintenance work (see section on the environment). Records are maintained of fridge and freezer temperatures. The home makes traditional British and Caribbean food, thus helping to meet needs around equality and diversity issues. On the day of inspection the one service user at home for their lunch was seen to be encouraged to participate in its preparation.

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.

It is the judgement of the inspector that the home is generally meeting the health and personal care needs of service users. Service users are supported to manage their own personal care as much as possible, and systems are in place to help ensure the safe administration of medications.

Evidence:

Care plans indicate that service users are supported to manage their own personal care as much as possible. Service users are able to choose their own clothes to wear, and all were appropriately dressed on the day of inspection. Each service user has their own designated keyworker.

All service users are registered with a GP. Records are maintained of medical appointments, including details of any follow up action necessary. These indicate that service users have access to various health care professionals, such as psychiatrists, chiropodists and opticians. However, records also indicated that none of the four current service users have seen a dentist in the past six months, and for one service user there was no evidence that they have seen a dentist in over two years. The

Evidence:

manager was able to demonstrate that appointments have been made in the near future for two service users. It is required that all service users have routine access to dental care as appropriate.

The home has taken steps to try to promote healthy lifestyles for service users, for instance through the provision of healthy food, and encouraging service users to take regular exercise. Service users weight is checked regularly.

The home has a comprehensive medication policy in place. Medications were stored in various locked and suitable medication cabinets situated around the home. No service users currently self medicate or are on any controlled drugs. The manager informed the inspector that before staff are able to administer medications, they must first undertake training, which includes an assessment of their competence.

Records are maintained of medications entering the home and of those returned to the pharmacist. Medication Administration Records are maintained, those examined by the inspector were accurate and up to date.

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.

It is the inspectors judgement that the home has taken reasonable steps to help safeguard service users.

Evidence:

The home has a complaints procedure in place. This has been produced in pictorial form, and the manager informed the inspector that there are plans to produce a DVD version of the complaints procedure to help make it more accessible to service users. All service users are given a copy of the procedure within the Service User Guide. The procedure includes timescales for responding to any complaints. The home has a complaints log, although the manager informed the inspector that no complaints have been received since the previous inspection.

The home has a copy of Tower Hamlets adult protection procedure, and also its own safeguarding adults policy. Staff spoken to demonstrated a good understanding of their roles and responsibilities with regard to adult protection.

All services users have their own bank accounts, and they have to be present to draw any monies out. Records and receipts are maintained of financial transactions involving service users money, those checked by the inspector were found to be satisfactory. Monies held by the home on behalf of service users are kept in a locked safe.

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.

It is the view of the inspector that the home is suitable to meet its stated purpose with regard to the physical environment. Service users have access to adequate communal and private space, and the home was generally well maintained.

Evidence:

The home is located in the Whitechappel area of the London Borough of Tower Hamlets, close to shops, transport networks and other local amenities. The home is in keeping with other homes in the vicinity, and externally was well maintained.

The home consists of two terraced houses converted in to one, over two floors. Communal space includes a kitchen on both floors, and a sitting room/dining room on each floor, along with a rear garden. Although communal areas were generally well maintained, there were some minor maintenance issues that need to be addressed, i.e. scuffed paintwork around the door frames, broken worktop surfaces in the upstairs kitchen, missing skirting in the downstairs kitchen underneath cupboards, and the upstairs carpet was badly stained and threadbare. Furniture in communal areas was generally well maintained.

All service users have their own bedrooms, which have a hand basin fitted. Service

Evidence:

users have been able to personalise their rooms to their own tastes, for example with televisions and family photographs. Service users have been able to choose the decor and the furniture for their bedrooms. Bedrooms contained adequate furniture, and bedding, curtains and carpets were well maintained and homely. Bedrooms had adequate natural light and ventilation. All bedrooms were centrally heated, and radiators were boxed in for safety reasons.

The home has adequate numbers of toilets and bathrooms situated around the home. These were found to be clean, tidy and free from offensive odours. Bathrooms had working locks fitted which included an emergency override device. Bathrooms had grabrails fitted to help make them more accessible to service users.

The home has taken reasonable steps to help prevent the spread of infection. Laundry facilities are appropriate in scale to the size of the home, and hand washing facilities were situated around the home. Protective clothing was available to staff, and COSHH products were stored securely.

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.

It is the judgement of the inspector that the home is staffed in sufficient numbers to meet the needs of service users, and that staff have built up good relations with service users. However, it is required that staff have access to statutory health and safety training as appropriate.

Evidence:

The home provides 24-hour staff support, including waking night staff and an emergency on-call procedure. There was a staffing rota on display on the day of inspection.

Through observation and discussion there was evidence that staff have a good understanding of the collective and individual needs of service users, staff were seen to interact with service users in a friendly and respectful manner. Service users spoken to expressed satisfaction with the staff, one commented "I like my keyworker." All staff are given a copy of their job description, and regular staff meetings are held. Examples of positive staff interaction with service users were seen, for example supporting a service user to make their own lunch.

The AQAA supplied by the home indicates that they have all necessary employment

Evidence:

related policies and procedures in place in line with National Minimum Standards, including on recruitment and selection and equal opportunities. Service users are given the opportunity of being involved in the staff recruitment and selection process. Outward, the organisation that runs the home, holds staff employment records centrally at their head offices. This is with the agreement of the CQC.

All but two of the care staff have achieved an NVQ Level 2 in Care or equivalent qualification. The manager informed the inspector that it is planned that in time all staff will have such a qualification.

During the course of the inspection, the inspector examined staff training records. There was a matrix produced, indicating what training staff have had. This matrix gave several examples of staff having had training, when their was no certificate in place to evidence this. Further, the matrix also highlighted that a lot of staff were not up to date with statutory health and safety related training, for example there was no indication that any of the staff working at the home had received training on fire safety. Subsequent to the inspection, the homes manager provided a more detailed picture of what health and safety training staff have had. The inspector was pleased to note that fire safety training was arranged for all but one staff (who was off sick) the week after the date of inspection, and that plans are in place for all staff to receive first aid training. Whilst it is positively noted that the home has taken steps to address this issue, there are still several gaps in staff health and safety training, for example only two of the eight care staff have received training on infection control. Therefore, a requirement has been made in this report that the home ensures that all staff undertake all statutory health and safety training as appropriate. The home has provided other training for staff, for instance on epilepsy and bereavement.

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.

It is the view of the inspector that this is a generally well run home, with appropriate health and safety systems in place.

Evidence:

The home has a registered manager in place, who has an NVQ Level 4 in Care and the Registered Managers Award. They have fourteen years experience of working in social care, including eight years in a managerial capacity. The manager is also the registered manager of another residential care home run by Outward, which is in close proximity to Buxton Street, and they spend their time working between the two projects. They are supported by a deputy manager in the running of the home in Buxton Street.

Service user and staff meetings, and care plan reviews all contribute to the quality assurance procedures within the home. Copies of previous inspection reports are available to view. The visitors book indicated that Regulation 26 visits had taken place on a monthly basis. However, reports of these visits are generally not produced. There

Evidence:

was one report in the home from a visit on the 26/05/09, and the most recent report available prior to that was from a visit on the 25/11/08. If Regulation 26 visits are to be meaningful, it is essential that staff, service users and management in the home are able to view the findings of the visit, in order to take action where appropriate. It is required that monthly unannounced Regulation 26 visits take place, and that a report of these visits is made, and is available to view within the home.

The AQAA supplied by the home indicates that they have all necessary policies and procedures in line with National Minimum Standards. Those checked by the inspector, including admissions and adult protection, were of a satisfactory standard. Record keeping in the home was generally of a good standard, and confidential records are stored securely. Service users and staff have access to their records upon request.

Fire extinguishers were situated around the home, these were last serviced in July 2008. Fire alarms are tested weekly, and were last serviced on the 23/12/08. The home had in date safety certificates for gas safety, PAT testing and electrical appliances. Hot water and fridge/freezer temperatures are checked. COSHH products are stored securely. The home had in date employers liability insurance cover.

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
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