



Making Social Care
Better for People

Inspecting for better lives

Key inspection report

Care homes for adults (18-65 years)

| | |
|-----------------|--|
| Name: | 267 Walmersley Road |
| Address: | 267 Walmersley Road Bury BL9 6NX |

The quality rating for this care home is:

one star adequate 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: |
| Lucy Burgess | 1 4 0 7 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

The Commission for Social Care Inspection aims to:

- 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

| | |
|---------------------|--|
| Document Purpose | Inspection report |
| Author | CSCI |
| Audience | General public |
| Further copies from | 0870 240 7535 (telephone order line) |
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| Internet address | www.cqc.org.uk |

Information about the care home

| | |
|-----------------------|--|
| Name of care home: | 267 Walmersley Road |
| Address: | 267 Walmersley Road Bury BL9 6NX |
| Telephone number: | 01617612484 |
| Fax number: | 01617373907 |
| Email address: | |
| Provider web address: | |

| | |
|---------------------------------|--------------------|
| Name of registered provider(s): | Pendleton Care Ltd |
|---------------------------------|--------------------|

| | |
|------------------------------|-----------|
| Type of registration: | care home |
| Number of places registered: | 6 |

| | | |
|-----------------------------|-----------------------------------|---------|
| Conditions of registration: | | |
| Category(ies) : | Number of places (if applicable): | |
| | Under 65 | Over 65 |
| learning disability | 6 | 0 |

Additional conditions:

The home is registered for a maximum of 6 service users to include: up to 5 service users in the category of LD (Adults with learning disabilities) and 1 identified child with a learning disability.

The service should employ a suitably qualified and experienced manager who is registered with the Commission for Social Care Inspection.

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|-------------------------|---|---|---|---|---|---|---|---|
| Date of last inspection | 0 | 3 | 1 | 0 | 2 | 0 | 0 | 8 |
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Brief description of the care home

267 Walmersley Road provides a specialist residential facility for up to six young people who have Aspergers Syndrome and 'high functioning autism.'

The house is sited on a main road, has good public transport links and is accessible to community facilities.

The current range of fees vary depending on the individual assessed needs of people.

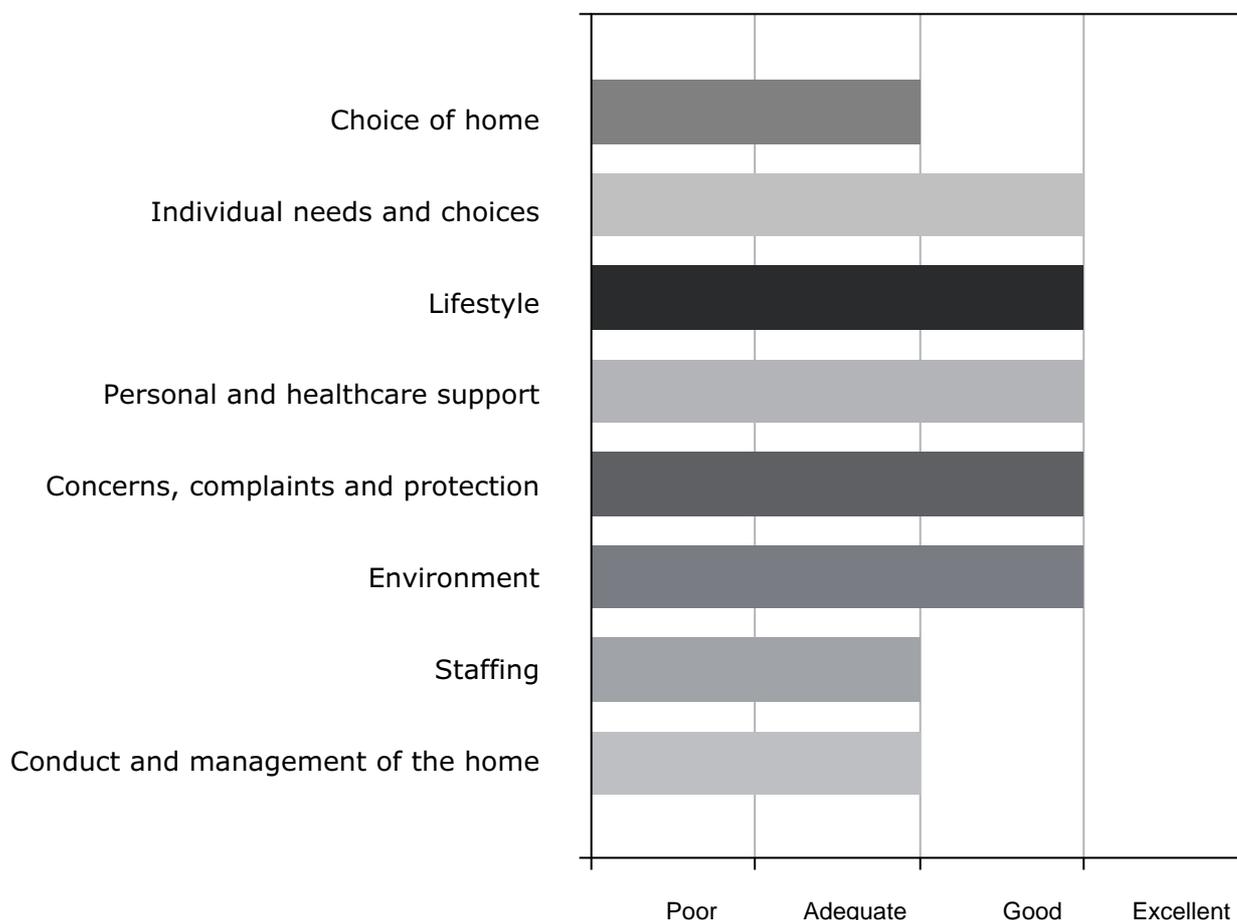
Summary

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:

This was a key inspection carried out by 2 inspectors, which included a site visit and took place over one day, for a period of 5 hours. The service did not know that we were going to visit.

During the inspection care and medication records were looked at as well as information about the staff and health and safety including how the home is kept safe. The inspectors also looked round the building.

As part of the inspection process the Provider's are asked to complete a self assessment survey information document (Annual Quality Assurance Assessment). This was sent to the home before the inspection and had been completed by the manager and returned to us prior to the site visit.

Other information was gathered from the feedback surveys sent out. We received 7 completed surveys, 2 from people living at the home, a relatives and 4 staff. We also spent time speaking with people and staff as well as observing practice. Comments have been added to the report.

Discussion and feedback was held with the area manager throughout the visit.

What the care home does well:

The home continues to provide a good standard of accommodation for people living at the home. People appeared relaxed and well cared for and were happy to chat with us during our visit.

Comments had been received from people at the home, a relative and staff. A relative said 'They have done a remarkable job in recognising the particular anxieties and behavioural difficulties associated with my relatives autism. They have worked on strategies to help him work through the difficulties. This has made him a more relaxed and happy person who has gained confidence and feels accepted'.

They also confirmed that they were kept informed, that contact was encouraged, that carers have the right skills and experience and that they knew who to speak with if they had any issues or concerns.

People living at the home commented, 'I would like more service users', 'I'm happy here', 'it's good' and 'there is nothing' that could be done better. Staff feedback was also very positive. They confirmed that communication systems were good, generally there were enough staff available and that they received enough support. They also said, 'we make sure the service users needs are met by doing activities and hobbies that they enjoy', 'the development enables the service users to progress well with their development needs', 'the service users needs are always met', 'I always feel good about coming to work', 'we help with smart goals to develop daily living skills' and 'they appear happy'.

What has improved since the last inspection?

Care files have been reorganised providing current and relevant information so that they can be easily read.

Rotas have been improved clearly identifying those staff supporting people at the home as well as those providing support to service users from the Outreach service.

Up to date training has been provided ensuring staff have the knowledge and skills needed to carry out their duties safely. This has included Aspergers and Autism, medication, person centred planning and safeguarding.

Further recruitment has been carried out to ensure that there are sufficient staff available to offer consistency and continuity of support.

Bathrooms had been repainted, the carpet cleaned to the hall, stairs and landing and new equipment purchased for the laundry. More work had been identified to enhance the environment further.

Following the resignation of the manager further recruitment had been undertaken. A new manager has now been appointed, they will commence work once all relevant checks have been carried out.

Action had been taken to ensure that water temperatures were regulated for the comfort and safety of people.

What they could do better:

The Providers need to liaise with our registration team with regards to their current conditions of registration. These need to be reviewed and amended so that the home is registered to accommodate people of 16 and 17 years of age.

The Statement of Purpose and Service User Guide need to be amended to include information about the support offered at the home including those people accommodated under the age of 18 years of age.

People using the service need to have an individual written contract that gives clear information about what facilities and support they can expect from the home, including specialist services. This needs to be signed by the registered manager, the person using the service and by a third party if necessary.

Person centred plans could be improved to show that people are actively involved in their development so that they provide more information about the persons wishes and aspirations.

Records in relation to the administration of medication and auditing need to be improved ensuring information is accurate and the health and well being of people is not affected.

Additional refurbishment and redecoration should be carried out so that all areas of the home are brought up to a good standard. The provider must ensure that all relevant recruitment checks are carried out in line with childrens and adult regulations so that people are only supported by those suitable to do so.

The provider must ensure that staff are provided in sufficient numbers so that this does not impact on the level of support agreed for each person and the opportunities made available to them.

The providers must ensure that staff, particularly new members of the team, receive the necessary training and development needed so that they have the knowledge and skills needed to carry out their duties effectively.

The providers should advise us in writing of their plans to relocate the Outreach service and when this will take place so that the staff at the home are released from providing this support.

The providers should formally notify us of the management arrangements in place ensuring the service is being supported appropriately.

So that people benefit from a well run home the providers must ensure that an application is submitted to us for a registered manager as this has been vacant for some considerable time.

A review in to the quality of care provided by the service needs to be undertaken to ensure it is being run in the best interests of the service users.

Confirmation must be provided to show that a satisfactory gas safety check has been

completed.

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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Outstanding statutory requirements

Requirements and recommendations from this inspection

Choice of home

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

People are confident that the care home can support them. This is because there is an accurate assessment of their needs that they, or people close to them, have been involved in. This tells the home all about them, what they hope for and want to achieve, and the support they need.

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

This is what people staying in this care home experience:

Judgement:

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

Whilst there have been no new placements at the home, systems are in place to ensure that prospective residents are fully assessed prior to them moving in so that their needs can be met.

Evidence:

Information about the service is available. This again needs to be reviewed and updated due to changes within the team.

We discussed with the area manager information on the certificate in relation to the conditions of registration. At present this refers to the home providing support to a name person under the age of 18 years. This person is no longer with the service. As the service would like to be able to continue providing support to people of 16 and 17 years of age, formal arrangements need to be made with the Regional Registration Team so that they are registered to provide this service. The area manager is aware that all staff will need to have the relevant recruitment checks in line with adult and children's regulations. This too will also need to be recorded in the documentation available about the service.

Evidence:

Since we last visited the home no new placements have been made however the area manager stated that a number of referrals had been received and at present an assessment was being undertaken and visits were being made by one individual. Some of the information already gathered about this person provided a good insight into their abilities and the support they would need to increase their independent living skills.

Assessment information examined was detailed and had involved the person and their relatives. Discussions had also been held with the social worker from the funding authority and a copy of their assessment had been provided. In order to gather sufficient and accurate information the area manager had also visited the person in various settings. This had enabled her to observe the person gaining further insight into their support needs.

The area manager explained that time allowed for the assessment process varied as this was dependent on the person who had been referred. Plenty of opportunities are provided for the person to visit the home enabling them to familiarise themselves with the environment as well as getting to know the people who already live there.

A previous issue remains outstanding with regards to formal contract arrangements. The new providers have been exploring this with the relevant authorities. The area manager explained that reviews have now been requested to establish if the current arrangements in place are sufficient.

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.

Plans could be improved, showing that people have been more actively involved in their development and information includes their wishes and aspirations in addition to skills they need to learn.

Evidence:

At present there are still only 2 people living at the home. We briefly looked at their individual files. Records were orderly and easy to read.

Some of the information examined were old records, which had been completed as part of the initial assessment process. Information included details about them including a personal history, likes and dislikes, communication skills, social interaction, flexibility of thought, sensory skills, medical details and support guidelines around daily routines.

Person centred plans had been introduced. Information on the training matrix shows that staff have now received training in this area. However further improvements

Evidence:

could be made to evidence that people have been involved in the development of their plans and include their wishes and aspirations as there is currently an emphasis on information being tasks focused.

Further information includes weekly planners, SMART objectives and a behavioural management plan. Goals had been set and linked to the 'pathway to independence' information. These records are used both at the home and when attending the development centre so that continuity can be offered. Review sheets are completed detailing what activity has been undertaken how this was achieved along with further areas of development.

Risk assessments had also completed in areas where potential hazards had been identified. Information included the consequences, degree of risk and control measures ensuring people were kept safe.

Each person has their own communication diary, which is used to share information between the team and is accessible to them should they also wish to read it.

We were told that a new computer system was being installed. This would be linked to Potens caresys system so that all information could be stored electronically. This would include information about people living at the home, staff, health and safety information and finances. The area manager explained that staff would only be able to access information relevant to their role. The system would also be passworded and changed every 72 days so that information could be kept secure. Staff will be assessed in relation to their IT skills and where necessary training will be provided.

Feedback received from a relative was very positive. They felt that the staff 'do a remarkable job in recognising the particular anxieties and behavioural difficulties associated with my relatives autism. They have worked on strategies to help him and work through the difficulties. This has made him a more relaxed and happy person who has gained confidence and feels accepted'. They also confirmed that they were kept informed, that contact was encouraged, that carers have the right skills and experience and that they knew who to speak with if they had any issues or concerns.

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.

Opportunities are provided enabling people to follow a varied lifestyle which meets their emotional and social needs.

Evidence:

Routines vary depending on the needs and wishes of each person. Time is spent each week looking at what activities and plans people have. Additional staffing is allocated on the rota to accommodate planned activities. This is in addition to those staff hours utilised to support the Outreach service.

People enjoy spending time relaxing at home as well as taking part in activities within the local and wider community. There are 2 televisions, a computer and exercise equipment available in the communal areas. People also have personal items in their own rooms if they wish to spend time alone.

Evidence:

Some of the activities include going out for walks and occasional trips. These have included a boating trip and visiting Manchester United football ground. Other activities include, snooker, cycling and computer skills. More formal activities are included to enable people to learn and develop life skills. Staff encourage and support people with their personal shopping enabling them to learn budgeting skills as well as cooking, and household cleaning. This includes additional support from staff at the development centre. The home has a vehicle which is used for activities and attending appointments.

People continue to have contact with family. This varies depending on the individual wishes of people. One person enjoys spending each weekend with their parents. Courtesy call continue to be made by staff to promote better communication so that issues do not arise.

From observations made both people appeared relaxed and looked well. One person was happy to chat with us.

In relation to meals, each person receives personal shopping money each week. This enables them to buy food items and snacks. Staff also do a larger weekly shop. People are encouraged to prepare and cook meals however support is provided where needed. One person uses the upstairs kitchen area to store and prepare some of their food. Staff explained that this person has a vegetarian diet and is encouraged to have a healthy varied diet ensuring their health was maintained. This person is also monitored in relation to their weight due to previous issues with weight loss. The second person continues to be encouraged to have low fat diet, this had helped them to continue to lose weight, which in turn has resulted in them becoming more active.

Feedback surveys were received from the people at the home. They confirmed that the home arranges activities for them to take part in, 'they liked the meals provided, 'would like more service users', 'I'm happy here', 'it's good' and 'there is nothing' that could be done better.

Staff also commented, 'we make sure the service users needs are met by doing activities and hobbies that they enjoy', 'the development enables the service users to progress well', 'the service users needs are always met', 'I always feel good about coming to work', 'we help with smart goals to develop daily living skills' and 'they appear happy'.

In relation to developing the service, staff felt that this could be enhanced by offering holidays as well as having more people living at the home.

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.

The health and personal care needs of people are met however improvements in relation to medication records are needed ensuring people are kept safe.

Evidence:

Prompts and encouragement are provided with regards to personal care needs depending on the needs and wishes of people. Arrangements have been made so that people are able to access all health care services so that their health and well-being is maintained. People are registered with a local GP, dentist and optician. Where additional needs are identified referrals would be made so that the appropriate intervention and support could be provided. Records are maintained to show that peoples health needs are being monitored.

As previously identified support and advice continues to be provided from the behavioural team and development centre. This includes input with regards to communication skills and management of behaviours. Where necessary intervention strategies are developed so that people are supported in a way which ensures their safety and minimises any risk to themselves and others.

Evidence:

The medication system was also examined. Lockable spaces are provided ensuring items are stored safely. Weekly audits are carried out to ensure that stocks held are correct. Records examined showed that both people were in receipt of one medication item which was the same. Audits did not identify which stock belonged to which person. Medication administration sheets (MARs) showed that this item had not been supplied during the current monthly cycle however audits showed that stocks were still available from the previous delivery. These items need to be 'carried forward' and identified on the current MAR being used.

Records were also incomplete for one person, items had not been booked in, there were several gaps due to staff not signing following administration and handwritten entries had not been double signed. This must be done ensuring records are accurate and show that people are receiving their prescribed medication correctly.

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.

Systems are in place to ensure that people feel listened to and staff respond appropriately ensuring they are protected.

Evidence:

New company policies and procedures have been introduced including those in relation to the safety and protection of people who use the service.

Information provided on the AQAA showed that there had been no concerns or allegations brought to the attention of the home since our last visit. No issues have been raised directly with us.

Information was provided on the staffing training matrix to show that all staff have now completed adult protection training however some people may need refresher courses so that they are familiar with the current local authority procedure. This will also need to be delivered to all new staff currently being recruited to the home.

A random check was carried out on finances held at the home. These include personal allowances, activity money and petty cash. A check was carried out on the personal allowances. Money held corresponded with the records.

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.

267 Walmersley Road is a large spacious home, which is to be enhanced further with more redecoration and refurbishment providing comfortable accommodation for people to live.

Evidence:

267 Walmersley Road is a large detached domestic dwelling offering spacious accommodation. It is situated on a main road and easily accessible for local transport and amenities. It is tastefully furnished to a good standard reflecting the age group and the needs of those living there.

Accommodation comprises of a large through lounge, dining room, kitchen, bathroom, utility and staff office on the ground floor. With six single bedrooms and 2 bathrooms on the first floor.

The hall, stairs and landing carpet had been cleaned and the two first floor bathrooms had been painted. Equipment had also be bought for the laundry. The area manager advised us that a budget had now been set by the providers so that further redecoration and refurbishment can be made. Additional funds would be provided as and when occupancy levels increase. This will enhance the property further so that people continue to be provided with a good standard of accommodation.

Evidence:

Communal areas have been set out to allow for people to have space and privacy away from each other. There are 2 televisions, a computer and exercise equipment, which are regularly used. There is also an enclosed rear patio area. Outside furniture had been provided so that people could relax outside.

Suitable arrangements are in place with regards to domestic tasks. These are generally carried by staff with the assistance of residents. The laundry area is sited away from the kitchen and hand washing facilities are provided to prevent any cross infection. During the visit the home was found to be clean and tidy.

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.

Additional staff, opportunities for further training and development as well as additional recruitment checks will ensure that people are supported safely by a skilled and competent staff team.

Evidence:

There have been a number of changes to the current staff team, with staff from other areas of the service now working at the home. The current team comprises of just 6 support staff following the resignation of the manager. Interim arrangements had been made for the service to be supported by the area manager and a manager from another service until the newly appointed manager is able to commence employment.

Rotas showed that staff were on duty throughout the day with wake in staff at night. Additional hours are provided in the afternoons and evenings to accommodate activities as well as the Outreach service. These are now clearly identified on the rotas. Agency staff had been used however this had been kept to a minimum. Where possible the same members of staff had been utilised offering continuity in support.

Since the takeover all staff personnel files are now being held at the home. Further recruitment had recently taken place with regards to support staff. Four staff had recently been appointed and the relevant checks were being made. The provider must

Evidence:

ensure that all relevant recruitment checks are carried out in line with children's and adult regulations so that people are only supported by those suitable to do so. An audit of recruitment files will be carried out at our next visit.

The area manager advised us that on-going recruitment would continue so that sufficient staffing levels were in place as the service develops. The provider must ensure that staff are provided in sufficient numbers so that this does not impact on the level of support agreed for each person and the opportunities made available to them.

We were advised that plans were being made for the Outreach service. The area manager informed us that the organisation had been looking at suitable premises within the Bury area in which they could accommodate the behavioural centre. It is anticipated that this would be in place by October 2009. Once this had been set up, support for those people using the Outreach service would be provided by the team at the centre. The providers must formally notify us when this service will cease to be run from the home, releasing staff of their additional support duties.

An up to date training matrix was provided. Training had been undertaken in medication, person centred planning, adult protection and Autism and Aspergers. Potens had asked staff to explore areas of training they would like as part of their future development. Staff have identified a number of courses, which include makaton, nutrition, communication skills, learning disability awareness, sexual awareness, epilepsy and diabetes. This information had been passed onto the training and development section so that courses could be sourced. The area manager also advised us that all necessary information has been forwarded to the Bury Training Partnership. At present they are waiting for an invite to join the group. This too will enable them to access further training for the team. The providers must ensure that staff, particularly new members of the team, receive the necessary training and development needed so that they have the knowledge and skills needed to carry out their duties effectively.

Staff have undertaken training with regards to NVQ. Of the 6 support staff 4 already hold either the level 2 or 3 qualification. The two remaining staff have enrolled on the course.

Staff feedback was also very positive. They confirmed that communication systems were good, generally there were enough staff available and that they received enough support.

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.

Further changes have taken place in relation to the management of the service. A period of stability is needed to ensure that the improvements made are sustained providing a good quality service for people at the home.

Evidence:

267 Walmersley Road had a change in ownership in September 2008. Potens, the new owners, are a large care provider within the North West. The service has a large management tier which offers support to the homes. 267 Walmersley Road is supported by the area manager, who visits the home on a regular basis.

From discussions with the area manager it appears that following this change the team has now settled providing clear direction in relation to the aims of the service with a more professional approach. Improvements were found during our visits and a number of the requirements and recommendations made during our last visit had been addressed.

In relation to the management of the home this too has changed as the manager has

Evidence:

recently left the service. Alternative arrangements have been put in place on a temporary basis. Regular input is being provided by the area manager as well as additional support from a registered manager from another Potens service. Staff confirmed that if they had any issues or needed advice they knew who they could speak with.

Recruitment has taken place and a new manager has now been appointed. The service is currently completing the necessary recruitment checks prior to agreeing a start date. The area manager was advised that application by the new manager to register with us would need to be made at the earliest opportunity as this had been vacant for some considerable time.

Systems are in place with regards to monitoring the quality of the service provided. Monitoring visits in line with Regulation 26 are carried out by the area manager and records completed. Opportunities are also in place to gather feedback from staff and residents. Staff team meetings and supervisions are held. Questionnaires have been devised in both written and pictorial form. The area manager stated that they were planning to distribute these every 3 months.

It was identified at the last inspection that a quality review of the service was being undertaken to ensure that this was being run in the best interests of those people who use the service. A copy of the findings were to be sent to us once completed, however this had not been received. The new owners need to explore how they are to promote and improve the profile of the current service along with a clear business plan and objectives, which ensure that people receive a good quality service.

Health and safety certificates were examined. Certificates were seen for the testing of small appliances, fire alarm system, electric circuit and fire equipment. A note had been made on file to show that the gas safety check had been completed on the 5 February 2009 however there was no certificate. The area manager explained that this had been sent to the head office in error. Confirmation that a satisfactory check had been carried out must be provided.

Further in-house checks are completed. These include weekly health and safety checks to the general internal and external environment, fire checks, temperature checks and vehicle checks. In relation to water temperatures, readings had previously been quite low. We were told that the boiler had been serviced and the water pressure adjusted. Readings showed that temperatures had been regulated to 41 and 42 degrees C.

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 |
|-----|----------|------------|--|----------------------|
| 1 | 5 | 5 | People using the service need to have an individual written contract that gives clear information about what facilities and support they can expect from the home during their stay, including specialist services. This needs to be signed by the registered manager and the person using the service and by a third party if necessary. | 31/12/2007 |
| 2 | 6 | 15 | Person centred plans need to be completed together with each person at the home clearly showing that they are actively involved in developing the plan and their needs and wishes have been considered. | 30/12/2008 |
| 3 | 33 | 18 | To ensure that people are supported by an effective staff team the registered provider must ensure that there is enough suitably qualified, experienced and skilled staff in place to meet the specialist needs of people living at the home at all times. The registered provider must inform CSCI of the date service users will cease to be provided with and outreach service from | 30/11/2007 |

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 |
|-----|----------|------------|----------------------|----------------------|
| | | | the registered home. | |

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 | 1 | 5 | The Statement of Purpose and Service User Guide must be reviewed and updated so that information clearly states what services are provided and arrangements at the home | 30/10/2009 |
| 2 | 5 | 5 | People using the service need to have an individual written contract that has been signed and agreed by the registered person, the person using the service and by a third party if necessary so that they have clear information about what facilities and support they can expect from the home including specialist services. | 30/10/2009 |
| 3 | 6 | 15 | Person centred plans must be improved showing that people are actively involved in there development | 30/10/2009 |

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 |
|-----|----------|------------|---|----------------------|
| | | | so that they clearly evidence their needs and aspirations. | |
| 4 | 20 | 13 | Staff must completed the medication administration records on each occasion medication has been given so show that people have been administered their medication safely. | 30/10/2009 |
| 5 | 32 | 18 | The provider must ensure that staff are provided in sufficient numbers so that this does not impact on the level of support agreed for each person and the opportunities made available to them. | 30/10/2009 |
| 6 | 33 | 18 | The providers must formally notify us of the date in which the Outreach service will cease to be provided from the home releasing staff from their current additional duties. | 30/10/2009 |
| 7 | 34 | 19 | The provider must ensure that all relevant recruitment checks are carried out in line with children's and adult regulations so that people are only supported by those suitable to do so. | 30/10/2009 |

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 |
|-----|----------|------------|---|----------------------|
| 8 | 35 | 18 | The providers must ensure that staff, particularly new members of the team, receive the necessary training and development needed so that they have the knowledge and skills needed to carry out their duties effectively. | 30/12/2009 |
| 9 | 37 | 11 | The organisation must submit an application for a registered manager to the us ensuring people benefit from a well run home. Section 11, Care Standards Act. | 30/11/2009 |
| 10 | 39 | 23 | A review into the quality of care provided by the service needs to be undertaken to ensure that the service is being run in the best interests of the service users. | 30/11/2009 |

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 | 20 | The provider should ensure that handwritten entries made on the medication administration records are checked and |

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 |
|----|-------------------|---|
| | | countered signed ensuring the information recorded reflects that on the prescription. |
| 2 | 20 | Records should clearly show all stocks held in the home including this items 'carried forward' from the previous month so that information show the systems is being managed safely. Records should also clearly show which items belong to which person. |
| 3 | 24 | Additional refurbishment and redecoration should be carried out to further enhance the environment so that people continue to live in a well maintained home. |
| 4 | 37 | The Provider should formally notify us of the management arrangements in place ensuring the service is being supported appropriately. |
| 5 | 42 | Confirmation must be provided to show that a satisfactory gas safety check has been completed. |

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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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