

Key inspection report

Care homes for adults (18-65 years)

Name:	Elmdon House
Address:	190 Elmdon Lane Marston Green Birmingham West Midlands B37 7EB

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

Lead inspector:	Date:
Deborah Shelton	1 8 1 1 2 0 0 9

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

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- Regulating health and adult social care services to ensure quality and safety standards, drive improvement and stamp out bad practice
- Protecting the rights of people who use services, particularly the most vulnerable and those detained under the Mental Health Act 1983
- Providing accessible, trustworthy information on the quality of care and services so people can make better decisions about their care and so that commissioners and providers of services can improve services.
- Providing independent public accountability on how commissioners and providers of services are improving the quality of care and providing value for money.

Reader Information

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Information about the care home

Name of care home:	Elmdon House
Address:	190 Elmdon Lane Marston Green Birmingham West Midlands B37 7EB
Telephone number:	078265280673
Fax number:	01217080673
Email address:	
Provider web address:	

Name of registered provider(s):	Midway 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
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Additional conditions:
The maximum number of service users who can be accommodated is: 6.
The registered person may provide the following category of service only: Care Home Only (Code PC) To service users of the following gender: Either To service users within the following category Learning Disability (LD) 6

Date of last inspection								
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Brief description of the care home
Elmdon House is a large detached house and provides twenty-four hour care and support for six people with Learning Disabilities. Six people were living at the Home at the time of the Inspection. The Home is situated in Marston Green. It is near to the centre of Marston Green village where there are a variety of shops, transport links and leisure facilities. There is a large lounge with double doors opening into the dining room. A domestic style kitchen, separate laundry and office. There are six single bedrooms, each one with an en-suite bathroom. Five have a shower facility and one bedroom has an ensuite bathroom. Three of the bedrooms are on the ground floor and are accessible to a person with limited mobility. All other bedrooms are on the first floor. A stair lift provides access to the first floor. To the rear of the Home there is a

Brief description of the care home

large garden with lawned area and patio, and to the front of the Home there is off street parking. The statement of purpose records the current fee range for living at the Home. The fee does not include personal clothing toiletries, electrical items and meals eaten outside of the Home above the allowance allowed and activities not covered in the contact.

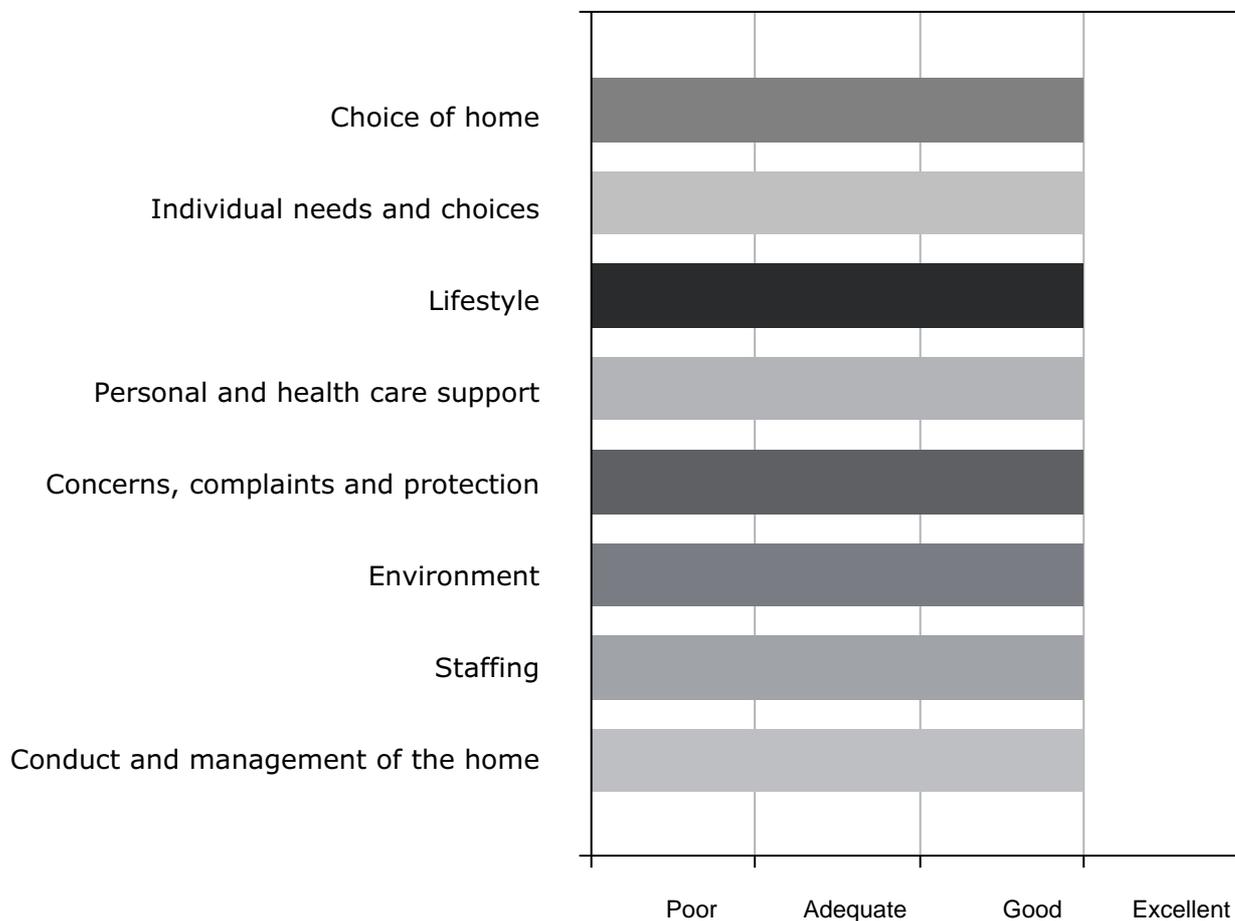
Summary

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 visit took place over one day and was conducted by one inspector. The people who live and work at the home did not know that we were coming. There were six people living at Elmdon House on the day of our visit. Before we went to the Home we looked at notifications that the home had sent us which informed us of any events that had impacted on the health and well being of the people who live there. We also reviewed the home's Annual Quality Assurance Assessment (AQAA). This is a document that staff at the home complete which gives us information about how they are meeting national minimum standards, details about the staffing of the home, the policies and procedures in place to make sure that people stay safe and well and how the home plans to make improvements to the service.

We case tracked one person who live in the home. Case tracking involves meeting or observing people, reviewing records of their care and talking to the staff who support them in order to focus on outcomes. Case tracking helps us understand the

experiences of people who live in the home.

We looked at the way medicines and health and safety were being managed, observed the environment that people live in and reviewed staff training and recruitment records.

The newly appointed manager was present at this visit and helped answer our questions about the running of the home.

An expert by experience joined us on this visit and spent time talking to the people who live in the Home and to the staff. This helped us gather information about people's views and opinions. The expert by experience wrote a report of her visit to Elmdon House and some of this report is included in the main body of this report.

What the care home does well:

The Service User Guide and Statement of Purpose provides valuable information which is easy to read and understand. The Service User Guide is available in picture format to help those people who have difficulty reading.

Personal profiles record detailed information to enable staff to be aware of what is important to people and how to provide support in a way in which people prefer.

The manager and staff understand people's needs and a lot of knowledge regarding people's likes, dislikes and abilities.

Varied activities are planned by people with assistance from their key workers and records show that people are able to undertake ad hoc and pre planned activities as well as holidays and trips away from the Home.

People are encouraged to maintain contact with their families and friends and staff assist people to visit their families if they want to.

People are being encouraged to lead a healthy lifestyle including free gym membership and healthy meal choices when planning menus and doing the shopping.

People have access to health care professionals as needed to ensure that their health needs are being met.

The complaints policy is available in picture format to help people understand how they should make a complaint. Everyone has a copy of the complaint policy.

Elmdon House provides a comfortable, homely environment which was in a good state of repair. People appeared to be at ease in their surroundings and the atmosphere was relaxed and friendly.

What has improved since the last inspection?

People are now being encouraged to attend college courses and other community activities. This helps to ensure that people undertake fulfilling activities in accordance with their wishes.

Medication management systems have changed and now only senior staff who have had suitable training are able to administer medication. This should help to reduce the risk of medication errors occurring. People's consent to medication has been obtained and is recorded on their care plan.

A company director completes monthly visits to the Home and writes a report of his findings. This helps to ensure that the Home is providing a service in line with the company's requirements.

Pictorial satisfaction surveys have been developed so that people's views of the service provided can be obtained using information which is meaningful to people.

Regular house meetings now take place so that people have the opportunity to make

decisions about their home.

The speech and language therapist has discussed those people at risk of choking when eating their meals and appropriate risk assessments are now in place for these people.

What they could do better:

Care plans should record more detailed information to enable staff to provide care to meet people's needs. Information regarding how staff are to meet the identified need should be recorded as well as the desired outcome.

Risk assessments should be completed for each person as people's needs and abilities differ. Generalised risk assessments may not identify the different risks relating to each individual.

Key workers monthly summaries should be completed on a monthly basis to demonstrate that key workers are aware of people's needs and to show how key workers are supporting people to lead a fulfilling, meaningful life.

Written menus may not be understood by those people who have difficulty reading. The manager reported that she intends to use pictures in future to help people choose and plan their meals and this should be started as soon as possible.

People should be able to have a choice of meal on a daily basis. Alternatives should be available for people who change their mind and do not wish to have the meal planned during the weekly house meeting.

Health action plans should record in detail the action that staff need to take to meet people's health needs. These documents should be individualised and record specific information for each person living at the Home.

Staff should receive supervision on a regular basis at least six times a year. Staff should be made aware of the purpose and expectations of staff supervision.

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.

Suitable arrangements are in place for providing people with information about the home and assessing their needs before they move in to ensure the home can meet their needs

Evidence:

The statement of purpose included the information needed to help people make a choice as to whether or not they want to live at Elmdon House.

The service users guide has been updated to include information about the Home and is available with picture making it easier for people to read and understand.

There have been no new people admitted to the home since the last inspection. The manager told us that she would assess people before they decide to move in to the Home. The assessment procedure discussed was comprehensive and included getting copies of assessments from social workers and health care professionals so that people can be confident their needs will be met by the home.

Individual needs and choices

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

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

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

This is what people staying in this care home experience:

Judgement:

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

People are supported to make choices in their everyday life. Person centred care planning helps to ensure staff know the people under their care and meet their needs in a way in which they prefer.

Evidence:

Before looking at care plans and risk assessments, the manager, who has only been working at the Home for two days, said that she is planning on updating all care plans as she did not feel that enough information is written about people's needs. Standardised documentation is going to be removed and replaced with individualised details for each person. Currently information is spread out in lots of files, the manager wants all information to be easily accessible in one file. With this in mind we only looked at care plans and risk assessments for one person living at Elmdon House.

Care plans explain the support that people require to make sure that their needs are understood and met. The care plan seen recorded very brief information and did not always give detailed instructions to staff on how to meet individual needs, for example

Evidence:

"eating and drinking - to eat and drink safely", "skin - maintain healthy skin".

The personal profile looked at was much more detailed. This said what people like and don't like. It also said what are "the most important things to know about me, how I communicate with you, friendships, the things most important to me, what is a good day, a bad day, my diet" etc. Detailed information under each of these headings guides staff how to care for this person and how to support their wellbeing.

Useful information such as important people in my life, my circle of support, my hopes and dreams for the future is written down to help staff get to know and understand each individual living at the Home. The manager, although new in post, had a lot of knowledge and understanding of people's needs and had got to know people in the short time she has been working at the Home.

Records sampled included risk assessments. There was an assessment regarding use of the stair lift, fire risk and a general risk assessment. These were brief. For example the fire risk assessment only mentioned the risk to everyone if a door is left open. However, all doors in the Home are linked to the fire alarm system and would close automatically in the event of a fire. The manager is planning to update all risk assessments and said that all generalised risk assessments will be removed. Individual assessments will be available for each person.

The manager said that previously people had not undertaken many community activities but she is currently helping people to choose activities such as college courses and leisure activities which they may wish to do. Risk assessments will then be done for all activities which people wish to undertake. Staff will be responsible for going out with the person and completing a risk assessment taking into consideration all factors such as the building that the activity will take place in, transport and the risk of undertaking the activity.

Key workers complete a monthly report on the person to show what they have been doing, how they are making choices and decisions about their life and what, if anything needs to happen to make their life better. The key workers monthly summary seen was dated May 2009 and there was no written evidence in the file of any summary recorded after this date.

Records seen show that regular staff meetings, house meetings and "service user meetings" take place. Minutes of the meetings were taken with any follow up action recorded, for example one person wanted to go to college, and it is recorded that college forms have been sent off. Issues identified at the previous meeting have been

Evidence:

followed through on to this meeting and any action taken to address has been recorded.

House meetings will be held every Thursday after the individual meetings between clients and key workers. A group meeting will then be held to discuss any activities that are to take place as a group. These and other records seen showed that as much as possible people are able to make choices in their everyday lives. People choose what they wear, what they eat and drink and whether they go out or stay in.

Lifestyle

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

Each person is treated as an individual and the care home is responsive to his or her race, culture, religion, age, disability, gender and sexual orientation. They can take part in activities that are appropriate to their age and culture and are part of their local community. The care home supports people to follow personal interests and activities. People are able to keep in touch with family, friends and representatives and the home supports them to have appropriate personal, family and sexual relationships. People are as independent as they can be, lead their chosen lifestyle and have the opportunity to make the most of their abilities. Their dignity and rights are respected in their daily life. People have healthy, well-presented meals and snacks, at a time and place to suit them.

People have opportunities to develop their social, emotional, communication and independent living skills. This is because the staff support their personal development. People choose and participate in suitable leisure activities.

This is what people staying in this care home experience:

Judgement:

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

People are provided with opportunities to go out and about and be part of the community. People's needs and preferences are considered when planning menus so that people get to eat the food they enjoy.

Evidence:

We looked at one person's records to check that they have opportunities to do things they enjoy on a regular basis. An "expert by experience" also came to the Home as part of our inspection and spoke to staff and to people that live in the home about activities and the way that they are planned.

The expert by experience has written a report about the visit and some of the information is included in this report. The expert reported about activities as follows:-

"When I arrived all of the residents were in the living room and I was told that they

Evidence:

were about to play a game of bingo. At first I was a little concerned that everyone was at home but I was told later that they were meant to be going to the German Market but one of the women was not very well and they didn't want to go without her so I thought this was fair enough. I was told that everyone enjoys playing bingo and from what I saw this was true. I would like to see people going out to bingo as well if it something they enjoy doing".

"I asked about what people do during the day? I was told that people go shopping, for meals out, the cinema and bowling. Some of the people have been to see the blues play football and they all go to a disco on a Wednesday night. I asked how people choose what they do during the day? I was told that they all have a meeting every Thursday where they decide what they want to do. It is good that they are able to choose what they want to do and they are listened too. Two of the men have talked about going to the dog racing so the staff are looking into this for them. The Manager told me that she is making an activity board, she had started it and I saw this. They are going to put pictures on it for what everyone is doing on each day of the week. This will be really good as it will be easier for people to see what they are doing each day".

"I spoke to one of the ladies who lives there and she told me that she is going to London soon for three days and she is going to see Dirty Dancing at the theatre. She had decided to do this with her Key Worker. I was really pleased that she was doing this as she told me she loves dancing. They were trying to decide what else to do while they are in London so her Key Worker was going to get some photos of different things so she could choose. I thought this was really good, the woman obviously got on really well with her Key Worker. The lady was going to start college soon which she seemed pleased about". "Before I arrived at the home the people had been doing some art, the artwork was on the wall in the dining room which was good. Before I left the staff asked the residents what they wanted to do and a few of them said they wanted to go to the pub. I thought this was really good. Its is really good that the people have lots of flexibility and not everything has to be planned in advance. The garden was really big and I noticed there was a basketball net which I was told belonged to one of the men who lives there. There was also a hot tub which I thought was really good but I was told this was not working, I hope this gets fixed soon so that people can use it. Some of the men at the home had recently joined a snooker club that they were enjoying going to, this is good. The people at the home are going to be getting free gym memberships which is great although the staff told me the people weren't very keen on going to the gym! The staff are encouraging the residents to exercise at home which is good".

Evidence:

The manager told us that she is developing a scrap book with pictures of different activities so that people can look through it and choose what activities they wish to undertake. The picture of the activity will then be put on the activity board so that people can remember what they are doing each day.

The home helps to support people to keep in touch with their friends and relatives so that they do not lose relationships that are important to them. There is access to a telephone and one person makes regular telephone contact with their family. A majority of people are going out to see their families on Christmas day.

Menus and records of food that people had eaten were looked at to make sure that people were being offered a balanced diet that met their needs and preferences. The expert by experience spoke to staff and people who live at Elmdon House about the meals and reports as follows:-

"One of the staff showed me the food menu. The menu was written which I didn't think was very good as it is not accessible for the people who live there. The Manager told me she was going to make an accessible menu with pictures on it to make it easier for people to choose what they want. The Manager had only been there for 2 days so she had not had chance to do this yet. I think it is a really good idea to have pictures on the menu as it does make it a lot easier for people. I noticed that there was only one choice on the menu, the staff told me that people could have something else if they wanted but it would be better if there was more than one choice on the menu. People told me that they all sit down together on a Sunday and decide what they are going to have to eat all week. It is good that they sit down and decide together but do people always know what they want to eat for the whole week? Also do people always want the same as each other? One man didn't eat pork because of his religion. The staff respected this and it was written in his care plan which is really good. Everyone does the food shopping which is really good".

"Whilst I was there everyone had lunch. I heard one lady being offered a choice but everyone else seemed to have the same to eat. Everyone sat down together with the staff and had their lunch which was nice to see". Two of the ladies at the Home are starting a cooking course at college. This course includes healthy eating. The manager said that people enjoy a healthy diet. Staff take people to the shop and let them pick their meals and try to encourage them to have a healthy alternative wherever possible.

We saw people taking part in domestic tasks such as taking out the bins, drying up dishes. This indicates that people are included in the running of their home. The

Evidence:

expert by experience noted "After lunch the residents helped to tidy up and do the washing up which pleased me. I asked people if they did household tasks and they told me that they did. They told me that they did a 'big clean' of the whole house with the staff and they cleaned their rooms, it is really good that people are doing the housework as it is their house. I was shown the laundry room, everyone brings their own laundry to the room and it is washed separately so that everyone's clothes don't get mixed up. It is good that everyone's clothes are kept separate but I was told the staff do the laundry and the ironing, I would like to see the people who live there being supported to do their own laundry".

Personal and health care 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.

People are provided with support to meet their personal and health care needs met so that they stay in good health.

Evidence:

We only looked at the personal and health care plans of one person as the manager said that these records will be changing to a new format shortly.

Records showed that people have access to professionals such as chiropodists, dentists, community psychiatric nurses, psychogeriatrician and their GP according to their needs. Everyone at Elmdon House has a Health action plan. This is a document that describes the support and services a person needs to stay healthy and well. The Health action plan seen was very brief and did not really indicate how the person wished to be supported to meet needs. The health action plan was not individualised and was brief which could lead to individual needs not being met.

We looked at the way that medicines are managed. The new manager has changed medication systems so that only senior staff are now allowed to give out medication. Medication administration records have been changed and information is now easier to

Evidence:

read. There is not a large amount of medication in use at this Home. All medication records checked were in good order and up to date. People have signed their care plans to show their agreement to take medications prescribed the their GP. The different times that people prefer to take their medication is also recorded on their file.

When speaking to the manager it was evident that she was fully aware of people's needs, likes and dislikes and how to overcome issues such as fear of going to the doctor or dentist. Preferred daily routines are recorded in care files, this helps to ensure that people have stated their preferences and staff should be able to follow their wishes

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.

Suitable procedures are in place for dealing with complaints and staff are being trained to recognise and report any suspicions of abuse so that people are protected from harm.

Evidence:

We have not received any complaints about Elmdon House since the last inspection. The Home have received one complaint regarding an external contractor working at the Home. Their records show that this complaint was handled appropriately and that staff are following their procedures.

The complaints policy has now been developed in pictorial format to help it to be more meaningful for people. Everyone has been given a copy and a copy is kept on their care file.

Records show that staff have done training regarding the protection of vulnerable adults. The manager is currently writing a training programme regarding this and will discuss abuse at each staff supervision meeting, she intends to discuss the various aspects of abuse to ensure that staff have up to date information at all times.

We have not been informed of any adult protection issues and the manager has not been made aware of any issues. The manager said that she intends to build up a good relationship with the local police and is going to ask a representative to call in to the

Evidence:

Home to meet staff and the people who live there. A Safeguarding Officer is also visiting the Home to talk to everyone about the protection of vulnerable adults

Environment

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

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

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

This is what people staying in this care home experience:

Judgement:

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

The home is clean, comfortable and well equipped so that people benefit from an environment that meets their needs.

Evidence:

The Home is situated in the Marston Green area of Solihull and is in a residential area close to shops, public transport and places of worship. Car parking spaces are available at the front of the building and there is a large garden to the rear.

The expert by experience looked around the Home accompanied by a member of staff. The expert reported "I asked one of the staff to show me around the home as everyone was playing bingo. I was told that all of the bedrooms have their own bathrooms which is good and that everyone chooses their own decor in their rooms".

We looked at one of the en-suite bathrooms. All en-suite facilities have a disabled shower, the manager has requested that shower chairs are fitted to the wall of the shower area, these are due to be fitted by the end of the week.

The Home has six single bedrooms a lounge, conservatory, dining area and a kitchen. The Home was warm and clean and people appeared to be at ease in their surroundings. Fixtures and fittings seen in communal areas were in a good state of

Evidence:

repair and the Home was well decorated.

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.

Sufficient numbers of suitably experienced and trained staff are on duty to help provide care for those at Elmdon House.

Evidence:

The expert by experience spent time talking to people about the staff and observed how staff interacted with people. The expert reported "Whilst I was at the home I observed the staff with the people who live there. The staff spoke to the residents with respect at all times and encouraged them to speak with me about the home. When I was talking to one lady about her life the member of staff offered to leave the room so she could talk to me in private, this is really good. I observed one member of staff talking to one of the lady's who lived there and asking her what was wrong as she seemed a bit down. The lady was in some pain with her knee, the staff member was really encouraging and helped her into the dining room so she could sit with everyone else. I thought the staff member treated the lady really well. I thought the staff knew the residents really well and supported them really well. One of the staff members commented that they encourage everyone to do things for themselves as "we are not carers we are support workers". This really pleased me as I clearly saw the residents being encouraged to be independent and make their own choices".

There have been no new staff employed since the last inspection. Therefore we did not

Evidence:

look at staff recruitment records on this occasion.

Training records seen showed that staff have undertaken a lot of training recently including challenging behaviour, dementia, vision impairment, moving and handling, falls awareness, principles of care, safe handling of medicines and fire. The manager said that she intends to review staff training needs when she starts supervision of staff.

A discussion was held with the manager regarding staff supervision. It was noted that although this has been done, staff have not had any training regarding supervision. Some staff supervision records were not up to date and some have had supervision in October. The new manager has introduced a supervision training course which she would like all staff to complete before they undertake any further staff supervision meetings.

Duty rotas showed that there are enough staff on duty to be able to support people.

We were sent an annual quality assurance assessment before we visited the Home. This showed us that nine care staff are employed at this Home and seven of these staff members have completed a national vocational qualification in care at level two or above. Undertaking training helps to ensure that the staff have the required knowledge and skills to meet the needs of those under their care.

Conduct and management of the home

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

People have confidence in the care home because it is run and managed appropriately. People's opinions are central to how the home develops and reviews their practice, as the home has appropriate ways of making sure they continue to get things right. The environment is safe for people and staff because health and safety practices are carried out.

People get the right support from the care home because the manager runs it appropriately, with an open approach that makes them feel valued and respected. They are safeguarded because the home follows clear financial and accounting procedures, keeps records appropriately and makes sure staff understand the way things should be done.

This is what people staying in this care home experience:

Judgement:

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

The new manager is introducing systems to ensure that the Home is well managed and the people live in a safe environment and receive all of the help and support that they need.

Evidence:

The home has a new manager who was present during our visit. The manager said that she had received a handover from the previous post holder in order to get information about the needs of the people living in the home and to understand the systems in place with regard to day to day management. The new manager has over twenty years experience in the health and social care field and has completed training that is appropriate to her role such as the Registered Manager's Award and Management in Health and Social Care qualification at level four.

There are a number of quality assurance process in place to make sure that care is provided in the way that people want. The manager has developed new pictorial satisfaction surveys for people but these have not been sent out as yet. There are different surveys asking questions about catering and food, management, personal

Evidence:

care and support and daily living. Surveys will also be sent to families to find out their views, for example, do they have enough contacts with the Home.

As well as satisfaction surveys the manager will be introducing some audits. These will include an audit of personal files, medication, choices/requests, activities and risk assessments, health and safety, vehicle checks and resident's weekly meetings.

The manager said that there are already some quality assurance practices in place but in depth systems and procedures which have not been fully implemented. The manager intends to increase quality assurance activities and fully implement more in depth systems as soon as possible.

A number of health and safety check records were looked at to ensure that equipment and services are maintained as needed. The stair lift was newly fitted in February 2009 and during our visit a maintenance person was on the premises servicing it.

Portable appliances were tested in November 2009 and fire system checks seen were all up to date and records were in good order. Other records seen included the legionella risk assessment. This is done to make sure that the water in the Home could not infect people with Legionnaires disease. The Landlords Gas Safety Certificate was dated July 2009 which shows that gas appliances in the Home have been checked and are in good working order and are safe to use.

The expert by experience reported that "it is a lovely home, no issues or problems at all, the manager has made a lot of changes. Everyone going to the pub now, been playing bingo which was a big hit".

Are there any outstanding requirements from the last inspection?

Yes

No

Outstanding statutory requirements

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

No.	Standard	Regulation	Requirement	Timescale for action

Requirements and recommendations from this inspection:

Immediate requirements:

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

No.	Standard	Regulation	Requirement	Timescale for action

Statutory requirements

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

No.	Standard	Regulation	Requirement	Timescale for action

Recommendations

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

No	Refer to Standard	Good Practice Recommendations
1	7	The quality of the information recorded in the care plans and risk assessments should be improved so that staff have all the information they need to meet people's needs properly in a safe manner.
2	7	Key workers monthly reports should be completed on a monthly basis as required by the Home's procedures.
3	17	People should have a choice of meal on a daily basis and alternatives to the main meal to be provided should be recorded on daily menus.
4	17	To assist those people who have difficulty reading, food choices should be available in picture format to help people plan their meals.
5	19	Health information in care files should include detailed instructions for staff of people's health needs and how staff are to meet these needs.

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