



Making Social Care Better for People

Inspecting for better lives

Random inspection report

Care homes for adults (18-65 years)

Name:	11a Sunningdale Road
Address:	11a Sunningdale Road Saltersgill Middlesbrough TS4 3JA

The quality rating for this care home is:	two star good service
The rating was made on:	

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.

This is a report of a **random inspection** of this care home. A random inspection is a short, focussed inspection. Details of how to get other inspection reports for this care home, including the last key inspection report, can be found on the last page of this report.

Lead inspector:	Date:								
Kathy Bell	2	8	0	1	2	0	0	9	

Information about the care home

Name of care home:	11a Sunningdale Road
Address:	11a Sunningdale Road Saltersgill Middlesbrough TS4 3JA
Telephone number:	01642826111
Fax number:	01642835298
Email address:	
Provider web address:	

Name of registered provider(s):	Middlesbrough Council
Type of registration:	care home
Number of places registered:	21

Conditions of registration:		
Category(ies) :	Number of places (if applicable):	
	Under 65	Over 65
mental disorder, excluding learning disability or dementia	21	0

Conditions of registration:								
The registered person may provide the following category of service only: Care Home only, Code PC. To service users of the following gender: Either. Whose primary care needs on admission to the home are within the following category: Mental Disorder, excluding Learning Disability and Dementia, Code MD, maximum number of places 21								
The maximum number of service users who can be accommodated is: 21								
Date of last inspection								
Brief description of the care home								
11a Sunningdale Road is a purpose built home in Middlesbrough and is a local authority care home for 21 adults with a mental disorder, excluding learning disabilities or dementia. The home is set back from the road and blends well with the surrounding properties. There is a small garden to the front and a spacious grassed area to the rear that has a seating patio area and a greenhouse. The home is located on a large council estate approximately four miles from Middlesbrough town centre. There is a small row of shops nearby.								

Brief description of the care home

Accommodation is provided in twenty-one single bedrooms that do not have en-suite facilities but there are communal baths, showers and toilets around the home. The home is unitized providing full care, semi-independent living and independent living care. There is a large dining area and lounges. Each unit has lounge/dining rooms that are suitably furnished. The home also has a Crisis Resolution Unit providing care for people in the homes environment; it is an alternative to hospital admission. The home has a main commercial kitchen and the smaller domestic kitchens, in each unit, are for residents use. The laundry is accessible to residents who are encouraged to do their own washing and ironing.

What we found:

This inspection was one of a number carried out by CSCI, on good or excellent services, to check that their quality rating had remained the same.

The inspection took place on 28 January 2009. During the visit we looked around the building, looked at some records and spoke to the manager and two staff, and five people who live in the home.

We saw the records of two people currently in the home, one of whom had come in to the crisis unit. For both of them, the home had obtained an assessment by a care manager. Understandably for the planned admission, much more detailed information was available.

Staff write a care plan which sets out what staff must do for each person. Then staff write their daily notes in the relevant section of the care plan. The care plan was written in a way which gave staff clear guidance on what they should include in their daily records. A member of staff has taken on the task of regularly reviewing the quality of the care plans and advising the staff if they must be improved. The people living in the home signed to confirm they had read and agreed with the care plan. But we found that improvements could still be made. Staff were reviewing how the care plan was being met but were not looking at whether some tasks in the care plan still needed to be done. The home relied on the full assessment information provided by the care manager, rather than setting out their own full assessment which would lead into their care plan. But the review of the care plan provided a full assessment of all areas of need, such as personal care, domestic abilities etc.

We saw evidence that people were making choices about their own lives, such as whether they took prescribed medication or not. One person explained that he could go out when he wanted, although staff asked where he was going. Some people choose to make their own meals and can decide what they will have.

The file for the longer term resident showed a process of staff considering and arranging educational and leisure activities outside the home and putting her in touch with other specialist sources of support. The home is staffed on the basis that people will use resources outside the home to help them use local community facilities, special groups etc. This fits in with the home's purpose of helping people return to their own homes or more independent living. This is why they establish support systems outside the home for people to continue with in the future. Some people who live in the home had progressed to making their own meals. Other residents explained how if they did not like the planned menu for the day, they could ask for something different. If they wanted to make their own meals, the home supplied the ingredients. People who commented on the meals provided by the cook were very pleased with them, "gorgeous".

The care plans tell the staff about the help each person needs. They explain how staff should observe each person so they are aware of any improvements or problems with their mental health. Staff refer people to other health professionals when they need to, such as the district nurse for physical problems or the crisis team for mental health issues. We saw that the staff seem to work well with the crisis team which was able to provide a prompt visit when it was needed.

Visiting professionals record their visits within the home's records, so that the staff have a clear picture of who has visited and what has been discussed or arranged.

The manager described how the home has been successful in helping two of the people who currently live there with plans to move to more independent accommodation.

The home has a satisfactory procedure for dealing with complaints and makes sure people know about this. The most recent complaint recorded was in 2007. The record showed that the manager had taken it seriously and talked with the person and the staff member involved about what had happened. The record showed that the person who complained said they were happy with what had happened. The manager said that informal complaints were recorded in individual files. One person said that they would tell staff if they were unhappy about something but had not had to do so. But one person had not told staff when she was unhappy about another person's behaviour.

Staff have had training in how to recognise abuse and what they should do if they think it is happening. We saw the manager take action to prevent a resident causing harm to others.

The home was established many years ago and the standards reflect this, particularly in the size of the bathrooms and the way many areas are decorated. But it is kept fresh and clean.

All the bedrooms are single. There are separate wings, with their own lounges and bathrooms for men and women. An attached unit for people who come in in emergencies has bedrooms and a bathroom. People from the crisis unit share the smoking room and the large lounge/dining room with the other residents.

The council which runs the home is planning to make improvements in the accommodation. They plan to have two bedrooms which will be suitable for people with physical disabilities and have their own ensuite bathrooms. They also plan to improve the baths and showers for the other people live in the home.

The staff group includes workers with a range of skills and experience, such as a social worker and an occupational therapist as well as nurses specialising in mental health. 10 of the staff are qualified to NVQ 2 in care or above. There is a training programme, which has included specific training in mental health and person-centred planning for some staff as well as the mandatory training of first aid, food hygiene etc.

There are normally two staff on duty in the home through the waking day. Sometimes an extra person is on duty with specific responsibility to carry out tasks which are not direct work with people who live in the home, such as reviewing care plans. People who are staying in the crisis unit are supported by the crisis team from 9 a.m. to 7 p.m. and the crisis team workers can be called out in emergencies overnight as well. But staff from the home may at times be spending time with people in the crisis unit, settling them in, perhaps helping with prompts for personal care or receiving their visitors. It is very difficult at present to estimate how much time this takes and it will vary from day to day.

The main function of the home is rehabilitation and staff said they do sometimes have time to plan activities such as cooking sessions. Most people who live in the home who commented said that staff did have enough time for them. But this was at a time when the home was slightly over half full.

The manager is in the process of applying for registration with CSCI. There are a number of systems for checking on the quality of care which include asking people who live in the home for their comments.

What the care home does well:

The home provides a flexible service for people with mental health problems, helping them move towards independence or maintain themselves in the community. Staff working in the home have a range of skills and experience. The home has good links with services in the community.

What they could do better:

The manager must monitor how much time staff spend supporting people in the crisis unit, whether they have enough time available to do the rehabilitation work which is essential, and review staffing levels on the basis of this information.

The manager should review when staff record informal complaints as complaints, so she can be sure that all complaints are dealt with properly, and detect any patterns to complaints.

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 2.

Are there any outstanding requirements from the last inspection?

Yes

No

Outstanding statutory requirements

These requirements were set at the last inspection. They may not have been looked at during this inspection, as a random inspection is short and focussed. The registered person must take the necessary action to comply with these requirements within the timescales set.

No.	Standard	Regulation	Requirement	Timescale for action
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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
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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	33	18	<p>The manager must monitor how much time staff spend supporting people in the crisis unit, whether they have enough time available to do the rehabilitation work which is essential, and review staffing levels on the basis of this information.</p> <p>This is to make sure enough staff are provided to meet residents' needs.</p>	01/06/2009

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	22	The manager should review when staff record informal complaints as complaints, so she can be sure that all complaints are dealt with properly, and detect any patterns to complaints.

Reader Information

Document Purpose:	Inspection Report
Author:	CSCI
Audience:	General Public
Further copies from:	0870 240 7535 (telephone order line)

Our duty to regulate social care services is set out in the Care Standards Act 2000. Copies of the National Minimum Standards –Care Homes for Adults (18-65 years) can be found at www.dh.gov.uk or got 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

Helpline:

Telephone: 0845 015 0120 or 0191 233 3323

Textphone: 0845 015 2255 or 0191 233 3588

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