



Making Social Care
Better for People

Inspecting for better lives

Key inspection report

Care homes for older people

Name:	Abbeycroft Care and Nursing Home
Address:	Burnley Road Loveclough Rossendale Lancashire BB4 8QL

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, 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:
Graham Oldham	2 9 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 Older People 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

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Internet address	www.cqc.org.uk

Information about the care home

Name of care home:	Abbeycroft Care and Nursing Home
Address:	Burnley Road Loveclough Rossendale Lancashire BB4 8QL
Telephone number:	01706225582
Fax number:	01706213636
Email address:	
Provider web address:	

Name of registered provider(s):	Regency Healthcare (UK) Limited
Type of registration:	care home
Number of places registered:	33

Conditions of registration:		
Category(ies) :	Number of places (if applicable):	
	Under 65	Over 65
old age, not falling within any other category	0	33
physical disability	33	0
Additional conditions:		
<p>The registered person may provide the following category of service only: Care home with nursing - Code N. To service users of the following gender: Either. Whose primary care needs on admission to the home are within the following categories: Old age, not falling within any other category - Code OP, Physical disability - Code PD. The maximum number of service users who can be accommodated is: 33.</p>		

Date of last inspection								
Brief description of the care home								
<p>Abbeycroft is registered to provide personal and nursing care for up to 37 older people. Nursing and residential care is provided. The home is purpose built within its own grounds. The home is located in a semi-rural position close to a local bus route with easy access to Burnley or Rawtenstall. There are extensive views over the countryside.</p> <p>Accommodation is provided in single and twin-bedded rooms on three floors. Communal space is available on each floor. There is a dedicated smoking area and a new conservatory was nearing completion.</p>								

Brief description of the care home

There is a car park to the front of the property and the gardens are accessible to residents.

A statement of purpose and service users guide is available for residents or their families to be informed of the facilities and services the home provides.

The fees for Abbeycroft range from £360 - £686. Extras residents or their families have to pay include hairdressing, newspapers or periodicals and outings.

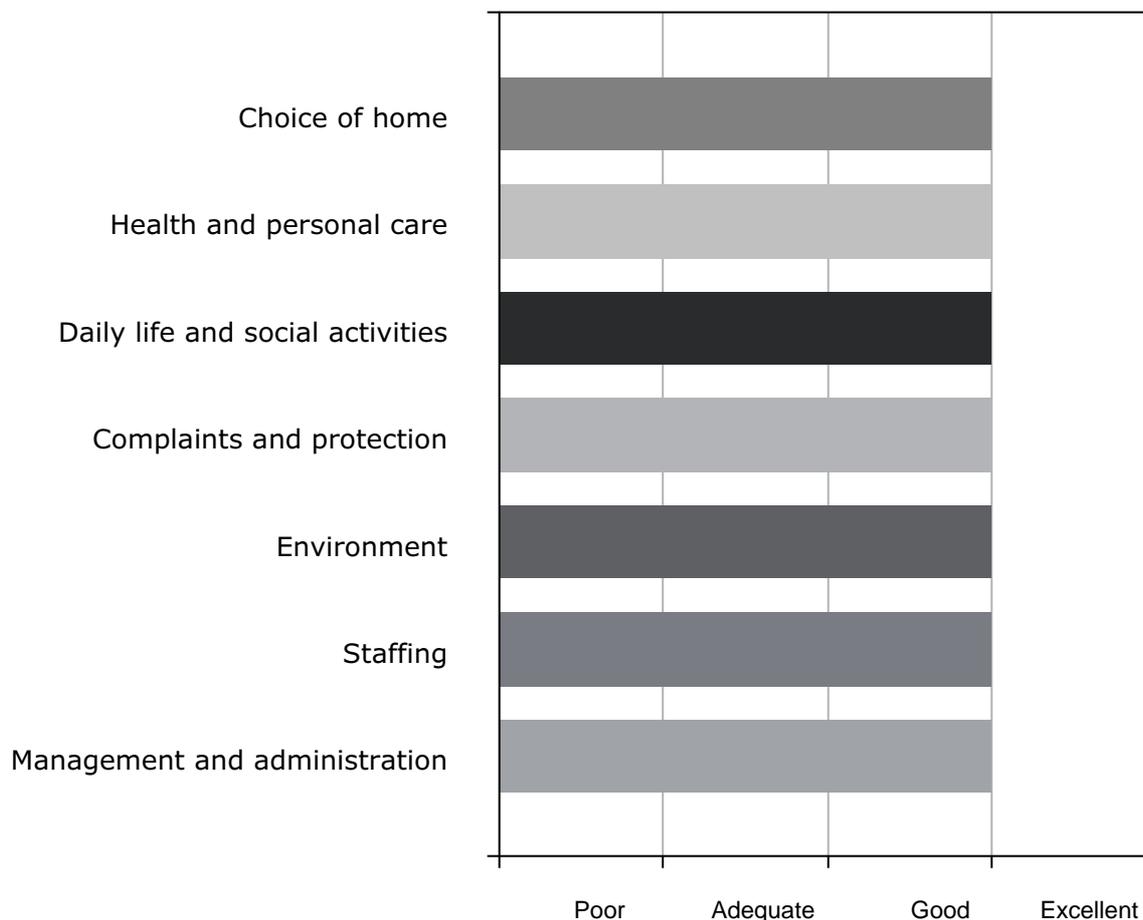
Summary

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 unannounced key inspection, which included a visit to the service, took place on the 29th July 2009. Much of the information gained was obtained from talking to residents and staff members. The views of residents were obtained on a variety of topics.

Three residents were case tracked. Case tracking gave the inspector an overall view of the specific care for the individual resident by checking the plans of care, other documentation and talking to residents and staff. Two staff members were questioned about the care of the residents case tracked.

Some of the views have been reported collectively with specific comments contained

within the body of the report.

Staff were directly and indirectly observed carrying out their tasks and interacting with residents. Paperwork examined included plans of care, assessment documentation, policies and procedures or documents relevant to each standard.

A tour of the building was conducted to check over the facilities.

The service provided us with a lot of information in a quality assurance document we sent them. This told us what the service provided, what they did well and how they thought they may improve.

What the care home does well:

People who used the service said, "it was the nearest one to my home and I also knew of it" and "my daughters helped me choose here". A relative said, "we choose here because she did not settle at the last home. We looked at a couple and chose here. She has settled in straight away". People who used the service made an informed choice to enter the home.

The good assessment of people who used the service ensured people were correctly placed.

Plans of care contained sufficient up to date information for staff to deliver effective care.

The good administration of medication helped provide people who used the service with a safe system.

People were able to access specialists to keep their treatments up to date.

People who used the service said, "they treat me privately when they give personal care" and "the staff treat me privately - and I get a nice bubble bath". Staff were observed to treat people who used the service privately to maintain their dignity.

People who used the service said visiting was unrestricted. One visitor said, "there are no problems with visiting". Visiting was encouraged for people to socialise with their friends and families.

People who used the service said, "the food is all right. We have a main meal and a sweet. They ask if you want anything else if you don't like it" and "the food is OK". Other people said the food was satisfactory and this met their nutritional needs.

People who used the service said, "If anything went wrong I could go to the manager. They tell you you can go to anyone" and "I would bring any complaints to my daughters". People felt able to voice their concerns to members of staff or their families.

Both people who were case tracked said they felt safe at the home. Policies and procedures for safeguarding adults kept people safe.

People who used the service said, "I have a nice room. It is a lovely room which has a view of the hills and fields. I have brought some things from home to make it my own" and "I have a nice room. I have some photographs and possessions to make the room my own". People who used the service were satisfied with the private space.

People who used the service said, "I watch television and like to socialise" and "It's nice here. I have been and I have been out today to the hospital day centre where I go from Monday to Friday". People followed the activities of their choice to maximise their contentment.

People who used the service said, "I am settled here and the staff are nice. I am as happy here as you can be" and "The staff are friendly and especially the manager and they care for me". The good attitude of staff made people who used the service happy with their care.

Staff said, "I have been here two years. I like it here. I love caring for the elderly it is always something I wanted to do. The managers are very supportive" and "I think we are doing well and the new matron is very supportive. We want to raise the standard. I have a good staff team. I like caring and I see my job as a vocation. My job is also to support matron as well. My role is also to audit and order medication. I am happy at this care home". The supportive management structure helped motivate staff.

One visitor said, "my mother is settled. This is down to the staff. Staff ask what her needs are and keep her up to date. They came and asked her what her needs were. She has settled well. She has a nice room and they put fresh flowers in her room on arrival. The care is excellent. Staff know what she wants. Staff even know what she likes to eat. The home do all they can to help". The visitor was very happy with the service her mother was receiving.

What has improved since the last inspection?

There was a training matrix available for the manager to decide what training staff needed.

Records for fluid balance were accurately maintained to ensure the care needs of people who used the service were met.

All records needed for inspection were available at the home to be available for inspection. This means that all records needed to justify a standard as met were available for perusal.

What they could do better:

There must be a suitably qualified and experienced person to manage the home to meet the current requirements of the CQC.

The quality assurance system must be developed to gain the views of those concerned with the home to demonstrate a responsible management structure.

The results of any questionnaires should be produced as a survey to provide the information to interested parties.

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 and the support they need. People who stay at the home only for intermediate care, have a clear assessment that includes a plan on what they hope for and want to achieve when they return home.

People can decide whether the care home can meet their support and accommodation needs. This is because they, or people close to them, have been able to visit the home and have got full, clear, accurate and up to date information about the home. 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 them 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.

The good assessment of residents ensured the needs of people who used the service could be met at this care home.

Evidence:

Three people who used the service were involved in the case tracking process. A member of staff had assessed the person prior to admission to ensure their needs could be met. Social services or health care organisations had also assessed each person as being suitably placed. People were able to have a trial visit or take a meal prior to admission to see if the home was suitable to their needs.

Health and personal care

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 health, personal and social care needs are met. The home has a plan of care that the person, or someone close to them, has been involved in making. If they 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. People's right to privacy is respected and the support they get from staff is given in a way that maintains their dignity.

If people are approaching the end of their life, the care home will respect their choices and help them 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.

Plans of care were detailed and up to date so staff could meet the needs of people who used the service. The good systems for the administration of medication helped protect the health and welfare of people who used the service. The professional attitude of staff helped maintain the dignity of people who used the service.

Evidence:

Three plans of care were examined during the case tracking process. Plans of care had been developed with people who used the service or their families to ensure their wishes had been taken into account. Plans of care had been reviewed on a regular basis to keep staff up to date with peoples needs. Daily notes were quite detailed and staff could follow each persons progress to help deliver effective care.

The plans of care showed people who used the service had access to specialists to keep their health care needs up to date.

Evidence:

Assessments to promote good health such as for nutrition and tissue viability had not been reviewed on a regular basis. This means people's health could be at risk.

Staff had access to the administration of medication policies and procedures to follow good practice. Staff also had access to medication publications and the local pharmacist for reference and advice. Staff trained to administer medication completed a record to show they had given medication without errors. There was secure storage to keep medication safe. There was a dedicated fridge to keep medications cool if indicated. There was a safe system for storing and recording controlled drugs to meet current requirements.

Staff were observed treating people with privacy and dignity. The care plans showed quite clearly that privacy and dignity are taken seriously and promoted independence. The manager said she had informal meetings and teaching sessions for behavioural issues to help staff handle difficult situations. People who used the service said they were treated privately and were comfortable with their personal care.

Daily life and social activities

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 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. They are as independent as they can be, lead their chosen lifestyle and have the opportunity to make the most of their abilities. People have nutritious and attractive meals and snacks, at a time and place to suit them.

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.

Leisure activities were provided for people who used the service to lead fulfilling lives. Visiting was unrestricted so that people who used the service were able to socialise with their families and friends. People who used the service were offered choices within the routines of the home to retain some independence.

Evidence:

There were planned activities for the week which were displayed so people who used the service could attend. The manager said they had movement and exercise activities, bingo, singsongs, games, entertainers, reminiscence therapy and pamper sessions. She said people read newspapers, watch television or listened to the radio. Some of the people who used the service socialised with each other. On the day of the inspection one person had gone out and others played dominoes. Some people who used the service were going on holiday to Blackpool. Activities were provided to keep people entertained if they wished.

Two visitors and people who used the service said visiting was unrestricted and staff were welcoming. Visits could be taken in communal areas or in private. Visiting was encouraged to promote the social well being of people who used the service.

Evidence:

Plans of care, examined during the case tracking process showed evidence that choice was recorded with people who used the service to maximise their contentment. Each person was assessed to their capabilities and this information was made available to assist staff to care for people. Choices, such as for getting up or going to bed and dress sense allowed people who used the service to retain some control over their lives.

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. Any concern is looked into and action taken to put things right. The care home safeguards people from abuse and neglect and takes action to follow up any allegations.

People's legal rights are protected, including being able to vote in elections.

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 had access to the complaints procedure to voice their concerns.

Evidence:

Each person was given a copy of the complaints procedure when they were admitted to the care home. There was also a copy in the hall for families or the general public to follow. There had not been any complaints made to the Care Quality Commission (CQC) since the last key inspection. The complaints procedure gave relevant timescales and the address of the Care Quality Commission to meet current requirements. The accessible complaints procedure gave people the opportunity to complain if they wished.

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, 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.

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 environment at the care home was suitable for the people who used the service. The domestic style of furniture, fixtures and fittings provided people who used the service with a homely atmosphere. Infection control policies and procedures helped protect the health and welfare of staff and people who used the service.

Evidence:

Outside space had been improved for people to use in good weather.

There was a planned maintenance program to keep the home in good order. There was a maintenance man to deal with emergency repairs to keep equipment working.

On the day of the inspection a tour of the building was conducted and all communal areas and a selection of bedrooms were visited. All areas of the home were clean, warm and fresh smelling which provided a pleasant atmosphere for people who used the service.

Communal areas were well furnished and equipped with domestic type furniture for the comfort of people who used the service.

There were toilets near to communal areas and disability aids to help the disabled such

Evidence:

as grab rails, stair lifts and assisted bathing. There is a plan to convert a shower room into a wet room to further improve facilities.

Bedrooms visited had been personalised and the number of double rooms has been reduced to two and the number of single rooms has increased with the new conversions having en-suite facilities to improve facilities for people who used the service.

Bedrooms contained good levels of equipment for each person's comfort. Each room had a lock and lockable facility for privacy.

Water temperatures to hot water outlets were regulated, radiators had a guard fitted and windows were restricted to help keep people safe.

Infection control policies and procedures were available for staff to follow safe practice. The laundry was well away from food preparation areas and had a dedicated member of staff to provide a better service. The equipment in the laundry met the criteria for hot washing and there were sluices and hand washing facilities situated around the home. Some staff had undertaken infection control training. The infection control systems helped contain any cross contamination of bacteria to keep people safe.

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 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 to care for them. Their needs are met and they are cared for by staff who get the relevant training and support from their managers.

There are no additional outcomes.

This is what people staying in this care home experience:

Judgement:

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

There were sufficient numbers of well trained staff to meet the needs of the people who used the service. The robust recruitment procedures helped protect people who used the service from possible harm. Induction and training was good and gave staff the knowledge to care for the people who used the service.

Evidence:

On the day of the inspection there were sufficient staff on duty to meet the needs of people who used the service and the off duty showed this appeared to be the norm. 70% of staff had obtained NVQ2 qualifications or better. Two staff files showed mandatory training such as for food hygiene, moving and handling, health and safety and fire safety ensured staff understood basic care. Training was ongoing to give staff the knowledge to care for people who used the service.

Two staff files were examined during the inspection. Staff files contained written references, criminal records checks, application forms, interview records and other documentation necessary for good recruitment. This meant only staff suitable for working in a care home were employed to look after people who used the service.

Two staff members said they had undertaken a recognised induction course and the completed documentation was retained within their files. Staff said they had

Evidence:

undertaken sufficient training to feel confident in the roles they performed.

Management and administration

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 led and managed appropriately. People control their own money and choose how they spend it. If they or someone close to them cannot manage their money, it is managed by the care home in their best interests. The environment is safe for people and staff because appropriate 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. The people staying at the home are safeguarded because it follows clear financial and accounting procedures, keeps records appropriately and ensures their staff understand the way things should be done. They get the right care because the staff are supervised and supported by their managers.

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.

Quality assurance systems need to be further developed to take account and react to the views of people who use the service. The good system used for handling the money of people who used the service helped prevent possible financial abuse. The good health and safety systems helped protect the health and welfare of staff and people who used the service.

Evidence:

There was no registered manager at the care home on the day of the inspection. There was a new manager and she said she was getting settled and would apply for the post at a later date. This home has been without a registered manager for some time and must register a suitably qualified person to meet current requirements.

There was a business plan to inform interested parties of future plans. Some questionnaires have been sent out but not to all interested parties. The new manager is aware of the quality assurance standards but on concentrating on care issues which

Evidence:

are more important. Management hold regular audits to see how the care service is performing. The manager holds meetings with staff and residents to gain their views. Quality assurance systems need to be developed to show management are responsive to the needs of people who use the service.

The manager said she only looked after the pocket money of some people who use the service. Each account is detailed separately and invoices and receipts obtained as proof of purchase. The system was examined and was safe for people who use the service.

There was a health and safety policy for staff to follow good practice. The manager was aware of current legislation to ensure compliance with the law. Staff had undertaken health and safety training to be aware of key issues. The gas and electrical installation and equipment had been maintained to ensure it worked correctly. Fire alarms had been tested and maintained for any emergency that occurred. All the other equipment at the home had been maintained in accordance to the manufacturers guidance. Health and safety policies, procedures and staff training helped keep people who used the service safe.

Are there any outstanding requirements from the last inspection?

Yes

No

Outstanding statutory requirements

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

No.	Standard	Regulation	Requirement	Timescale for action
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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	8	14	<p>The registered person must ensure that each persons needs are assessed on a regular basis.</p> <p>Risk assessments for tissue viability and nutrition had not been reviewed on a monthly basis.</p>	11/09/2009
2	31	8	<p>The registered person must employ a suitably qualified and experienced person to meet current legislative requirements.</p> <p>There has not been a registered manager for several months and this contravenes the regulations.</p>	11/11/2009

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	33	The registered person should continue with the plans to send out quality assurance surveys to people who use the

		service.
2	33	The registered person should produce a summary of the results of surveys and provide this to interested parties.

Helpline:

Telephone: 03000 616161 or

Textphone: or

Email: enquiries@cqc.org.uk

Web: www.cqc.org.uk

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