

Key inspection report

Care homes for older people

Name:	Sotwell Hill House
Address:	Sotwell Hill House Brightwell Cum Sotwell Wallingford Oxfordshire OX10 0PS

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:
Ruth Lough	2 0 0 7 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 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

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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:	Sotwell Hill House
Address:	Sotwell Hill House Brightwell Cum Sotwell Wallingford Oxfordshire OX10 0PS
Telephone number:	01491836685
Fax number:	01491838985
Email address:	sotwellhillhouseoffice@googlemail.com
Provider web address:	

Name of registered provider(s):	Estate of J P Butterfield
Name of registered manager (if applicable)	
Mrs Josephine Butterfield	
Type of registration:	care home
Number of places registered:	36

Conditions of registration:	
Category(ies) :	Number of places (if applicable):
	Under 65 Over 65
old age, not falling within any other category	0 36
Additional conditions:	
The maximum number of service users to be accommodated is 36	
The registered person may provide the following category of service only : Care home only (PC) to service users of the following gender: Either whose primary care needs on admission to the home are within the following category: Old age, not falling within any other category (OP)	
Date of last inspection	1 6 0 1 2 0 0 9
Brief description of the care home	
Sotwell Hill House is a late Victorian converted country house set in attractive and extensive grounds and provides accommodation for those older people who require day-to-day supervision and care. The home does not provide nursing care. Independence is encouraged and the layout of the grounds enables service users to take exercise in safety. Service users are able to visit the nearby town of	

Brief description of the care home

Wallingford and other outings are arranged on an occasional basis. Cost of the service provided by Sotwell Hill House is between £580 and £780 each week.

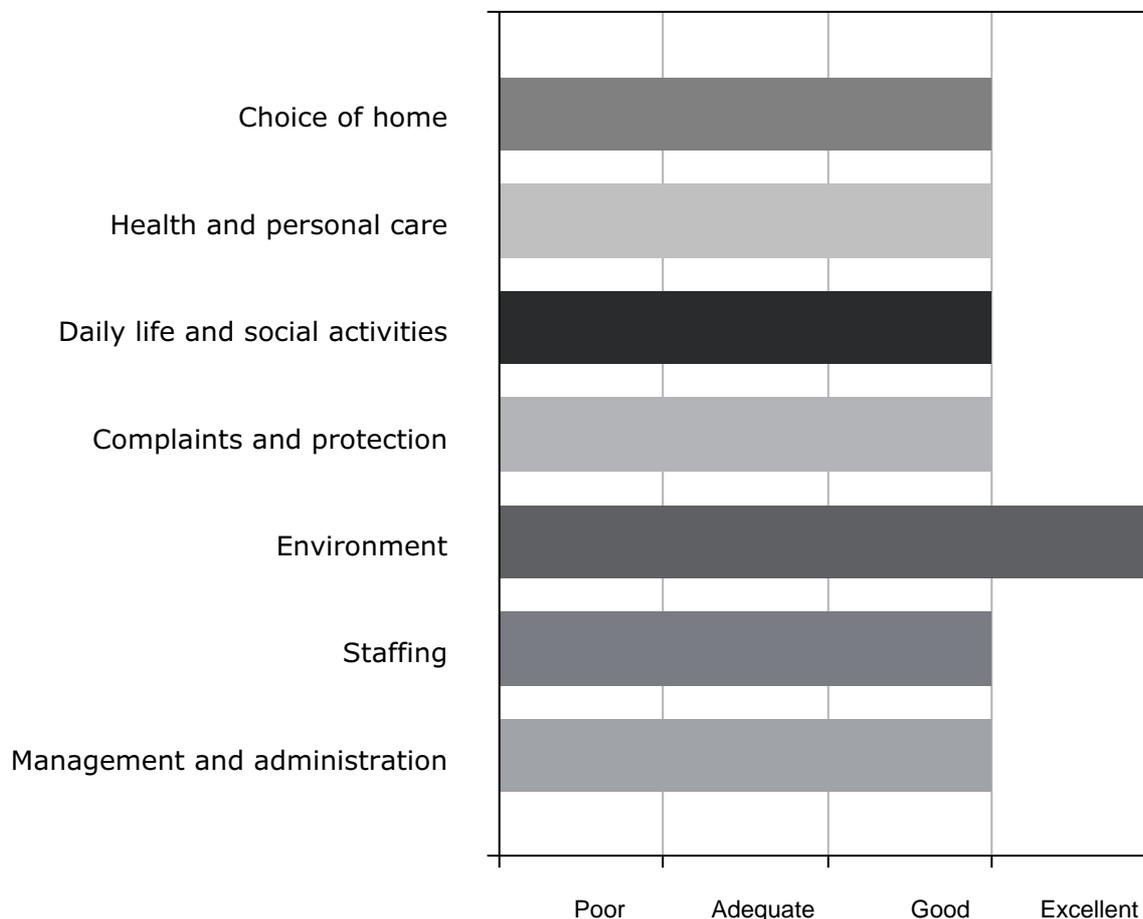
Summary

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 was an unannounced key inspection process generated from the POOR findings identified at the last assessment of the quality of the service by the commission in January 2009.

This inspection process included reviewing information provided by the service since the last inspection visit to the home six months ago.

The home was not required to complete an Annual Quality Assurance Assessment prior to this inspection assessment as they had submitted one within the last twelve months. An annual quality assurance assessment (AQAA) is a self assessment and a dataset that is filled in once a year by all providers whatever their quality rating. It is one of the main ways that we will get information from providers about how they are meeting outcomes for people using their service.

Members of the management team were present when we visited the service on 20th July 2009, between 10:10 and 16:50.

During the day the records for care planning, recruitment, and administration of the service were assessed. A small number of people using the service were involved with the inspection process. We met with five staff and four relatives, who were present in the home. We also used information obtained through the homes own quality assurance processes, a recent survey of residents and their families that was carried out in the last few weeks prior to the inspection visit.

From this visit it was found that the requirements and recommendations that were made to improve the service during the last inspection process have been met. A small number of good practice recommendations were given at the time of this inspection and can be found in the body of this report.

What the care home does well:

From information obtained through this inspection the people who use the service can be confident that they will obtain a good standard of care and support. They will also be provided with the opportunity to continue to with their daily lives as they wish. They can be certain that their concerns will be listened to and that they will be protected from possible abuse or harm by the systems in place.

The service provides a homely comfortable environment that is able to accommodate the needs of the people who live there, and has the necessary equipment to do so. Staff are friendly, welcoming, and supportive and have be provided with the training and knowledge to care for them well.

The service is run in the best interests of the people who live in the home. Information from the whole inspection process shows that the service is managed well and effectively irrespective of a registered manager not in post at the time of this inspection.

From comments made by residents and their relatives the service is valued very much.

What has improved since the last inspection?

A new in-depth assessment process is in place that means there is a holistic approach to understanding what individuals will need for care and support when they come to live in the home.

There has been investment in a new care planning tool that follows on from the assessment process that looks at all aspects of people's lives to ensure that their needs will be met when they come to live there. Greater detail of personal and family history is obtained for staff to have a better understanding of the person they support.

Information about the individual's interests and their choices of how they wish to conduct their daily life is in the process of being developed further.

The medication practices have improved and they now have safe processes in place.

Some of the communal and private spaces have been redecorated and had new carpets, making these bright and welcoming.

The practices for the control of infection and the storage of items such a cleaning materials that should be stored under Control of Substances Hazardous to Health Regulations (COSHH) 1988, has been improved.

What they could do better:

There are no significant areas that the home need to improve. They should ensure that the management structure of the service is formally implemented as soon as possible, such as the registration of the manager, as to ensure that they meet their responsibilities as a registered service.

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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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 people who use the service have their needs assessed thoroughly before they are offered a place in the home.

Evidence:

The Statement of Purpose and Service User Guide were reviewed to see what information about the home prospective residents are given to make an informed choice to use the service. From what could be seen some changes have been implemented and from what we were informed further changes will be carried out to give greater detail about what is on offer. Amendments have been made to reflect the new organisational structure and the information about the staffing numbers, their skills and qualifications.

There are some areas they will need to continue to amend and update as necessary, that will ensure that residents are given sufficient information that is current.

Evidence:

The process for the assessment of individuals needs was reviewed. This was to see what is carried out prior to an agreement to offer a place in the home to ensure that they will be able to provide the care and support to the person concerned. Records for two residents who had recently been admitted to the home were reviewed to see what they actually carry out.

The records show that there is a good process carried out with detailed information taken about the person's health and medical conditions, mobility, personal care and support they require. Since the last inspection process they have expanded the range of information they seek including identifying their social interests and obtaining a brief outline of their preferred day. Additional information is obtained from any referral from a social or health care professional including any discharge detail if they have come from a recent hospital stay. The records also support that the person concerned and their relatives are involved with the assessment process.

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.

That individual's care is planned for and meets their needs and the medication practices ensure that they are protected.

Evidence:

The residents involved in the inspection confirmed that they felt that their needs were being met and that they had the care and assistance they required. This was equally supported by the information given by relatives present during the day.

During the last inspection process it was identified that they did not have sufficiently detailed care documents in place that give staff good instruction of how to provide support. A requirement was made for them to improve these to ensure that residents have a consistent level of care that will meet all their needs. Since then the commission has been provided with information that they have reviewed the record keeping for care planning and have implemented changes to improve them. This could be clearly seen by the implementation of a new care planning system that is based on an electronic data base. This has only been in place during the last seven weeks and not all residents records have been transferred to this system. A sample of three

Evidence:

records were reviewed.

The new documentation shows that the improved information gathering before admission has enhanced the depth of knowledge about the person. The care planning tool enables staff to think about the holistic care of the person and gives them instruction about how best to meet their needs. The documents are personalised and show the individual's wishes of how they like to live, and their choices of how their support is to be provided.

Staff are still in the process of learning to use the new care planning process and tools but already the increased depth of information and instruction has ensured that staff are observing and using this effectively to support individuals. This could be seen in the much improved daily records where they are noting clearly the outcomes for people, their experiences, and general well being.

The care plans are divided into various topics and medical and health needs are referred to throughout the information as to where they may affect the task or activity needed to be achieved. This was particularly evident in the areas of personal care, mobility and mental health.

Risks to individuals and others are identified in the area of need that is relevant to the person concerned and staff are supported with a more visual aid to indicate the degree of risk. This will be helpful as a reminder when they look to follow the planned care.

Each person has a diary of events that shows the visits, consultations or treatment from any other health or care professionals.

A comment from a relative indicated that the staff in the home were quick to seek medical assistance and treatment for residents and kept them informed of changes in the well being of the person they care for.

During the last inspection process it was seen that the home did not have robust safe medication practices. The staff were secondary dispensing medications before distributing them around the home, which could lead to errors and omissions. Also they had no formalised risk assessments in place for those residents who manage their own medications to ensure that individuals were able to do this safely, protecting themselves and others in the process. A requirement was made to improve the medication practices in accordance to 'The Handling of Medicines in Social Care (Royal Pharmaceutical Society of Great Britain)' guidance.

Evidence:

We were informed that this had been carried out and during this inspection looked at what they had implemented to improve practices. From what could be found they have not only met the requirement made that have looked at implementing further improvements to enhance the safety and wellbeing of residents.

The policy and procedure for medications have been reviewed and provides the necessary information for staff to follow. Senior staff had attended a more in depth training to manage medications in the home and monitor staff practices. Carers have been participating in distance learning to update their skills.

Improvements have been made in the facilities for safe medication storage and administration. A new medication trolley has been purchased and is kept securely and is now used effectively. The information about individuals medication needs and MAR(Medication Administration Records) are detailed, completed well and include a photograph of the person concerned as to ensure staff give the medication to the right person. A record and agreement by the GP for any homely remedies is also included.

Sample signatures of staff are kept with the medication records as for audit purposes. A hard bound book, which is in accordance to legislative requirements, is now in place for any administration of medications that should be kept under the Misuse of Drugs(Safe Custody) Regulations 1973.

From information given there were three residents who currently look after their own medication and the care planning records for these individuals supported that risk assessments are carried out and reviewed to ensure that they are still capable to manage this themselves.

They were advised to keep copies of the current risk assessments with the MAR(Medication Administration Records) as to assist staff to observe and monitor that residents are continuing to manage their own medications on a daily basis. Staff are supported to have a good understanding of individual's medications and the reason why they have been prescribed by the detailed information in their care records.

The new care records supported that staff are now asking, where able, about personal choices for how the individual wishes to be cared for at the end of their lives. For those records reviewed, this had been declined by the person concerned to be discussed and staff were directed to a family member for those decisions.

A recently bereaved relative did express their gratitude in regard to the care and

Evidence:

support provided by the staff during the last weeks of her parent's life. It was apparent that staff had supported the individual to remain in the home as they wished with the assistance of the local medical team. The experience, although difficult, had been managed well and sensitively by all the staff.

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.

The people who live in the home are given the opportunity to exercise choice about how they wish to live and are able to maintain their activities and interests where able. The meals meet individual nutritional needs and are equally enjoyed and form an important part of their day.

Evidence:

The people involved in the inspection process did confirm that there was a programme of entertainment and activities in place although they may not meet all the individual's needs and choices. However, they did point out that the staff did encourage them to join in and they were equally supportive and respectful to their choices of not participating and privacy. What they also emphasised was that they felt they were able to do what they wished.

Individual's daily routines are now clearly outlined in the care plans for staff to follow and improved information about interests, hobbies and preferences is also recorded. There is also a personal history included to give staff a good picture of the person's previous life, their families and any other significant information about them. This all assists staff to provide the support the person may need.

Evidence:

As yet they have not developed an individual activity plan to meet the specific needs that they may need but the daily records support that staff are observing their participation and enjoyment of any events going on in the home.

Specific religious observance an individual may have is acknowledge and supported by staff, this could be seen with particular care that is taken for some individuals in regard to meal times.

Information about activities or events going on in the home is provided on notice boards around the building. The specific events of the day are put on display in a central area where most resident will pass as a reminder of what is happening. Additional information is put in the monthly 'Newsround' along with a quiz and updates on what is going on in the home and grounds. Of particular interest at the moment is the progress of gosling's that are present by the pond in the grounds. For those less able to visit the pond a video diary has been made to keep them up to date. Magazines, books and puzzles are available for residents to use. A puzzle is always out for 'passers by' in the hall way of the home for them complete.

In addition to the regular routine activities such as the visiting hairdresser, chiropodist, library, Holy Communion, and the local catholic priest there are a number of planned social events for residents to enjoy. The most recent was a Strawberry Tea, which was positively enjoyed by them, their families and staff. Three letters complimenting staff about the event were on display in the home. Additional effort has been made to arrange visits around the local area, a particular favourite is visiting Benson's waterfront and this was in the process of being rearranged as had to be cancelled due to poor weather the week previously.

The families of residents are encouraged to participate in events in the home. They are usually made welcome to join for meal times and supported to celebrate significant events together both of which are valued greatly by the residents and relatives.

In the recent survey carried out by the home relatives and residents have made comments about the activities provided. One person identified that they thought the activities were poor another put as an improvement would be to employ an activities organiser. However, these opinions were not supported by the other participants.

The senior staff were able to inform that they had already identified activities as an area they wish to improve. They have already started the process to recruit an activities organiser and have recently acquired a greater variety of new games for

Evidence:

residents to use. A planned addition is the provision of a touch screen computer with internet access for residents to either learn new skills or communicate with their family and friends.

The provision of meals and menu planning in the home is based on the identified needs of the residents, listening to their preferences and any seasonal variances to fruits and vegetables available. The chef is given information obtained by the care staff about any likes or dislikes individuals may have and will take the opportunity to consult with them whenever possible.

The service continues to offer cooked breakfast three days per week, a variety of main meals and a selection of sweets most of which are traditional English fare. Residents are asked what they would like to eat the day previously for the main meal and the chef was able to inform that they are considering a more formal arrangement for the evening meal to enable better preparation.

In addition the senior staff and the chef have recognised that the employment of an evening chef would relieve the pressure on care staff to be away from providing the personal care and support to residents. Also it would ensure that food can be freshly prepared and staff can offer a better variety to residents. This is currently underway and they hope this will then enable the senior chef to have the extra time for special events and activities like the Strawberry Tea which was much appreciated by residents.

The chef stated that they were continually looking at ways to improve and recent Sunday Carvery was enjoyed by everyone and they are planning to provide this more frequently in the future.

A main meal was observed and it was clear that the majority of the current residents participate and were enjoying what they were provided with. From information given by staff there is only a small number of people who remain in their rooms at meal times and only one person needs extra support to eat their food. Staff take care to present the dining room well and inviting for people to use. Tables are decorated with napkins, flowers and condiments. Staff also put place names on the tables for people to sit and take care to rotate them round on a daily basis which encourages people to talk to others. This could be seen by the quiet chatting going on between residents throughout the meal. For those who particularly do not wish to sit with others this is also accommodated.

The people who participated in the meal appeared to appreciate this and stated it was

Evidence:

an enjoyable part of the day when they socialised together even if they did not participate in any planned activities.

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.

The people who use the service can be confident that their concerns will be listened to and acted upon. The staff have a good understanding of safeguarding the people they support from possible abuse or harm.

Evidence:

The residents and relatives that were involved with the inspection process confirmed that they were confident that their concerns or worries were listened to and acted upon. They also gave information that all the staff are friendly and approachable.

The complaints procedure that is put on display in various parts of the home does give the current necessary information.

From information given there have been no formal recorded complaints since the last inspection in January. However, from reading the results from the services last quality assurance survey carried out in the last few weeks one relative had expressed a concern. The relative did also add positively that it was dealt with swiftly and actions put in place. The staff are obviously responding to any concerns well but they are recommended to formally record any minor comments, concerns or complaints for quality assurance purposes.

During the last inspection process concerns were raised that staff had not had sufficient training in protection or safeguarding adults from possible abuse or harm.

Evidence:

Staff appeared not to have a good understanding of local inter-agency procedure and the service did not have the necessary information available to staff in the home.

Since then the management team has ensured that senior staff have attended the appropriate level of training to be able to manage and respond to any concerns. Just under 50% of the care staff have had retraining. The necessary information is available to staff to access in the main office of the home. Contact information is put on display should they wish to seek further advice from the local authority.

The staff involved in the inspection process could confirm what they must do if they are concerned and where they could find the information they need should they need to refer to it.

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

The home continues to provide a comfortable spacious well maintained environment for people to live in.

Evidence:

The home offers residents a comfortable, pleasant environment that is spacious and well kept. The main communal areas and the bedrooms in the original mansion house retain many of the period features associated with a late Victorian mansion house. The newer extension to the rear of the home offers equally good sized bedrooms with en suites and the addition of the large conservatory to the side of the building offers residents plenty of communal space to use.

From what could be seen there continues to be a rolling programme of refurbishment and redecoration. Since the last inspection a small number of bedrooms have been redecorated as and when they become vacant. Further improvements have been made to replace carpets in communal areas and the main office.

An additional downstairs care office has been created for staff to update the care records without interruption from the activities going on in the busy main office. Upstairs a room has been created for some of the administration tasks to be carried out, small meetings with staff or relatives, and training sessions that are away from the activities on the ground floor.

Evidence:

Externally the driveway in front of the home has recently had tarmac put down and now ensures that in wet weather the approach to the home is less hazardous.

Further plans are being developed to upgrade the pathways for residents to use a little more safely and to create a possible raised garden area for them to have the opportunity to have some practical activities outside.

A review of the laundry area has been carried out and changes have been implemented to ensure security in this area by fitting locks to the doors. Additionally, they are now utilising appropriate storage facilities for sorting and storing soiled linen until they are washed therefore reducing the opportunity for cross infection.

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.

The needs of the people living in the home are met by the numbers and skill mix of the staff employed.

Evidence:

Information provided showed that there remains a consistent team of staff employed in the home. The new key worker system appears to be working well.

A review of the staffing levels in the home has been carried out and they have increased the number of care staff to five in the mornings and in the afternoons as to ensure that people receive the support they need in accordance to their wishes. Additional plans include the employment of two senior carers to lead shifts when the care manager is not in the home. Also formalising the handover period between shifts is planned to ensure that a dedicated time is in place to update the next team of carers with the necessary information about the residents, before they start work.

The staff rota was reviewed as part of the assessment of the staffing levels in the home. Those seen did not have all the necessary information and senior staff were recommended to amend the rotas to show the designated roles of individuals, the times of shifts, and the full names of the staff concerned. This then would ensure that the information is kept together for audit and legal requirements should it be required.

Evidence:

A small team of domestic staff are employed every morning to keep the home clean and fresh. From what could be observed during the day the home is kept to a high standard, which from comments made by residents and relatives, is appreciated greatly.

The proposals for additional new staff will give the care staff greater time for individualised care and support to the residents.

The member of care staff who takes the lead in monitoring and arranging training has now reviewed the training needs of the staff team. The gaps in staff training for the core topics for safe working practices have been identified and there is a continual programme of supporting staff to achieve NVQ's. At least 50% of the care staff have either obtained or are in the process of completing at least an NVQ 2. Two members of staff have achieved an NVQ 3, one is in the process of completion.

Training completed in the last six months has included medication, Protection of Vulnerable Adults, Infection Control, Control of Substances Hazardous to Health Regulations (COSHH) 1988, Manual Handling, Health and Safety, and Food Hygiene. Some staff have had training in regard to Falls and Care of Aging Skin in the last few months.

We were informed that there has been no new care staff employed in the home since the last inspection process. The management team have looked at the recruitment practices they carry out and have implemented a new recruitment policy and procedure to assist them with a thorough process that will protect the people living in the home. A sample of the new documentation and process was reviewed and from what could be seen it should ensure that the necessary information is obtained.

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.

The service is run well and in the best interests of the people living there.

Evidence:

During the last six months the home has had significant changes in the management of the service. The Provider/ Registered Manager unexpectedly died in March which left the family run service in a difficult situation. The management team have ensured that this has not affected the people who use the service, who had only positive comments to give about the way the service has been managed since then.

Great steps have been made throughout this period to meet the requirements made during the last inspection process. Not only have they met the requirements it could be seen that they have strived to improve the experiences of the people they support and other areas of how the service is provided.

The Care Manager has applied to register with the commission as Registered Manager.

Evidence:

As previously identified they have formal processes for seeking resident's opinion of the services provided. The most recent survey has just been carried out and is waiting for the full results to be collated and given back to residents and their relatives.

Other processes are the formal residents meetings and any individual reviews of care that are carried out.

In addition there is a monthly newsletter that keeps residents and others informed any changes in the service or significant events that they need to be informed about.

In regard to how the service is managed and administered there are audit checks carried out by external providers on medication administration and fire safety.

As found at previous inspections, the home does not take responsibilities for personal monies on resident's behalf. If an expense is incurred, such as hairdressing, chiropody, or newspapers, they invoice the respective resident or their representative.

During the last inspection process some concerns arose about some of the safe working practices carried out in the home. This was in particular to the in the management of Control of Substances Hazardous to Health Regulations (COSHH), fire safety (door guards) and control of infection practices. Since then they have provided the commission with information that they have rectified the concerns. They have made a secure facility for the storage of any Control of Substances Hazardous to Health Regulations (COSHH) 1988 items and provided the necessary information to staff about handling these items safely. They have made sure that all staff including those working in the domestic and catering departments have attended training for this.

They have sought advice from a fire safety specialist and have acted upon their advice and implemented changes to improve safety and have, as previously identified put better control of infection measures in place and made sure that training has been given to staff.

The sample of the records for safe working practices and routine maintenance also supported that suitable actions have been taken to rectify these concerns.

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

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