

Key inspection report

Care homes for older people

| | |
|-----------------|--|
| Name: | Ashley House |
| Address: | Ashley House Christmas Hill Kings Road Shalford Nr Guildford Surrey GU4 8HN |

| | |
|--|------------------------------|
| The quality rating for this care home is: | three star excellent service |
|--|------------------------------|

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: |
| Mary Williamson | 1 5 0 4 2 0 1 0 |

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

The mission of the Care Quality Commission is to make care better for people by:

- 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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|---------------------|---|
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| Internet address | www.cqc.org.uk |

Information about the care home

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|-----------------------|--|
| Name of care home: | Ashley House |
| Address: | Ashley House Christmas Hill Kings Road Shalford Nr Guildford Surrey GU4 8HN |
| Telephone number: | 01483561406 |
| Fax number: | 01483539001 |
| Email address: | christine@ashley-house.myzen.co.uk |
| Provider web address: | |

| | |
|--|--------------------------|
| Name of registered provider(s): | Mrs Penelope May McKenna |
| Name of registered manager (if applicable) | |
| Mrs Christine Mary Back | |
| Type of registration: | care home |
| Number of places registered: | 29 |

| Conditions of registration: | | |
|--|-----------------------------------|---------|
| Category(ies) : | Number of places (if applicable): | |
| | Under 65 | Over 65 |
| dementia | 29 | 0 |
| old age, not falling within any other category | 0 | 29 |
| physical disability | 29 | 0 |
| Additional conditions: | | |
| The maximum number of service users who can be accommodated is: 29 | | |
| The registered person may provide the following category/ies 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 categories: Old age, not falling within any other category - OP Dementia - DE Physical disability - PD | | |
| Date of last inspection | | |
| Brief description of the care home | | |
| Ashley House is a large detached property situated in a rural setting on the outskirts of Guildford. The home is set in spacious well maintained grounds that are accessible to | | |

Brief description of the care home

residents. The bedrooms situated on the ground floor have access to the garden. The local wildlife use the grounds including foxes, badgers and ducks. The home consists of ground floor and first floor accommodation. The majority of bedrooms are of a good size and have en-suite toilets and showers.

Car parking is available at the front of the premises.

Fees are in the range of £450 to £830 per week.

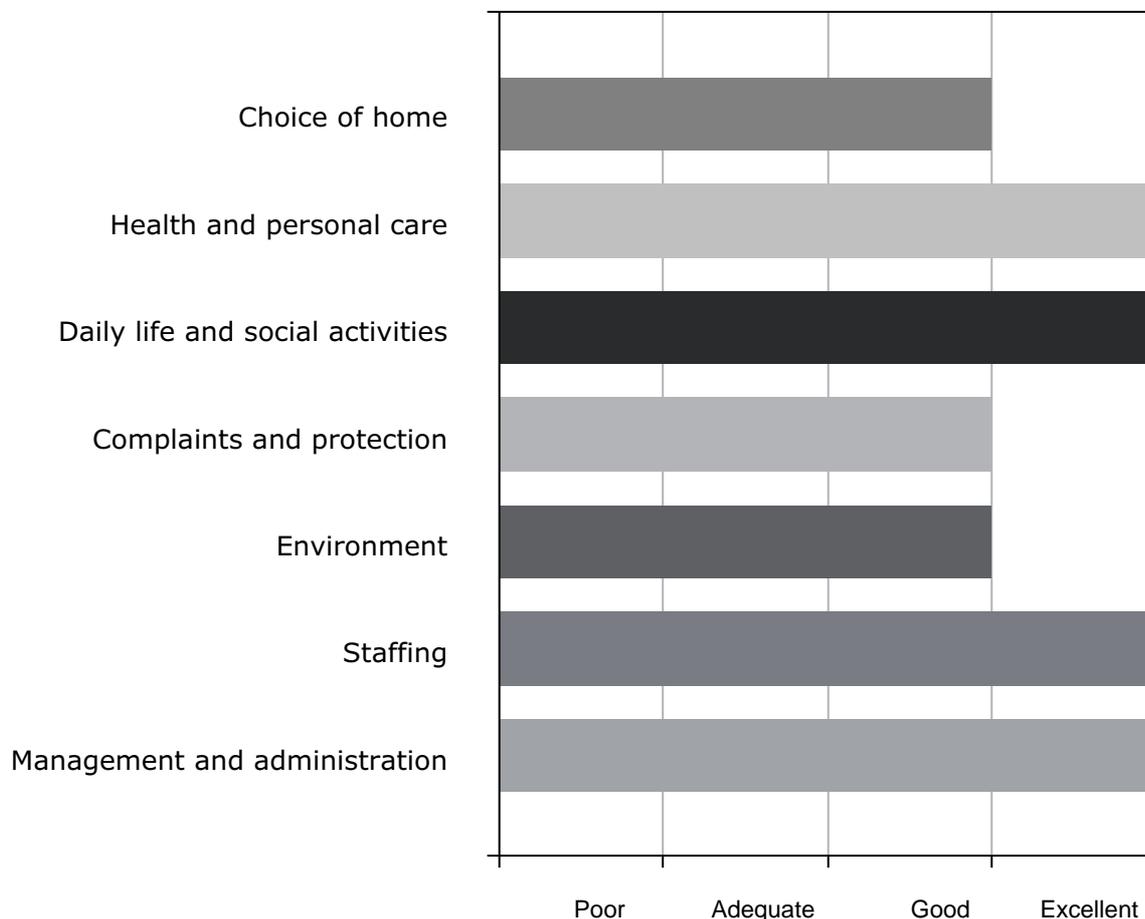
Summary

This is an overview of what we found during the inspection.

The quality rating for this care home is:

three star excellent service

Our judgement for each outcome:



How we did our inspection:

The quality rating for this home is THREE star. This means that people using this service experience EXCELLENT quality outcomes. The home has retained this rating from the previous inspection.

This was a key inspection and was unannounced. The inspection was undertaken by Mary Williamson Regulation Inspector over five and a half hours. Both providers and the Registered Manager Christine Back were present during the inspection.

The providers showed the inspector around the home and introduced her to residents and staff.

It was possible to meet and talk with most of the residents, who were able to express their views and experiences about living in Ashley House.

The providers completed an Annual Quality Assurance Assessment (AQAA), that provided us with the information required and has been used as part of this inspection process.

Staff on duty spoke about working in the home and the training they receive. It was also possible to talk with the a visiting pharmacist who was undertaking an audit of medication.

Records relating to the care of the residents and the management of the home were examined, and included care plans, medication records, menus, activity programmes, staff employment and training profiles, and health and safety arrangements.

Eleven resident survey forms, fifteen relative/advocate survey forms and nine staff survey forms were returned to The Care Quality Commission for information and have been used as part of the inspection process.

What the care home does well:

The home provides an excellent standard of care and support for the residents living there. The admission procedure ensures that only residents whose needs can be fully met are admitted to the home. This is supported by detailed needs assessments. A relative said "I looked at several homes before I suggested this one to Mum". Another relative said "This is one of the the best homes in the area".

Care plans are drawn up with the input from residents and are detailed and informative. Staff are aware of all residents needs and a resident said "I get very good care here by friendly staff, a relative said " The home has improved my fathers health by the excellent care provided", and a staff member commented "I am very happy working here".

The activity arrangements in place reflect the needs of the residents. Activities normally take place in the afternoons and are facilitated by the staff. A resident stated "I like to take part in in the quiz", another said "I love to sit in the beautiful garden", and another resident said " I have the choice to spend time alone or in company and I like that".

The standard of catering and food management is excellent. This was supported by all the positive comments received in resident and relatives surveys and during conversation with residents on the day of the inspection. " We get wonderful food here", "I think I am in a five star hotel no a care home", "I look forward to lunch every day. Meal times are a positive experience and are served in a well appointed dining room in a relaxed and comfortable environment.

There is a well established staff team employed in the home with the skills and competence to meet residents needs. The turnover of staff is very low with the most recent member recruited being three years ago. A resident said "I am very lucky to have such staff to care for me", another said "the staff are so kind and friendly". Staff comments included "I am very happy working here", and "I wouldn't have stayed if I wasn't satisfied".

The home is very well managed. Both providers provide hands on support daily and there is also a registered manager responsible for the day to day management of the home. A staff survey said "our manager is always there to help, and another said "the home is extremely well managed".

The complaints procedure is clear and accessible and included in the contract of occupancy. This together with the homes safeguarding procedures protect residents. During conversation a resident said "I never have to complain and if I had any problems I would tell Chris or Penny".

The health, safety and welfare of the residents and the staff are observed and promoted.

What has improved since the last inspection?

At the last inspection a recommendation was made that a member of staff attend a

Falls Clinic as part of managing the falls recorded in the home. This has now been undertaken and the knowledge gained has been cascaded throughout the staff team.

There is an ongoing programme of refurbishment in pace and the lounge and conservatory has been redecorated, and new carpet and curtains provided. A resident sitting in the conservatory said "it doesn't matter what time of the year I sit here I still enjoy spectacular views". Other work undertaken includes refitting the kitchen, undertaking work on the drainage system, and tree work in the garden.

The statement of purpose and service user guide has been reviewed, and staff have had training in the Mental Health Capacity Act.

What they could do better:

There are no requirements or recommendations as an outcome of this inspection.

The management team said in the Annual Quality Assurance Assessment (AQAA) that they continue to recognise and appreciate the loyalty and commitment of their long standing experienced team.

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.

There is sufficient information available to prospective residents to help them make a decision about living in the home.

Good pre admission needs assessments ensure that only residents whose needs can be met will be admitted to the home.

Individual contracts of occupancy are clear and informative.

Evidence:

The home has a statement of purpose and service user guide in place. This is available to all prospective residents and their relatives prior to being admitted to the home, providing them with sufficient information in order to make a choice about living there. One resident said " I looked at several homes before I choose this one". Another resident stated "my draughted found this on the INTERNET, and I was very impressed when I came to visit".

All prospective residents have a full needs assessment undertaken prior to being

Evidence:

admitted to the home. This is undertaken by the home manager who is skilled in this task and uses a format individual to Ashley House. The needs assessments sampled were detailed and provided appropriate information to support the admission process. A trial period is offered to ensure the suitability of the home to meet individual needs.

Contracts of occupancy are in place. These outline the accommodation offered, the care provided, and the method and frequency of fees payable.

Intermediate care is not provided in this home.

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

Residents health and personal care needs are outlined in individual care plans that are maintained to an excellent standard.

Sound arrangements in place ensure that residents health care needs are being met. The medication policy in place protects the residents living in the home.

Privacy and dignity are promoted and residents feel that they are treated with respect.

Evidence:

Individual care plans are in place. These are written on information gathered from the needs assessment, input from residents and their relatives, and additional information obtained from other health care professionals. The care plans sampled were person centred focused and outlined how health, emotional and social care needs were going to be met. In addition to this they also included risk assessments for falls, nutritional assessments, and skin care analysis. The manager demonstrated how care plans are reviewed monthly and the new formats being considered to improve the current excellent systems in place.

Sound arrangements are in place to meet the residents health care needs. All

Evidence:

residents are registered with a local GP who visits the home every Friday or more frequently if required to do so. A resident stated "my doctor will visit me in my room, and I like that". Another resident said "my daughter arranged to bring me to the doctors surgery". The provider stated that the home experiences an excellent service from the district nurses who visit the home on a regular basis. Dental care, chiropody treatment and eye care are arranged according to individual needs and choice, either in the home or at designated locations.

There is a medication administration policy in place. All staff undertake medication awareness and safety training prior to undertaking medication administration. During the inspection it was possible to speak with the pharmacist responsible for the provision of medication who was undertaking an inspection audit in the home. It was reassuring to hear that all medication is administered according to policy, that medication recording charts are maintained to a good standard, and that medication is stored correctly. Risk assessments are in place for residents who choose to self medicate some medication.

From observation it was concluded that residents privacy and dignity is observed and respected at all times. Staff were seen interacting with residents in a polite and professional manner. One resident said "the staff are so kind and polite", and another said "it is nice to have visitors in private". Several resident and relative surveys returned were very complimentary of the respect and dignity shown to residents. Keys are provided for bedroom doors and all staff were observed to knock prior to entering residents rooms.

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

The activity arrangements in place are excellent and meet the individual and collective needs of the residents.

The home routine promotes autonomy and diversity enabling residents to exercise choice and control over their lives.

The standard of catering is excellent and offers residents a wholesome, and varied diet.

Evidence:

Residents interests and hobbies are included in individual care plans. There is a notice of weekly activities and events posted on the notice board for information. The home does not employ an activities coordinator and the manager takes responsibility for organising all leisure activities. A resident stated that "I join in everything as it helps to pass the day", another "some things I enjoy but also like my own company".

Activities include arm chair exercise, quiz, puzzles, music, outside entertainers, aromatherapy, and individual one to one time. Several residents like to have a daily newspaper, and some like to listen to the radio in their rooms. The home was busy with residents going out for walks, sitting in the delightful gardens, interacting in groups over a cup of coffee, and arranging to go out with friends and family for lunch. A quiz was taking place during the afternoon organised by a member of staff.

Evidence:

Community participation is encouraged and some residents were going to attend a forthcoming spring lunch in the village which is located close to the home. They also attend concerts and other events there. Local schools visit and the provided stated that they can offer work experience.

Relatives and friends can visit the home at any reasonable time and are encouraged to take part in the care planning process and attend home events. The home was preparing for a party the following day to celebrate a resident's 102nd birthday with family friends and The Mayor.

Spiritual needs are observed and a church service and Holy Communion is facilitated in the home on a regular basis. Various clergy visit the home by arrangement.

Residents are given the opportunity to make choices regarding all aspects of their daily lives. They can choose when to get up and go to bed, when they wish to bath or shower, what clothes to wear, and what activities they wish to take part in. They can also choose to spend time alone or in the company of their choice, and to take meals in the dining room or in their own room. They can air their views at residents meetings and suggestions and views are acted on by the management.

The menus are planned by the cook over a four week cycle and are seasonal. The food offered is fresh, nutritious and wholesome. Residents meet the cook regularly and their likes, dislikes and preferences discussed. Special needs are catered for.

Residents were looking forward to the buffet party arranged for the following day. One resident said "the food is lovely here", and another said "we are very well catered for here". The dining room provided for a relaxed and social atmosphere during lunch and staff were observed offering sensitive support for people who required help or support with feeding.

Food hygiene is observed and all staff have a food hygiene certificate.

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 complaints procedure and the safeguarding procedures in place protect the residents living in Ashley House.

Evidence:

The home has a complaints procedure in place. This is included in the contract of occupancy and a copy is also displayed on the homes notice board. Residents said they were aware of this document. Comments made included "I would tell the manager if there was anything wrong", " I never have reason to complain". One complaint was recorded since the last inspection that was resolved using the homes procedure.

There is a safeguarding vulnerable adults procedure in place and staff confirmed that they receive training in this procedure and would know what to do if they felt an incident of abuse had occurred.

There is also a copy of Surrey's Multi Agencies policies and procedures on Safeguarding Vulnerable Adults in place. The manager has attended external local authority training in these procedures and has cascaded this throughout the staff team.

There was one referral to The Surrey Safeguarding Team under these procedures since the last inspection, and this has now been fully resolved.

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 home is suitable for its stated purpose. The residents live in a comfortable, homely, and well-maintained environment, which meets their collective and individual needs.

The standard of cleanliness is good and procedures are in place to minimise the spread of infection.

Evidence:

The inspector was shown around the home by one of the providers and introduced to the residents and the staff. It was possible to talk with the residents about living in the home and to the staff about working there. The home is comfortable, homely, and decorated to a good standard. The providers have an ongoing programme of refurbishment. The large front lounge and conservatory has recently been redecorated and a new carpet and drapes provided. The second lounge is also well decorated and equipped with a large flat screen television for resident's enjoyment. The dining room is well appointed and provides a relaxing atmosphere for dining. All communal areas of the home overlook wonderful gardens that are maintained to an excellent standard.

Bedrooms are single occupancy with en-suite facilities. Residents can bring items of furniture and personal possessions with them on admission to help personalise their rooms and make it feel like home. A resident said "I could no longer stay in my own home so I brought some of my home with me", another resident said "I love my room

Evidence:

and I can see what used to be my grandmothers cottage from my window".

Toilets and bathrooms have been adapted to meet the mobility needs of the residents. There is a lift in place to access the first floor and a stair lift to access rooms on the next landing. A call bell system is in place for residents to call for assistance in all areas of the home.

The standard of cleanliness throughout the home is good presenting a clean, airy, and odour free atmosphere.

The laundry is well equipped and meets the needs of the home. Staff undertake the laundry duties.

There is an infection control policy in place and all staff undertake training in this policy. Protective clothing and gloves are provided for staff, and they were also observed to wash their hands frequently. Arrangements are in place for the collection of clinical waste.

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

Staffing arrangements are well organised ensuring that residents needs are being met by a well established team of staff.

Staff training and development is ongoing providing a competent and skilled staff team to care for the residents.

The recruitment and vetting of staff is excellent promoting the safety and welfare of the residents.

Evidence:

The staff duty rota was seen and staffing arrangements for the home discussed with the manager and the provider. Residents are supported by a well established team of staff with considerable experience between them. One staff member said " I have worked here for eighteen years", and another said she had been employed for fifteen years. The staff on duty were professional and competent in their approach, and residents said they felt well cared for. One resident said "the staff are lovely and caring", another said " the staff here are like one big happy family". There were several comments made by relatives in surveys received by The Care Quality Commission regarding the efficiency of the staff and the good quality care they provide. The home also employs an experienced cook, an assistant cook, and a housekeeping team. Maintenance is managed and carried out by the provider with support from outside contractors when required.

Evidence:

Staff training is in place and all staff have an individual training and development file. Induction training is provided in line with Skills for Care Standards Framework. NVQ is ongoing at various levels with some staff having achieved NVQ level 2, others achieved NVQ level 3, and one staff member has an NVQ level 4. The manager and provider stated that they are always seeking new training for staff as they have undertaken all the required mandatory training.

The home has a staff recruitment procedure in place. The most recent member of staff to be employed was three years ago. Three staff files were seen and are maintained to an excellent standard and include all the required employment documentation. All CRB checks are kept up to date.

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

The arrangements for the day to day management of the home are excellent, ensuring clear lines of accountability, openness and transparency. The systems in place for monitoring quality assurance are good ensuring the home is managed in the best interests of the residents.

Procedures ensure that resident's financial interests are safeguarded.

The health, safety and welfare of the residents and the staff are promoted and protected.

Evidence:

The home is owned by Penny and Colin Mc Kenna who have years of experience in health care provision. They are in daily contact with the home, providing some administration and maintenance input.

The home is very well managed by the registered manager Christine Back who has twenty four years experience in the provision of care for older people. She has a nursing qualification and also has her registered Managers Award (RMA). Residents

Evidence:

felt well supported by the management structure within the home. "I can talk to the manager at any time and she will always solve my problems", and "there is always somebody there to listen" were some comments made.

Quality assurance is monitored by the owners and manager who are in contact with residents on a daily basis. There is an open and inclusive atmosphere in the home and it is managed in the same way. Questionnaires are distributed to relatives and residents for comments and the feedback is analysed and acted upon. Resident meetings are facilitated and chaired by a current relative. Suggestions and issues are feedback to the management and actioned as required. Staff meetings also take place and issues highlighted are reported back to management.

Policies are in place to safeguard residents finances. No member of staff acts as appointee for residents. The designated person or relative responsible for managing residents affairs are invoiced for chiropody, hairdressing and sundries.

Formal staff supervision takes place and recorded on staff files.

The home has policies and procedures in place for the management of health and safety. All staff undertake health and safety training that is updated regularly. This includes manual handling, infection control, food hygiene, first aid, and fire safety awareness. Risk assessments are in place for all identified risks and for safe working practice.

The home manages and records accidents and incidents appropriately.

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 |
|----|-------------------|-------------------------------|
| | | |

Helpline:

Telephone: 03000 616161

Email: enquiries@cqc.org.uk

Web: www.cqc.org.uk

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