



Making Social Care
Better for People

Inspecting for better lives

Key inspection report

Care homes for older people

Name:	Tudor Court
Address:	Tudor Court 18-20 Midvale Road Paignton Devon TQ4 5BD

The quality rating for this care home is:

one star adequate service

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:
Rachel Proctor	2 0 0 5 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:	Tudor Court
Address:	18-20 Midvale Road Tudor Court Paignton Devon TQ4 5BD
Telephone number:	01803558374
Fax number:	01803528132
Email address:	jean.entwistle@btconnect.com
Provider web address:	

Name of registered provider(s):	Mr Royston Terry Lock
Type of registration:	care home
Number of places registered:	31

Conditions of registration:		
Category(ies) :	Number of places (if applicable):	
	Under 65	Over 65
dementia	0	31
mental disorder, excluding learning disability or dementia	0	31
old age, not falling within any other category	0	31
physical disability	0	31
Additional conditions:		
To allow one named Service User, 55 years of age, to have respite care		

Date of last inspection									
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Brief description of the care home
Tudor Court is a large four storey mid terraced property, close to all local facilities in Paignton. The home provides care to service users over the age of 65 who may also have some form of physical and/or mental frailty. There is a shaft lift. The home has undergone a major refurbishment programme which has resulted in the creation of a large well appointed conservatory area at the rear of the home, refurbishment of the home's communal areas, the home's kitchen, the home's corridors and upgrading of service user's bedrooms throughout the home. The home now provides accommodation for service users in twenty-seven single rooms and two double rooms.

Brief description of the care home

Twenty-one of the bedrooms have a toilet and washbasin en-suite facility. The conservatory looks on to a pleasant level patio area. Its gate, and external doors of the home, can be opened with a keypad. The fees range from #337.25 to #436, increasing in line with the dependency of the person receiving care. The statement of purpose and service users guide are provided for people in the lounge area of the home.

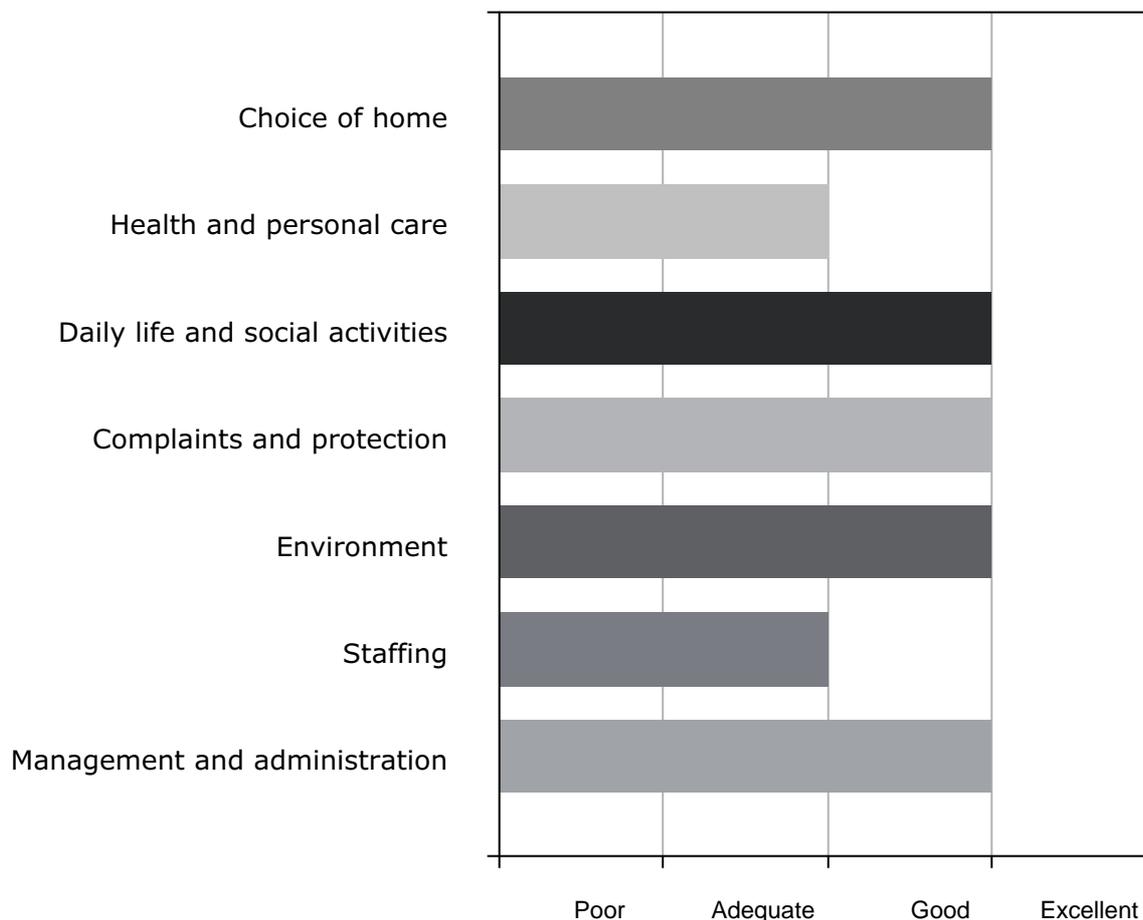
Summary

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

The quality rating for this care home is:

one star adequate service

Our judgement for each outcome:



How we did our inspection:

This was a key unannounced inspection, which took place on over two days, 14th and 20th May 2009. A visit to the home was undertaken as part of the inspection. Four people had their care followed; one of these had been admitted recently. During this visit a tour of the home was completed with the deputy manager. People living at the home and staff were spoken with during the inspection and some records were inspected. Information received from the home since the last inspection was also reviewed. This included a random inspection completed on 13th July 2008. Some of the comments made during in the inspection have been incorporated into this inspection report.

What the care home does well:

Tudor Court has a dedicated staff team who are well trained providing care for the people. The management team ensures staff have training that helps them do their jobs well and provides them with the knowledge and skills to care for people. People commented that they could not fault the care staff who were always friendly caring and supportive towards them.

People are consulted about the activities and entertainment provided for them. People have the opportunity to take part in activities out side the home with support form the staff team where possible.

Complaints and suggestions from people living in the home, their relatives or other visitors to the home, are treated seriously. People are listened to and issues resolved promptly.

Tudor Court provides a pleasant, reasonably well-maintained home that is comfortable. The home has been adapted to provide sufficient facilities to meet peoples individual care needs.

People who live at Tudor Court knew the home was well-managed home run in their interests. The owners, deputy manager and staff provide a safe environment that respects and protects peoples' rights.

What has improved since the last inspection?

Floor coverings are being replaced with carpets; some of these had been replaced at the time of this inspection. Corridor doors with little natural light have been painted white to reflect the available light and make the area look brighter. A new wet room with an easy access shower room had been installed in one of the smaller bathrooms. This had made the shower accessible for more people living at the home.

Activities provided for people have been reviewed with them and more external events are planned in the future. People are consulted about their preferences for activities and the staff team facilitate these where possible. The garden area has a new fence and decorative trellising improving the appearance and making a secure area for people, enabling them to go into the garden as they please.

What they could do better:

The home did not have it's own risk assessments for use of bed guards or consent forms for there use completed. This would ensure people who are at risk of falls who are using bed guards are suitable assessed and their consent obtained. If bed guards people are using are not risk assessed regularly. People may be put at risk of accidental injury.

Prescribed treatment creams should only be used for the person they are prescribed for. By not ensuring treatment creams are only used by the people they are prescribed for treatment creams may not be available for the person when they are needed.

The care planning information was not recorded and stored in one place. Three recording systems were in place. A long term care plan, a daily care plan and a communications book which contained some day to day instructions for staff regarding people's care. This does not ensure all care planning information was easily available for people receiving care and the staff providing it. Providing a clear system would help to ensure people's care needs continue to be met. And people are not reliant on staff who know their care needs well to receive the care they need.

Clear information regarding how controlled drug records must be kept for staff and ensure any controlled drug medication records of administration and returns are recorded had not been provided. A clear audit trail of how controlled drug medication will be monitored and disposed of safely was not in place. This may mean people are at risk of receiving medication they no longer need.

A menu had not been displayed for people to see, which show what meals will be provided for them. Doing this would give people more opportunity to choose.

The redecoration and refurbishment of the home was still in progress. This will enable all the people who live at the home to have the same high standards of accommodation.

Not all pre-employment checks had been completed prior to a member of staff starting work. This means people may be put at risk from unsuitable staff.

The future manager of the home has still to be confirmed. Providing a manager to lead the team will ensure the home continues to be run in the best interests of the people who live there.

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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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 homes Statement of Purpose and Service Users guide are easily available for people who live at the home and visitors. This ensures that people have sufficient information about the home and the service it provides to make an informed choice about whether the home can meet their needs.

The assessment process completed by the homes senior staff should ensure people's health, personal and emotional care needs are recorded. This should ensure staff are aware of the individual persons care needs and enable them to meet peoples care needs as they need and expect.

Evidence:

Tudor Court management team have produced a brochure, Statement of Purpose, Services Users' Guide and other documentation, which describes the aims, objectives, values and facilities offered at the home. These are easily available for people who live

Evidence:

in the home and visitors. The deputy manager advised that they plan to introduce a client pack, which will be available in each persons room. Pre-admission assessments have continued to be carried out prior to a person being admitted to the home. Three people living in the home spoken with confirmed they had been able to visit the home prior to taking up a permanent place and they had sufficient information about the home.

The home develops two styles of care plan from the pre admission assessment of need. One covers long term care and the other day to day care.

The home does not offer Intermediate Care, however it does offer short stay and day care for people if places are available. The pre inspection information indicated that the home now has two dedicated respite beds for people who need a short stay placement to use.

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

People's care plan information was recorded and stored in two different systems. A long term care plan and a daily care plan. Although clear information had been recorded in both. The long term care plan had not been reviewed as often as the short term care plan. This may mean staff do not have all the information they need, which relates to how a persons care should be given easily available.

Information regarding controlled drug did not ensure controlled drug medication records of administration and returns are recorded as required. Keeping accurate records ensures controlled drug medication will be monitored and disposed of safely. The risk of people receiving medication they no longer require will be reduced. And the risk of misuse of a controlled drug will be prevented.

Evidence:

Three people had their care followed as part of this inspection. This involved reviewing care plans and other information recorded for the person. Visiting the room they occupied in the home and speaking to the person where possible. All had a daily plan

Evidence:

of care, which had been reviewed monthly. Where changes had been made these had been up dated. One person whose care was followed had been admitted to the home in March 2009. The other two people had been at the home for over a year.

The pre-inspection information stated that detailed short term care plan was prepared from the pre-admission assessment for people. Although short term daily care plans and monthly reviews were in place for the people whose care was followed. Not all provided detailed care planning for all the health and personal care the person needed. These were recorded in a long term care plan, which included risk assessments for the person. The pre-inspection information also indicated that documented records and communication were two things the home management team could improve in the next 12 months.

One person whose care was followed did not have information in the daily care plan regarding how their challenging behaviour was to be managed by staff. The deputy manager advised that the long term care plans and risk assessments are only up dated when changes occur. Where changes had been made to the persons long term care plan these had been dated and signed by the staff member up dating them. The last review dated was August 2008; this up dated the person nutritional assessment and care plan. Staff spoken with during the inspection were aware of the persons challenging behaviour and how this should be managed. The deputy manager confirmed that key staff had received training for managing challenging behaviour. When this person was spoken with in their own room they said they preferred to be in their own room and were happy with the care staff provided. It was unclear from the information recorded how the person or their representative had been involved in their care planning process or review of care.

One person whose care was followed had lived at the home for several years. The deputy manager advised that during this time their care needs had increased. The person was receiving support from district nurses and they had also been referred for physiotherapy assessment. The person had a hospital style profiling bed with a high dependency airflow pressure relief mattress and bed guards being used in their room. The deputy manager advised that the Community health team had supplied the hospital bed, pressure relief mattress and bed guards. District nurse records were being kept in the person room. The persons care plan did not have a risk assessment completed for pressure sore risk or the use of bed guards. Consent for use of bed guards was not provided for this person. The deputy manager advised that the district nurses had assessed the persons risk and provided the equipment they needed. He also advised that they do not routinely complete risk assessments for pressure sore risk and rely on district nurses to provide help and support for people's health care. The person had prescribed treatment cream used for skin protection in their room,

Evidence:

which had been prescribed for a different person. This was being used by staff for the person whose care was followed. During the inspection this person was being cared for in the lounge, they were sitting in a supportive armchair.

The care plan and risk assessments had been fully completed for the person who had been admitted to the home recently. The care plan had been completed from their assessment of need and reviewed following admission. The deputy manager advised that he was considering up dating the care plan records and using a different assessment tool for people coming to the home.

It was unclear for the care records seen how people are involved in the development of their care plan. However three of the people living at the home who were spoken with said staff had spoken with them about the care they needed. One person commented that staff help them with the things they are unable to do for them self and support them with the things they can do.

Records of medication and stock held for the three people whose care was followed were viewed. These had been recorded correctly. The pre-inspection information indicated that all staff who administer medication had received training. A record book for medication returned to pharmacy was being kept. However this did not include controlled drug medication, which was being recorded separately in a small notebook.

The records being kept for the controlled drug medication were incomplete. Controlled drug records did not show a clear audit trail of medication administration. Records of return to pharmacy or destruction of controlled drugs were incomplete. One person's controlled drug medication who had died was still being kept in the controlled drug cupboard. This means that no clear audit trail for controlled drug medication administered or how medication no longer required by people living at Tudor Court was disposed of was being kept. Not providing a clear audit trail and keeping medication no longer required puts people at risk of receiving medication they don't need.

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 staff at Tudor Court try to ensure that people living at the home have access to the activities they prefer and enjoy.

Although a choice of food at meal times was provided not every one spoken with knew this. A menu did not appear to be provided for people to enable them to see what was being provided for them each day. This may mean that people do not have the opportunity to choose their food easily.

Evidence:

People living at Tudor Court were being encouraged and enabled to do as much for them self as possible. They have a range of activities to choose from. People we spoke with during the inspection told us that they were able to get up and go to bed at whatever time they wished. Tudor Court has sufficient communal lounge and dining room space to enable people to choose. The home has an easily accessible garden area, which is secure. people were using the garden during the inspection. The deputy manager advised that he hoped to encourage people to take an interest in the garden. Since our last inspection a member of staff has taken responsibility to provide activities for people several afternoons a week. The deputy manager advised that

Evidence:

activities are arranged around what people say they would like to do.

Three people spoken with in the lounge said there was something to interest them most days. They also commented that staff are good at helping them take part in whatever activities are offered. People's personal interests and hobbies, if they had any were recorded as part of their care plan information. The deputy manager advised that this information is used to help plan activities organised for people living at the home. People spoken with said they were able to choose if they wanted to take part in activities.

Visitors were coming and going through out the inspection. Two relatives spoken with said they were happy with the support their relative had at Tudor Court. They had been helped by staff to get their relative ready to take them out for lunch during the inspection. Two people living at Tudor Court had their pets with them, a small dog the other a budgie. The deputy manager advised that staff take the dog for walks as the person was no longer able to do this.

The AQAA (Annual Quality Assurance Assessment) information indicated that people are still encouraged to be as independent as possible. This information also indicated that people have access to a health nutritious diet and can have additional drinks and snacks during the day if they wish. The manager indicated that they would be completing an annual client improvement questionnaire, which they hope will highlight any gaps in provision. They also indicated that they plan to improve the entertainment they offer.

One person spoken with during the inspection said they had really enjoyed the theatre show the manager had taken them to recently. The deputy manager advised that people are given the opportunity to go outside the home with members of staff for walks, visits to local attraction or theatre. The pre-inspection information indicated that a vicar visits the home regularly to provide communion for people who would like this.

The lunch time meal observed was unhurried with people eating their meals at their own pace. People were chatting to each other during the lunchtime making this a social occasion for people living at the home. Staff were offering people a second helping of the meal provided. Those people who needed assistance to eat their meals were being given this by staff in a friendly discrete way. Staff were speaking to the person as they helped them. Pureed food had been prepared to enable the person to taste the different types of food in their meal.

The cook advised that all meals are prepared fresh each day using fresh produce where possible. They also said they were able to provide an alternative for people who

Evidence:

did not like what was on offer that day. Very little wastage was seen from the lunchtime meal. People spoken with said they really enjoyed the meals at Tudor Court. Menus were available in the kitchen of the home, which showed a varied nutritional diet for people. However these were not provided each day for people living in the home. One person commented that we are told what was for lunch and tea on the day. The deputy manager advised that people living at the home are told each day what was on offer for the lunch and tea time meals and asked what they would like to eat.

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 staff team at Tudor Court value the people who live there and take any concerns they raise seriously. People were aware how to raise concerns and say they have confidence that their concerns would be listened to.

Evidence:

Tudor Court has a complaints procedure and policy, which was easy for people to access. People who were able said they knew how to make a complaint and felt the staff would treat this sensitively. The deputy manager had a complaints folder in the office. He advised that individual complaints are recorded in people's care plan file daily records. The Commission has received one complaint since our last inspection this related to the way health care was provided for one person at the home. The pre-inspection information indicates that the home has received two complaints since our last inspection, which were dealt with within 28 days.

The pre-inspection information indicated that staff and people living in the home have access to adult protection policies and procedures. These were seen in the home's lounge during the inspection. The deputy manager confirmed that staff also receive training for adult protection in house using the training material provided. He also provided information relating to the Mental Capacity Act and deprivation of Liberty Act. He advised that he and other senior staff had attended training for this, which had been organised by the Care Trust. This information was provided for staff in the office

Evidence:

of the home.

A system is in place for recording and storing people's money safely. receipts for expenditure were being kept. One person who the deputy manager had taken responsibility for collecting money on their behalf had a record of this, which the person had signed when they received their money.

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.

People who live at Tudor Court have a comfortable, pleasant, reasonably well-maintained home, which provides sufficient facilities to meet their needs.

Evidence:

Tudor Court is a large mid terraced property close to all local facilities near the town centre of Paignton. The home used to be two houses so benefits from two staircases, though both of these do not extend through all floors as the lower part of one staircase has been removed to provide space for the passenger lift, which does access all four level floors. The lift has been replaced since our last inspection. The lift had a lock to it and people were asking staff to use the lift when they wanted to return to their rooms. The manager advised that because of the mental frailty of some people it had been necessary to restrict access to the lift to ensure staff were available to help people use it. The home provides aids and adaptations for people, which include grab rails, raised toilet seats, a disabled toilet facility, mobile hoists and an accessible bath. A new wet room has been put in place just before this inspection, this used one of the existing small bathrooms. The deputy manager advised that this was benefiting the people living in the home as it had made it easier for them to have a shower.

A tour of the home was completed with the deputy manager. All communal areas and assisted bathrooms and toilets were seen. Toilets were close to the communal areas

Evidence:

for people to use or they were assisted to return to their own en-suite bathrooms if they wished. Some peoples individual bedrooms were entered with the deputy manager, which included the individual rooms of people whose care was followed. Rooms had been personalised with items of the persons choice. These included pictures and ornaments. It was noted that some individual bedrooms had been redecorated and fresh curtains and bedcovers provided. One of the rooms entered on the lower ground floor had a slightly soiled carpet with some odour. The deputy manager advised that the carpet was due to be replaced.

There is a large lounge with various alcoves, comfy chairs and a relaxing atmosphere. The conservatory dining room was bright and looks out on to the patio with seating. The home's grounds are safe and pleasant. The garden gate can be opened by means of a keypad, thereby allowing people unrestricted access to the rear garden and patio. A fence has replaced a hedge on one side of the garden to improve security since the last inspection.

The majority of peoples rooms had en-suite facilities, those that did not had a toilet or bathroom close to their room. Commodes were provided for some people who needed them. Each individual bedroom has a twist lock, the deputy manager advised that people are given keys to their rooms if they are assessed as able to manage these. The pre-inspection information stated that people have lockable space provided in their rooms.

The pre-inspection information indicates that all laundry was completed on the premises and clean laundry was stored separately to reduce the risk of cross infection. This was found to be the case when the laundry was seen during the inspection. Information provided stated that all twenty one staff had received infection control training. Information relating to the management of infection control was provided in the office of the home. Staff observed providing care were using gloves and aprons. These were provided through out the home for staff use.

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

Tudor Court employs sufficient staff who have the skills, training and understanding to meet the needs of the people who live there.

The management team at Tudor Court have a clear commitment to ensuring that staff achieve a National vocational qualification in care. This means that people are cared for by a knowledgeable staff team who understands their care needs and have their best interests at heart.

Although the home has a good recruitment policy in place, this had not been followed for all staff. By not ensuring all pre-employment recruitment checks are completed people may be at risk from unsuitable staff.

Evidence:

The deputy manager provided the duty rota for the home. This showed the number of staff on duty each shift and in what capacity they were employed. Increased numbers of staff were noted to be provided at peak times. The deputy manager advised that staffing numbers are adjusted to meet the needs of the people in the home. People are given the opportunity to go outside the home with staff if they wish and staffing numbers take this into account. In addition to the care staff at home employs a cook, domestic staff and maintenance person.

Evidence:

Staff spoken with during the inspection advised that they had good access to training and there was always training and information available at the home. The pre-inspection information indicated that nineteen staff had achieved an NVQ level 2 or above in care. The deputy manager advised that new staff are encouraged to access NVQ training. Pre-inspection information indicated that two of the senior staff employed had already achieved an NVQ level 4 and two other staff were working towards this qualification. The information also stated that four of the staff employed have achieved an NVQ level 3 and another two were working towards this qualification. Nineteen of the twenty one staff had achieved an NVQ level 2 or above in care and two were currently working towards their NVQ level 2 qualification.

Four staff records were reviewed during the inspection. Information relating to their recruitment process, training and supervision were reviewed. One staff member who started work in February 2008 did not have copies of references, proof of identity or current police check record on file. The deputy manager advised that the registered manager had dealt with all the recruitment of staff. One of the staff members file checked did not have an application form or references available. A police check record was not available. The deputy manager was able to provide information about the induction staff had undertaken when they started work at the home. The two other staff files checked contained the information needed to show safe recruitment practice.

The deputy manager advised that he had taken responsibility for overseeing the training, development and supervision of staff. Records of supervision and training staff had received were available in the office of the home. Staff spoken with during the inspection said they felt supported to do their work. They also said they had good access to training that helped them to their jobs well. The deputy manager advised that staff are encouraged to access training. Some training was provided in-house and other training provided by Torbay Care Trust and other external trainers.

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 staff team endeavor to ensure that the home's run in the best interests of the people living there. The staff team and the deputy manager have tried to ensure the systems and management of the home have continued following the loss of the manager.

The home provides a safe, secure environment where peoples' safety and well-being can be respected and maintained.

Evidence:

Sadly the registered manager died suddenly in March 2009 leaving the deputy manager to take control of the home with the support of the Registered person Mr Lock. The deputy manager advised that he had been working alongside the registered manager and had started to take on some of the management roles within the home. The registered provider and deputy manager have kept the Commission informed of the actions they were taking to ensure the home continued to be managed safely. The

Evidence:

registered manager had been managing Tudor Court for 17 years; she had an NVQ level 4 in management, an NVQ assessor award and adult teaching qualification. She had regularly attended relevant training courses and manager and matron's meeting organised by Torbay Care Trust to update her knowledge and skills and competencies.

The way the quality of the service was reviewed was discussed with the deputy manager. He advised that satisfaction surveys had been completed and the results were available with the statement of purpose in the lounge. This was seen during the inspection. The satisfaction survey results seen during the inspection indicated that people were satisfied with the care and services provided at Tudor Court. People spoken with during the inspection said they were made to feel at home and felt that staff listened to them and understood them. People appeared to have been kept informed of the changes to the management structure of the home and were aware of the reasons for this. It was also clear from discussion with the people living at home that they had been consulted about changes to the decor and garden area that had taken place.

The deputy manager advised that policies and procedures were in the process of being updated and some of these had been reviewed earlier this year. The pre-inspection information indicated that the policies required are in place. The policy folder was seen to be easily available for staff in the home during the inspection.

The pre-inspection information indicated that three of the people living at Tudor Court were able to manage their own affairs. Their family or their solicitor were handling the remaining people's affairs. The money held for one person whose care was followed and the records of receipts were checked. These have been recorded as required and the money held securely. The systems in place should ensure people's financial interests are safeguarded.

Accidents records were discussed with the deputy manager he advised that any accidents or incidents had been reviewed by the manager to ensure any actions to reduce further risk are taken. The home's accident recording processes were seen to be in order. The information provided by the deputy manager indicated that health and safety checks are completed. Records of fire safety checks were up to date. Staff training information showed that all had completed infection control training. Chemicals were being stored in a locked area during the inspection.

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
1	9	13	<p>The Registered person shall make arrangements for the recording, handling, safekeeping, safe administration and disposal of medicines received into the care home.</p> <p>Clear information regarding how controlled drug records must be kept for staff and ensure any controlled drug medication records of administration and returns are recorded must be provided. This will ensure that controlled drug medication will be monitored and disposed of safely. The risk of people receiving medication they no longer require will be reduced. And the risk of misuse of a controlled drug will be prevented.</p>	04/06/2009

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	20	19	<p>0000557467 Standard 29.</p> <p>The Registered person shall not allow a person to whom to paragraph (2) applies to work at the care home in a position to which paragraph</p>	14/08/2009

		<p>(3) applies, unless- The employer has obtained in respect of that person the information and documents specified in- Paragraphs 1 to 7 of Scheduled 2 and has confirmed in writing to the Registered person that he has done so;</p> <p>By not ensuring all pre-employment checks are completed prior to a member of staff starting work people may be put at risk from unsuitable staff.</p>	
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Recommendations

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

No.	Refer to Standard	Good Practice Recommendations
1	7	The registered person should consider reviewing the way care planning information was recorded and stored. To ensure all care planning information was easily available for people receiving care and the staff providing it. This would help to ensure people's care needs continue to be met. And people are not reliant on staff who know their care needs well to receive the care they need.
2	8	The home did not have it's own risk assessments pressure sore prevention. The registered person should ensure that that risk assessments are provided by the home's staff. This would ensure people at risk of developing pressure sores are identified early and preventative treatment sought.
3	8	The home did not have it's own risk assessments for use of bed guards or consent forms for there use completed. This would ensure people who are at risk of falls who are using bed guards are suitable assessed and their consent obtained. If bed guards people are using are not risk assessed regularly. People may be put at risk of accidental injury.

4	9	Prescribed treatment creams should only be used for the person they are prescribed for. By not ensuring treatment creams are only used by the people they are prescribed for treatment creams may not be available for the person when they are needed.
5	15	A menu should be provided for people, which show what meals will be provided for them. This will give people more opportunity to choose.
6	19	The redecoration and refurbishment of the home should continue, this will enable all the people who live at the home to have the same high standards of accommodation.
7	38	The future management of the home should be confirmed as soon as possible to ensure the home continues to be run in the best interests of the people who live there.

Helpline:

Telephone: 03000 616161 or

Textphone: or

Email: enquiries@cqc.org.uk

Web: www.cqc.org.uk

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