



Making Social Care  
Better for People

Inspecting for better lives

# Key inspection report

## Care homes for adults (18-65 years)

<b>Name:</b>	Liam House
<b>Address:</b>	13 Spencer Road Bournemouth Dorset BH1 3TE

**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.

<b>Lead inspector:</b>	<b>Date:</b>
Tracey Cockburn	2   1   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

<p><b>Outcome area (for example: Choice of home)</b></p> <p><b>These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:</b></p> <p>This box tells you the outcomes that we will always inspect against when we do a key inspection.</p> <p>This box tells you any additional outcomes that we may inspect against when we do a key inspection.</p> <p><b>This is what people staying in this care home experience:</b></p> <p>Judgement:</p> <p>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.</p> <p>Evidence:</p> <p>This box describes the information we used to come to our judgement</p>
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Copies of the National Minimum Standards – Care Homes for Adults (18-65 years) can be found at [www.dh.gov.uk](http://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](http://www.tso.co.uk/bookshop)

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- 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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## Information about the care home

Name of care home:	Liam House
Address:	13 Spencer Road Bournemouth Dorset BH1 3TE
Telephone number:	01202294148
Fax number:	01202789983
Email address:	liamhouse007@aol.com
Provider web address:	

Name of registered provider(s):	Mr Marvin Charles Stephens
Type of registration:	care home
Number of places registered:	11

Conditions of registration:		
Category(ies) :	Number of places (if applicable):	
	Under 65	Over 65
learning disability	11	11
Additional conditions:		

The registered person may provide the following category of service only: Care home providing personal care only - Code PC to service users of either gender whose primary care needs on admission to the home are within the following categories: Learning disability - Code LD Learning disability over 65 years of age - Code LD(E)

The maximum number of service users who can be accommodated is 11.

Date of last inspection									
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### **A bit about the care home**

Liam House is a home for adults of both sexes who have a learning disability. It is a large, semi-detached house situated in a central area of Bournemouth close to Boscombe and Bournemouth town centres. The home is conveniently located near shops and facilities and is not far from the sea. It has good access to public transport.

Accommodation is provided in seven single and two double bedrooms. Seven bedrooms are located on the first floor and two on the ground. The first floor also has two bathrooms with WCs and a separate WC. The ground floor has one bathroom with a WC. The communal space is located on the ground floor and consists of a lounge, separate dining room and kitchen. There is a small locked office where all the records are kept. Outside there is a small garden at the rear of the property that has a large storage shed, which contains the laundry facilities and 2 large freezers. The front of the property provides off-road parking.

The home is staffed 24 hours a day, with 2 sleeping in staff at nights. Most people who live in the home attend day activities organised by different agencies outside the home although this is flexible and people are also supported to spend time at the home.

Current fees range from 450pounds to 1000pounds per week; dependent on individual care needs and if the provision of day care is necessary. Fees do not include personal items such as toiletries, hairdressing, cigarettes and sweets. For further information on fee levels and fair terms of contracts you are advised to refer to the Office of Fair Trading website: [www.oftrading.gov.uk](http://www.oftrading.gov.uk).

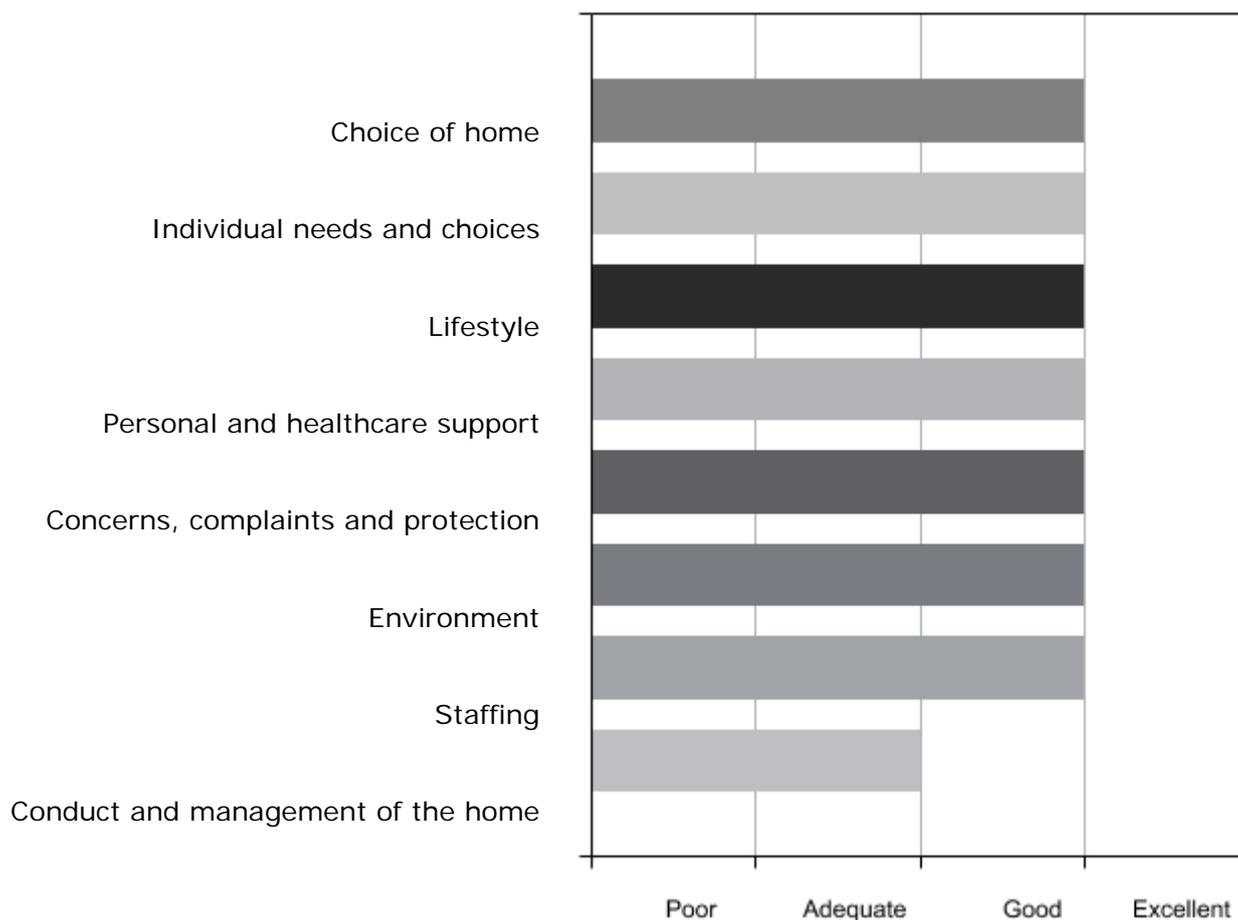

## Summary

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 is what the inspector did when they were at the care home**

We visited the home without warning. This was a key inspection.

We involved an expert by experience in the inspection this is someone who has used social care services and is able to give a unique perspective and support the work we do. Extracts from the report written by the expert by experience are used throughout our report to illustrate our judgments.

Part of planning for the visit included reviewing information supplied by the registered provider in the annual quality assurance assessment, as well as reviewing responses to any random inspections completed since the last key inspection. We also looked at notifications sent in by the service relating to incidents which have occurred in the home.

During the visit we spoke to people who use the service as well as staff who work there and the new manager who has been in post since March 2009.



### **What the care home does well**

People who use the service have detailed assessments of their needs.

People who use the service have individual plans of their needs and goals, which they are involved in developing. People who use the service are supported to take risks in their daily lives.

People who use the service are able to maintain relationships with the people who are important to them.

Staff understand the importance of respecting peoples' rights in their daily lives.

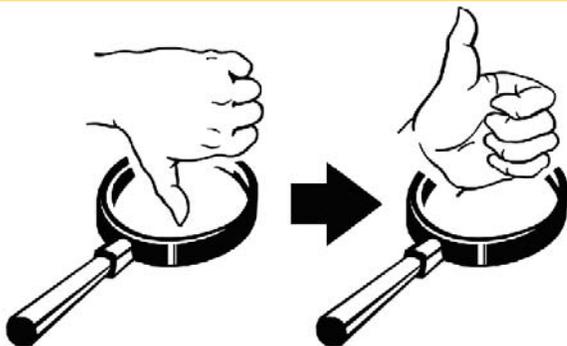
The service encourages a health diet and supports people to make decisions about the food they eat.

People have the information they need to complain if they want to.

the safeguarding policy, practice and training ensures they understand the need to ensure people are safe.

People live in a comfortable home where they can have their personal belongings around them.

People living in the service are supported by competent staff.

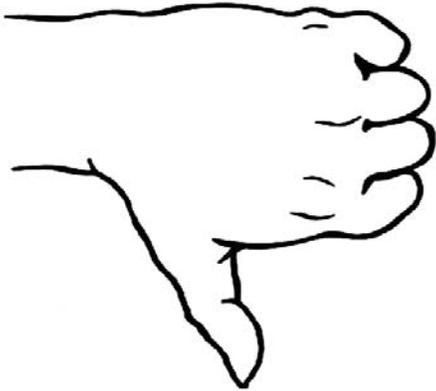


### **What has got better from the last inspection**

At the end of the inspection in July 2007 there was one requirement and no recommendations.

To demonstrate that the service has robust recruitment practice it is important that documentation is kept in individual

files.



### **What the care home could do better**

At the end of this inspection there are four requirements and seven recommendations. In order to comply with current storage regulations of controlled drugs the home must buy a suitable cabinet which meets legal requirements. It is important that current good practice in infection control is put in place by the home to ensure people living there are fully protected. It is important that people using the service are able to voice their opinions as part of a quality assurance process and have these views incorporated into the development of the service. The home must inform the commission of any incidents and accidents within the home this ensures that the commission is clear on how the service supports and protects people living in the service. People who live in the home should understand what a person centred care plan is and be involved in its development as it is about what they want to do in their lives. It is important that personal information about people who live in the home is kept in their own files and not where others can see the information. People using the service should be supported to find out about different opportunities like further education and vocational training. People who use the service should be supported to find out about different activities in the local community which they may wish to

participate in. It is important that the home is able to show how people are supported to make choices in their daily lives such as the clothes they wear, the way their hair is styled. To ensure that new staff in the home understand their role and responsibilities it is important that they completed induction training using the Skills for Care induction standards and that they also complete foundation training. It is important that the service reports all incidents and accidents in the home to the commission so we can ensure that people living in the home are safe and action is being taken to ensure they are protected.



**If you want to read the full report of our inspection please ask the person in charge of the care home**

**If you want to speak to the inspector please contact**  
Tracey Cockburn  
33

	Greycoat Street London SW1P 2QF  02079792000

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.

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## Details of our findings

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## 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, what they hope for and want to achieve, and the support they need.

People can decide whether the care home can meet their support and accommodation needs. This is because they, and people close to them, can visit the home and get full, clear, accurate and up to date information. 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 the person 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. People who use this service have detailed assessments completed before any decision is made.

Evidence:

There have been no new admissions to the home since the last key inspection in July 2007. We found that people who use the service and are funded by local authority were reviewed in March 2009. We found that the annual quality assurance assessment was poorly completed for this outcome area and the only evidence it gave to support 'what it does well' was that nobody had 'moved out'.

## Individual needs and choices

**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 needs and goals are met. The home has a plan of care that the person, or someone close to them, has been involved in making. People are able to make decisions about their life, including their finances, with support if they need it. This is because the staff promote their rights and choices. People are supported to take risks to enable them to stay independent. This is because the staff have appropriate information on which to base decisions.

People are asked about, and are involved in, all aspects of life in the home. This is because the manager and staff offer them opportunities to participate in the day to day running of the home and enable them to influence key decisions. People are confident that the home handles information about them appropriately. This is because the home has clear policies and procedures that staff follow.

**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 have individual plans which detail how they want and need to be supported, work needs to continue to ensure that individuals are involved in developing their plans and goals.

Evidence:

We found that the annual quality assurance assessment completed by the provider contained very little information on which to determine how the service was delivering good outcomes for people.

We looked at care files for three people who use the service and we found that there was information on how they like to be supported and make decisions about their daily lives.

The expert spoke to the manager who said that everyone had a person centred plan, the expert spoke to people who live in the home and found that they did not understand what was meant by a person centred plan.

We found that individual plans were signed by people. We found that contained good clear information on how people prefer to be supported and what action staff need to take to make sure that their individual care needs are met.

**Evidence:**

We were concerned that there was not clear recording of how people make choices each day about what they wear and what they want to eat, it was therefore unclear if staff are offering choices or if they were making them on behalf of the individual. We were concerned that we found information in communication books which were not confidential and would have given very personal details to other people about private matters.

## Lifestyle

**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 can take part in activities that are appropriate to their age and culture and 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 and the home supports them to have appropriate personal, family and sexual relationships. People are as independent as they can be, lead their chosen lifestyle and have the opportunity to make the most of their abilities. Their dignity and rights are respected in their daily life. People have healthy, well-presented meals and snacks, at a time and place to suit them.

People have opportunities to develop their social, emotional, communication and independent living skills. This is because the staff support their personal development. People choose and participate in suitable leisure activities.

**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 use the service are able to make choices in their daily lives, further development is needed to ensure they are participating in activities which they want to.

Evidence:

We found that since the new manager has been in post she has been sourcing other activities for people in the home. People who use the service have expressed a wish to do other activities instead of going to the local day centre. The manager told us that people come home and tell her they are bored at the day centre. Two people who live in the home will be starting college courses in the autumn in activities which interest them such as gardening and beauty therapy.

One person told us that they never do anything at the day centre.

We observed people arriving home from day activities, the home was very busy with people making each other hot drinks, preparing lunch boxes for the next day and chatting about what they had been up to.

Evidence:

One person was busy choosing sandwiches fillings from a range of choices. Other people were choosing to go to their room and relax.

At the time of our visit one person did not attend day activities they chose to spend the day at home. A member of staff took them out to lunch at a place of their choosing.

The expert by experience in their report stated:

" most of the day services are arranged around day centres and not much community based things."

The expert noted that " holidays are arranged for residents and they are going on a trip to London by coach"

People living in the home told the expert that the food was good and there was a good choice. the expert also noted in her report:

" The staff do all the cooking and residents wait in the dining room for their food." The expert thought that staff should think about supporting people to help out in the kitchen cooking and making drinks.

We did observed people making drinks for themselves when they returned home. We also observed people making their own packed lunches for the following day.

The expert said in their report that:

"residents are quite well cared for but not really supported to try new things and get new skills"

## Personal and healthcare support

**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 receive personal support from staff in the way they prefer and want. Their physical and emotional health needs are met because the home has procedures in place that staff follow. If people 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.

If people are approaching the end of their life, the care home will respect their choices and help them to 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  
People are supported to have their health care needs met.

Evidence:

We looked at the personal care records for three people who live in the home. Each of the three files we looked at had up to date care plans with review dates for the following month. We found that all three files contained information on health care checks such as visits to the dentist, optician and audiology. We also saw evidence in the personal health record that some people see the learning disability community nurse. The expert by experience was concerned about how one person made choices about everyday activities such as the clothes they wear and the food they eat. We could not find any evidence of how they make choices and how staff support them to do this. the manager talked about how they are developing a communication passport but we did not see how this is progressing. We looked at medication which is stored in a secure metal cabinet in the managers office. There is no controlled drugs cabinet. The new manager was not aware of the changes in the law and will purchase a CD cabinet.

All staff have received training in medication and the pharmacy used completes its own audit of the service. The home uses a monitored dosage system.

## Concerns, 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. Their concern is looked into and action taken to put things right. The care home safeguards people from abuse, neglect and self-harm and takes action to follow up any allegations.

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. People have the information they need to be able to complain.

Evidence:

There have been no complaints since the last inspection two years ago. There is a complaint policy and procedure which is available to people and is in an accessible format. People told us if they were unhappy they could talk to the manager or speak to someone else they trusted.

There is a safeguarding policy and procedure in the home and staff are completing safeguarding training. There have been no safeguarding investigations in the home since the last inspection.

## 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, comfortable, 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. People have enough privacy when using toilets and bathrooms.

**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 live in a home which is well maintained however clutter in some places does not make it as homely as it could be.

Evidence:

We toured the building, we did not look in people's rooms without their permission. We found that the toilet on the first floor is very small, the radiator is very hot to the touch and we thought that someone could easily hurt themselves. We found there was no liquid soap in the toilet or paper towels. We found the bathroom on the first floor has a cracked side panel to the bath. We found in the ground floor bathroom that the tiles around the bath are crack and could harbour germs. There was no pedal bin for used paper towels. There was no pedal bin in the kitchen. We found that since the last inspection all the toothbrushes and tooth paste have been removed from the downstairs bathroom and they are now kept in each person's bedroom.

We found that the dining room still contains a bed and mattress. The manager told us that it is not used and will be removed. We found less clutter in the dining room and the new manager told us it is all being removed. One member of staff said it was much less cluttered since the new manager started.

We found the home to be very clean, the cleaner works from 10am until 4pm each day.

The lounge had comfortable seating.

We were concerned that infection control in the home was not as thorough as it could

Evidence:

be.

## 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, qualified 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. People's needs are met and they are supported because staff get the right training, supervision and support they need from their managers.

People are supported by an effective staff team who understand and do what is expected of them.

**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. Staff are caring however there needs to be induction and training in place to ensure they have the knowledge to do the job well.

Evidence:

At the last inspection we found there was not enough staff on duty in the morning and that the cleaner was coming in early to help with personal care tasks. At this visit we found that there were two care staff on duty supporting people to get their transport to day activities and supporting people to complete their personal care. We observed one member of staff helping someone shave in the dining room. We spoke to the manager about this at the time of the site visit as this was not acceptable especially as there was another person in the home. We were concerned that this practice happens all the time. We spoke to the manager about training in the home and found out that equality and diversity training is being organised as well as record and report writing. The manager has been trying to source a variety of training methods including using an on line training company. The manager has also arranged for person centred training on the 16/06/09. We looked at the recruitment files for two people. We found that there were application forms, proof of identity, gaps were explored and both the Protection of Vulnerable Adults list had been checked and the Criminal Records Bureau check had been returned before they started work in the home. We also found that two written references had been sought and verified.

**Evidence:**

No evidence of induction apart from in house. We spoke to the manager who has the skills for care induction standards and workbook for staff.

## Conduct and management of the 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 have confidence in the care home because it is run and managed appropriately. People's opinions are central to how the home develops and reviews their practice, as the home has appropriate ways of making sure they continue to get things right. The environment is safe for people and staff because 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. They are safeguarded because the home follows clear financial and accounting procedures, keeps records appropriately and makes sure staff understand the way things should be done.

**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

The new manager has the skills and ability to support people to try new things and develop new skills. Since the home has been without a stable manager for some time there are aspects of management responsibility which have not been completed which has led to an inconsistent approach to care.

Evidence:

A new manager has been appointed. This person has experience of working with individuals with learning disabilities and has made changes to the way people are supported to make choices in their everyday lives.

The new manager has not yet applied to be registered with the commission however the registered provider told us this would be happening shortly once her probation period was completed successfully.

The annual quality assurance assessment had all the sections completed however it did not give us a clear picture of the current situation within the service, there was very little supporting evidence to illustrate what the service has done in the last year or how it is planning to improve.

The annual quality assurance assessment was completed before the new manager took up post.

#### Evidence:

We found some survey forms on individual files about what people who live in the service thought of the home however we did not find any other information about how peoples views were sought.

We looked at the fire records, portable appliance testing (PAT) testing was last done on 11/06/08, the fire system was last tested on 15/05/09. The fire risk assessment was reviewed on 1/04/09. The fire officer visited the service on 20/02/09.

We looked at safe working practice training such as moving and handling, fire safety, food hygiene and infection control and we spoke to the manager, who was aware of gaps, for example some staff had not had refresher training. The manager was able to evidence for us that this had been put in place.

The manager was also using a variety of training resources to ensure that staff training needs were addressed.

We found that sometimes incidents occur in the home but we are not always notified of them, we look at records which showed us that incidents and accidents are being recorded but not passed on to the correct organisation.

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	Description	Timescale for action
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### Statutory requirements

These requirements set out what the registered person must do to meet the Care Standards Act 2000, Care Homes Regulations 2001 and the National Minimum Standards. The registered person(s) must do this within the timescales we have set

No	Standard	Regulation	Description	Timescale for action
1	20	13	<p>The registered provider must ensure that the home complies with regulations relating to the storage of controlled drugs.</p> <p>The misuse of Drugs and misuses of Drugs (safe custody) (amendments) Regulations 2007 stipute that all care homes have a controlled drugs cabinet.</p>	01/09/2009
2	39	24	<p>The registered provider must maintain a system for reviewing and improving the quality of care provided at the home.</p> <p>People who live in the home must have their views listened to and acted upon as a fundamental part of the development of the service.</p>	30/06/2009
3	42	37	The registered provider must	30/06/2009

			<p>give notice to the commission without delay of the occurrence of any event in the care home which adversely affects the well being or safety of any service user.</p> <p>We need to know about incidents in the home in order to be assured that vulnerable people are safe and supported.</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 provider should ensure there is a system in place to demonstrate that individual's in the home are able to make choices in their everyday lives and a clear recording of when decisions are made by others and why.
2	10	The registered provider should ensure that information about an individual such as their health care needs is kept in their own personal file and maintains their right to confidentiality.
3	12	People who use the service should be supported to find out about opportunities for further education and ways they can develop their skills.
4	13	People using the service should have opportunities to continue to develop their interests and activities, both individually and collectively in the local community.
5	18	The registered provider should ensure that they are able to demonstrate how people with no verbal communication are supported to make choices about the clothes they wear.
6	35	The registered provider should ensure that all new staff received structured induction training within six weeks of appointment to Skills for Care standards and foundation training within six months.
7	37	The registered provider should arrange for the new manager to attend person centred planning training, so

		that this approach can be fully developed in the home to improve outcomes for people.
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