



Making Social Care  
Better for People

Inspecting for better lives

# Key inspection report

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

|                 |   |
|-----------------|---|
| <b>Name:</b>    | Terry Yorath House  |
| <b>Address:</b> | 18 Devonshire Close<br>Leeds<br>West Yorkshire<br>LS8 1BF |

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>    |
| Sean Cassidy           | 1 9 0 2 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 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)

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

|                     |  |
|---------------------|--|
| Document Purpose    | Inspection report  |
| Author              | CSCI   |
| Audience            | General public   |
| Further copies from | 0870 240 7535 (telephone order line)   |
| Copyright           | Copyright © (2009) Commission for Social Care Inspection (CSCI). This publication may be reproduced in whole or in part, free of charge, in any format or medium provided that it is not used for commercial gain. This consent is subject to the material being reproduced accurately and on proviso that it is not used in a derogatory manner or misleading context. The material should be acknowledged as CSCI copyright, with the title and date of publication of the document specified. |
| Internet address    | <a href="http://www.cqc.org.uk">www.cqc.org.uk</a>   |

## Information about the care home

|                       |   |
|-----------------------|---|
| Name of care home:    | Terry Yorath House  |
| Address:              | 18 Devonshire Close<br>Leeds<br>West Yorkshire<br>LS8 1BF |
| Telephone number:     | 01132662445   |
| Fax number:           | 01132370725   |
| Email address:        | tyh@disabilities-trust.org.uk                             |
| Provider web address: |   |

|  |                        |
|--|------------------------|
| Name of registered provider(s):            | The Disabilities Trust |
| Name of registered manager (if applicable) |                        |
| Mrs Jayne Walker                           |                        |
| Type of registration:                      | care home              |
| Number of places registered:               | 12                     |

|                             |                                   |         |
|-----------------------------|-----------------------------------|---------|
| Conditions of registration: |                                   |         |
| Category(ies) :             | Number of places (if applicable): |         |
|                             | Under 65                          | Over 65 |
| physical disability         | 12                                | 1       |
| Additional conditions:      |                                   |         |
| Date of last inspection     |                                   |         |

|  |  |
|--|--|
| Brief description of the care home   |  |
| <p>Terry Yorath House is a residential centre offering 10 permanent and 2 short stay places for adults with profound physical disabilities. The Disabilities Trust is a national charity and manages the centre under contract to Leeds Social Services. The centre is located in a small housing estate that is near Roundhay Park, and local shops, pubs and health centre. The home also has its own minibus. This home has groups of four single en-suite bedrooms that are built around a central lounge/dining room and kitchen. The centre is purpose built and all on the ground floor.</p> <p>The current charge at the home is 695 pounds and 38 pence per week. There are no additional charges made.</p> |  |

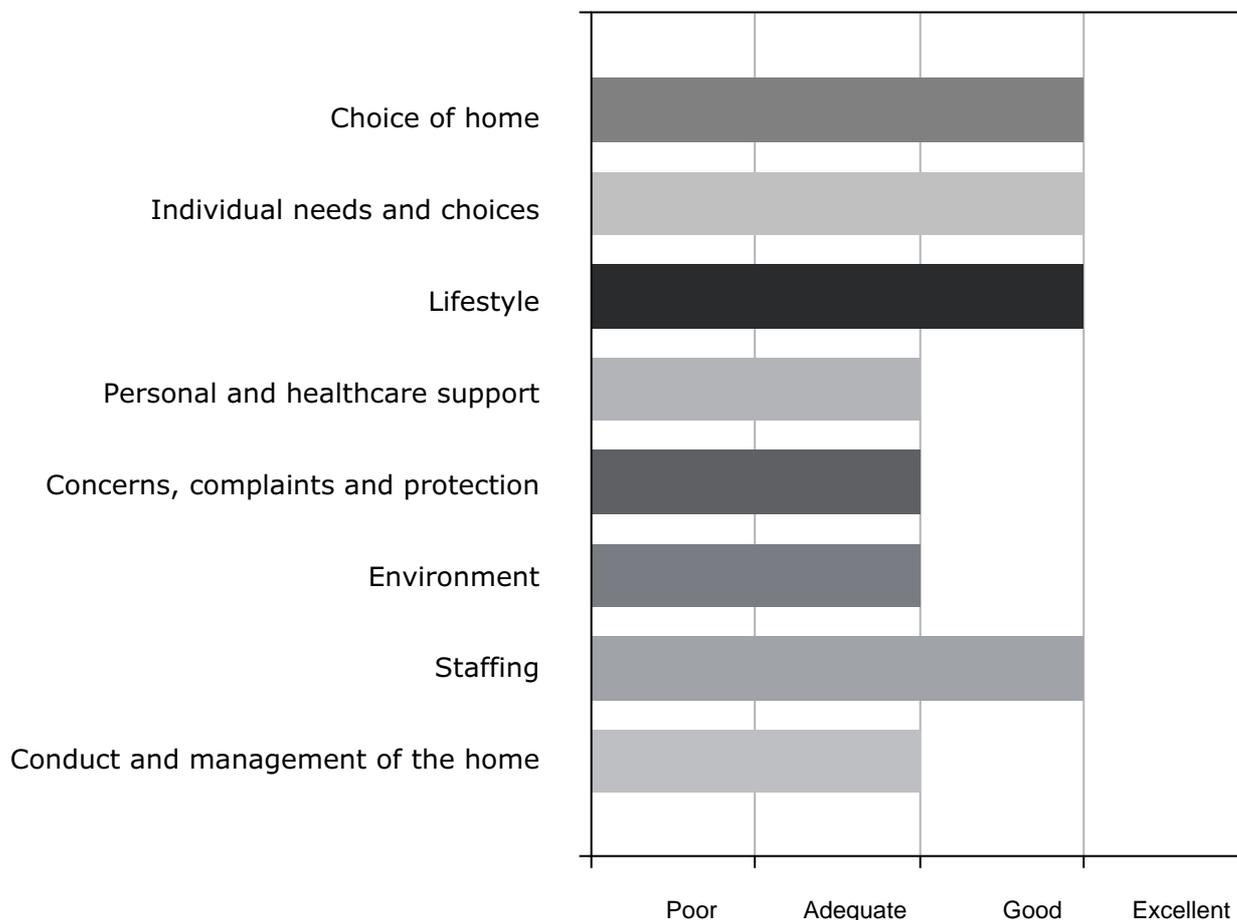
## Summary

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:

The accumulated evidence used in this report has included:

A review of the information held on the homes file since its last inspection.

Information submitted by the registered provider in the AQAA (Annual Quality Assurance Assessment)

Surveys received from people who use the service, relatives and staff.

An unannounced visit to the home, which lasted eight hours. This included a partial tour of the premises.

Evidence gained by direct observation, talking with people who use the service and management. Inspection of records including care plans risk assessments, medication administration records, and the homes policies and procedures.

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

The home has a friendly, relaxed and welcoming atmosphere.

People are provided with good information to assist them with making a choice about moving into the home.

People told me that staff have a good awareness of their needs. The care plans contain good amounts of detail and show consent to care is obtained.

Staff promote people's privacy and dignity where they are able.

Residents meetings do take place and people said they feel they are involved in the way the home is run.

Residents receive a good standard of health care. The staff team work well with the health professionals involved with residents.

Staff are well supported by the management team of the home. The manager makes sure records are well kept and organised. Health and safety in the home is well managed.

### **What has improved since the last inspection?**

The recruitment procedure has improved which means people are now better protected.

People have improved access to the local amenities.

### **What they could do better:**

The systems in place for ensuring there is a safe administration and recording of medications in the home must be reviewed and improved to ensure people are safe.

The systems in place for safeguarding vulnerable people must be reviewed and implemented. This will help ensure they are protected from possible harm.

The people living in the home must be provided with an environment that promotes their independence and does not further restrict them.

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](http://www.cqc.org.uk). You can get printed copies from [enquiries@cqc.org.uk](mailto:enquiries@cqc.org.uk) or by telephoning our order line -0870 240 7535.

## Details of our findings

### Contents

Choice of home (standards 1 - 5)

Individual needs and choices (standards 6-10)

Lifestyle (standards 11 - 17)

Personal and healthcare support (standards 18 - 21)

Concerns, complaints and protection (standards 22 - 23)

Environment (standards 24 - 30)

Staffing (standards 31 - 36)

Conduct and management of the home (standards 37 - 43)

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, 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 are provided with good information about the service before they move in. They are enabled to visit and stay at the home prior to admission.

Evidence:

The Statement of Purpose and Service User Guide were seen and these contained all the necessary information needed to ensure people were informed of the services that were on offer at Terry Yorath. These were written in a format that could be easily understood by people wishing to be admitted.

Two files showed that the staff at the home supported people to visit the service before they were admitted. One person visited the home for two half days before making a choice to move in. Evidence was seen to show people were pre assessed by the home before they were admitted.

## 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.

The care plans and risk assessments implemented by the home show that people are involved in taking decisions and risks regarding the way they live their lives.

Evidence:

People's care plans are detailed and give specific information to staff on care and support needs. Staff spoken had a good knowledge of the needs of the people they were looking after. They said they were actively involved with the care plans and were able to complete the care they assisted each person. The manager and the deputy have received training in care planning and risk assessment. The evidence seen during the inspection shows that care staff continue to complete the care plans and risk assessments with input from the residents and their key workers. Evidence was also seen to show people or their relatives had signed the care plans and risk assessments, to show they agree with them.

The care files showed evidence that regular reviews take place. These included the

Evidence:

individual, their representative and a professional.

The care plans provided evidence that they were linked to risk assessments. The evidence seen showed people's safety and rights are maintained while independence is encouraged.

Staff showed a good awareness of the care plans and risk assessments. One staff member said how useful she had found them when she first started working at the home and was getting to know all the residents' needs. She also said that the management team encourage staff to get involved with and read the care plans regularly.

The care plans and risk assessments show evidence that people are involved with making decisions about the care they receive and also about the risks they take during the course of each day.

## 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 are supported to live independently.

Evidence:

Five people were spoken to during the course of the inspection. They told me that they are supported to develop like skills by the staff that work in the home. They told me that they are also supported to interact with the local and surrounding community. One person said he was able to leave the home whenever he wanted. He could use public transport as well. Another is involved in work at the university. This was followed up in that people's care documentation and this was well documented.

One person said that he is supported by staff to be independent. However he said his independence sometimes went against him as he said that staff sometimes expected him to do everything for himself. He said, " It shouldn't be expected that i can make

## Evidence:

my own cup of tea. Some staff make drinks for others and tell me that i can make my own tea. Thats not right as it is an added pressure for me."

Another person drives his own car which he said was really useful as it gave him a really good feeling of being independent. Another person said that he is often able to access the minibus to get to different places around the community.

One person informed me that he used to have a full time job when he was younger but his condition now restricts him from doing this. However, he said that if someone asked him about voluntary work or paid work he would be interested if he could be supported to do it. He said as yet no one has asked him about the possibility.

Positive comments were given about family support and involvement. Examples of these were, "They are very supportive about ensuring you maintain family links." "My relatives can come to my home anytime. There are no restrictions."

One person in the home felt that there could be more organised activities laid on for people at the home. he said this seems to be done in a random way with no real planning.

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

People said their health needs are monitored and provided for by the care staff. The standard of recording and administering medication does not properly protect people.

Evidence:

Each care file highlighted how people are assisted to meet their personal care needs. People provided good feedback about the supportive nature of most of the staff group. There were some concerns raised about some staff's understanding about what people could and could not do for themselves. One person said staff told him that he had to do certain care tasks for himself even though he said he could not do this. This was fed back to the assistant manager at feedback.

The staff working at the home were observed to be supportive, helpful and respectful during the visit. People living in the home provided positive feedback about the care they received and the manner in which it was provided. One person made comment about no male members of care staff being available. He said, "There are no male members of staff employed. I would like a male member of staff so that i could talk to another male. Its sometimes easier to speak to another man."

## Evidence:

People told me they were supported by staff in the home to meet their health needs. Records showed good evidence to show people are seen by external health professionals when they are needed.

The medication systems and processes were inspected. Evidence was shown that medications are audited on a four weekly basis.

Evidence was seen to show everyone is risk assessed to self medicate. Records were seen to show when someone is assessed as being able to self medicate then this is monitored regularly.

There was some evidence seen to show medications were not being properly recorded on the Medication Administration Record sheets. Medication that is prescribed for two people to take four times per day showed that staff were omitting these tablets for more than three weeks. There were at least four MAR charts which had carer signatures tippexed out after they had been signed for. This evidence suggests staff might be signing the MAR charts before the medication has been administered. This is poor practice. MAR charts contained evidence that people did not sign to show the medication had been administered. Mar Charts had blank stickers placed over prescribed drugs which is supposed to mean this drug is not to be given. This is poor practice as the MAR should show a drug has been discontinued and sent back to pharmacy to show it has been removed by the pharmacist.

The controlled drugs book showed that the controlled drugs belonging to a previous resident should still have been in the cupboard. However these were not there. The assistant manager said that they had been returned to the pharmacy but there was no evidence to show this had been done or that they had been destroyed. This is poor practice.

One person who self medicates had left his drugs on a side table at the entrance of his room. This is poor practice as other people could access these tablets.

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

People are assisted to make complaints but are not always satisfied with the outcome. The safeguarding procedures adopted by the home do not protect the people who live there.

Evidence:

There was a complaints procedure in place and the complaints records showed no complaints have been recorded since the last inspection took place. Everyone is provided with a complaints procedure at the point of entering the home. This is also displayed on a display board in the lounge area. This policy and procedure is currently written in a format that is not easily understood by people who have a learning disability and it is recommended that this be reviewed.

The home does have a safeguarding policy and procedure and this also includes a whistle blowing policy. Staff are provided with training in safeguarding and those spoken to had a satisfactory understanding of what is meant by safeguarding vulnerable people and what action they would take if a safeguarding incident occurred.

Some concerns were raised in relation to how safeguarding incidents are dealt with within the home. One person said that he felt bullied by a member of staff who asked him to do things that he could not do for himself. When these issues were raised with the manager they were not managed following the home's safeguarding policy and

Evidence:

procedure. The process that was followed placed this individual at further risk of harm. This had not been referred to the safeguarding team but was dealt with internally. This is poor practice.

One other person said he felt annoyed by some members of staff who would not help him with personal care matters he could not meet himself. He said, " If those members of staff are on duty then I don't wash my teeth because it's too much hassle. I told the management team about this and they said they would have a word with the staff." This had not been referred to the safeguarding team. It was also highlighted during the inspection that there has been some inappropriate use of names used by staff members when referring to different people who lived in the home. This matter was raised at a staff meeting but had not been highlighted as a safeguarding issue. This is poor practice.

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

The physical layout of the home could be improved to ensure it is more suitable for the needs of the people with physical disabilities. This would improve people's quality of life living in the home.

Evidence:

The deputy manager showed me around the environment and I was also able to look at some individual rooms. It was clear that people had been well supported to decorate their rooms to their own tastes. The home is spacious and well laid out, providing sufficient room for all residents. People's bedrooms have been decorated. All rooms have an en-suite toilet and sink and patio doors that lead out on to some part of the garden.

The home was clean and tidy throughout. There was an issue regarding the heating and hot water provision during the day. The boiler had broken down. People were informed of the problems and portable heaters were purchased for the interim period. By the end of the inspection the hot water was reconnected but the heating would take another few days to repair.

The decor in the communal areas is looking a bit worn. The manager has plans to get

## Evidence:

this area decorated next but has not been improved since the last inspection. Four people spoken to said that the home was in need of redecoration. The deputy manager said that the Trust is awaiting decisions in relation to the future council plans for the building before a major redecoration plan is put into place. People said they were aware of these problems and have attended meeting to discuss the future of the home.

There were some issues in relation to access for people with a physical disability. One person said they could not access the opening mechanism for the door to the patio as it was out of his reach. He said he had to ask staff to open it for him if he wanted to go out. This does not promote independence. There was also concerns about one of the patios paths. This was uneven with some cracked slabs. This poses a risk of falls to people who use that area and action should be taken to rectify the problem. One person who suffers with poor eyesight said the lighting in his room was of a poor quality and did not support his disability needs.

The home has a well kept garden and patio area which residents said they made good use of in the better weather. Residents have been involved in some of the upkeep of the garden and said they enjoyed having barbecues in the summer.

Clinical waste is properly managed and staff wear protective clothing when attending to residents' personal care needs. Most staff have received training in infection control and were able to say what infection control measures are in place.

The home was clean and tidy at the time of the inspection. There were acceptable numbers of toilets and bathrooms available for people to meet their personal care needs.

The deputy manager showed me around the environment and I was also able to look at some individual rooms. It was clear that people had been well supported to decorate their rooms to their own tastes. The home is spacious and well laid out, providing sufficient room for all residents. Residents' bedrooms have been decorated. All rooms have an en-suite toilet and sink and patio doors that lead out on to some part of the garden.

## 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 competent to meet the needs of residents. The recruitment procedures protect people living in the home.

Evidence:

The staff rota was seen and this showed there were consistent numbers of staff on duty at all times of the day. The staff spoken to said that there were enough of them to ensure that people's care needs were met. People who live there said, " There seems to be enough staff on duty. They all seem to know what they are supposed to be doing." " I am always able to get a member of staff when i need one."

There are usually three or four staff on the morning and afternoon shifts. The manager and deputy are also available during weekdays.

Recruitment records showed that people are properly recruited to ensure people are protected.

Staff training was mostly up to date. Topics covered include, moving and handling, safeguarding adults, first aid and food hygiene. The deputy manager said that any specialist training that is needed is arranged through district nurses,

Evidence:

physiotherapists or dieticians. Good records are kept of staff's training and when their updates are due. The manager assesses this regularly to make sure training doesn't get missed. Positive feedback was obtained from staff in relation to training and the support they get from the manager. The manager is aware of the training updates that are needed and has nominated staff for training courses in the near future.

The organisation is now using the common induction standards for all new staff and has an information pack on physical disability that is given to all staff. records showed evidence that staff completed there full induction.

## 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 home is well managed, the interests of the residents are seen as important to the manager and staff. However, the systems for ensuring the safeguarding of vulnerable adults must be improved.

Evidence:

The home has an experienced manager who has now completed the National Vocational Qualification level 4 and Registered Managers Award. A service director visits the home on a monthly basis to carry out Regulation 26 visits. A report of these visits is made showing details of any action to be taken to improve the service. These reports did not identify any of the concerns highlighted at the inspection relating to poor safeguarding and poor medication administration.

The organisation also carries out service reviews, as part of its quality assurance programme. This also includes gaining the views and opinions of residents, relatives and staff. The manager has also completed training in topics such as report writing and care planning.

## Evidence:

Staff carry out weekly or monthly health and safety checks around the home such as fire alarms, emergency lighting and water temperatures. Maintenance records are well kept. Environmental risk assessments are completed and were up to date.

Accident or incident reports are completed properly. The manager analyses accidents and incidents to see if there are patterns, trends or ways of avoiding future accidents. This is good practice.

The home has a comprehensive range of policies and procedures in place, which promote and protect residents' health and safety.

The management systems used for protecting vulnerable adults have been highlighted as lacking and need improved.

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 |
|-----|----------|------------|--|----------------------|
| 1   | 20       | 13         | <p>People living in the home must receive their medication in line with the British Royal Pharmaceutical Guidelines.</p> <p>This will ensure people receive their medication correctly and the records evidence good administration.</p> | 15/05/2009           |
| 2   | 23       | 13         | <p>People living in the home must be protected by robust safeguarding practices and procedures.</p> <p>This will help ensure people are safe and protected</p>   | 29/05/2009           |
| 3   | 24       | 23         | <p>The facilities in the home must be altered to ensure they are suitable for people with physical disabilities.</p> <p>This will help support people to have a better quality of life.</p>  | 29/05/2009           |
| 4   | 38       | 12         | <p>The management systems for monitoring the</p>   | 30/04/2009           |

|  |  |  |  |  |
|--|--|--|--|--|
|  |  |  | <p>administration of medications and reviewing safeguarding concerns must be more robust.</p> <p>This will help further protect the people living at the home.</p> |  |
|--|--|--|--|--|

### 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   | 18                | It is recommended that the gender mix of the staff group is reviewed to ensure the privacy and dignity of all people living in the home is promoted.      |
| 2   | 22                | It is recommended the complaint policy is reviewed and altered to ensure it is written in a format where all people living in the home can understand it. |
| 3   | 24                | The home should ensure that all parts are accessible to people with physical disabilities.  |

## Helpline:

**Telephone:** 03000 616161 or

**Textphone:** or

**Email:** [enquiries@cqc.org.uk](mailto:enquiries@cqc.org.uk)

**Web:** [www.cqc.org.uk](http://www.cqc.org.uk)

We want people to be able to access this information. If you would like a summary in a different format or language please contact our helpline or go to our website.

Copyright © (2009) Commission for Social Care Inspection (CSCI). This publication may be reproduced in whole or in part, free of charge, in any format or medium provided that it is not used for commercial gain. This consent is subject to the material being reproduced accurately and on proviso that it is not used in a derogatory manner or misleading context. The material should be acknowledged as CSCI copyright, with the title and date of publication of the document specified.