

Key inspection report

Care homes for adults (18-65 years)

Name:	17 Banstead Road
Address:	17 Banstead Road Epsom Surrey KT17 3EZ

The quality rating for this care home is:	two star good service
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A quality rating is our assessment of how well a care home is meeting the needs of the people who use it. We give a quality rating following a full review of the service. We call this full review a 'key' inspection.

Lead inspector:	Date:
Deborah Sullivan	2 7 0 1 2 0 1 0

This is a review of quality of outcomes that people experience in this care home. We believe high quality care should

- Be safe
- Have the right outcomes, including clinical outcomes
- Be a good experience for the people that use it
- Help prevent illness, and promote healthy, independent living
- Be available to those who need it when they need it.

The first part of the review gives the overall quality rating for the care home:

- 3 stars - excellent
- 2 stars - good
- 1 star - adequate
- 0 star - poor

There is also a bar chart that gives a quick way of seeing the quality of care that the home provides under key areas that matter to people.

There is a summary of what we think this service does well, what they have improved on and, where it applies, what they need to do better. We use the national minimum standards to describe the outcomes that people should experience. National minimum standards are written by the Department of Health for each type of care service.

After the summary there is more detail about our findings. The following table explains what you will see under each outcome area.

Outcome area (for example Choice of home)

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

This box tells you the outcomes that we will always inspect against when we do a key inspection.

This box tells you any additional outcomes that we may inspect against when we do a key inspection.

This is what people staying in this care home experience:

Judgement:

This box tells you our opinion of what we have looked at in this outcome area. We will say whether it is excellent, good, adequate or poor.

Evidence:

This box describes the information we used to come to our judgement.

We review the quality of the service against outcomes from the National Minimum Standards (NMS). Those standards are written by the Department of Health for each type of care service.

Copies of the National Minimum Standards – Care Homes for Adults (18-65 years) can be found at www.dh.gov.uk or bought from The Stationery Office (TSO) PO Box 29, St Crispins, Duke Street, Norwich, NR3 1GN. Tel: 0870 600 5522. Online ordering from the Stationery Office is also available: www.tso.co.uk/bookshop

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

- Regulating health and adult social care services to ensure quality and safety standards, drive improvement and stamp out bad practice
- Protecting the rights of people who use services, particularly the most vulnerable and those detained under the Mental Health Act 1983
- Providing accessible, trustworthy information on the quality of care and services so people can make better decisions about their care and so that commissioners and providers of services can improve services.
- Providing independent public accountability on how commissioners and providers of services are improving the quality of care and providing value for money.

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Information about the care home

Name of care home:	17 Banstead Road
Address:	17 Banstead Road Epsom Surrey KT17 3EZ
Telephone number:	02087867718
Fax number:	02087867694
Email address:	
Provider web address:	

Name of registered provider(s):	Leonard Cheshire Disability
Name of registered manager (if applicable)	
Mr Timon Palmer	
Type of registration:	care home
Number of places registered:	6

Conditions of registration:		
Category(ies) :	Number of places (if applicable):	
	Under 65	Over 65
learning disability	6	0
Additional conditions:		
The maximum number of service users to be accommodated is 6.		
The registered person may provide the following category/ies of service only: Care home only (PC) to service users of the following gender: Either Whose primary care needs on admission to the home are within the following categories: Learning disability (LD)		

Date of last inspection								
Brief description of the care home								
<p>17 Banstead Road is registered for up to six adults who have a learning disability. The home is situated on the outskirts of Ewell and close to Epsom.</p> <p>The home is an older style property, it provides each service user with their own bedroom. Toilet and washing facilities are situated on both floors of the building. There are communal areas for the use of service users. There is limited parking available, the home is well situated to allow access to local community facilities.</p>								

Brief description of the care home

The weekly fee for the service at the time of the key inspection on 27th January 2010 was two thousand and seventy two pounds.

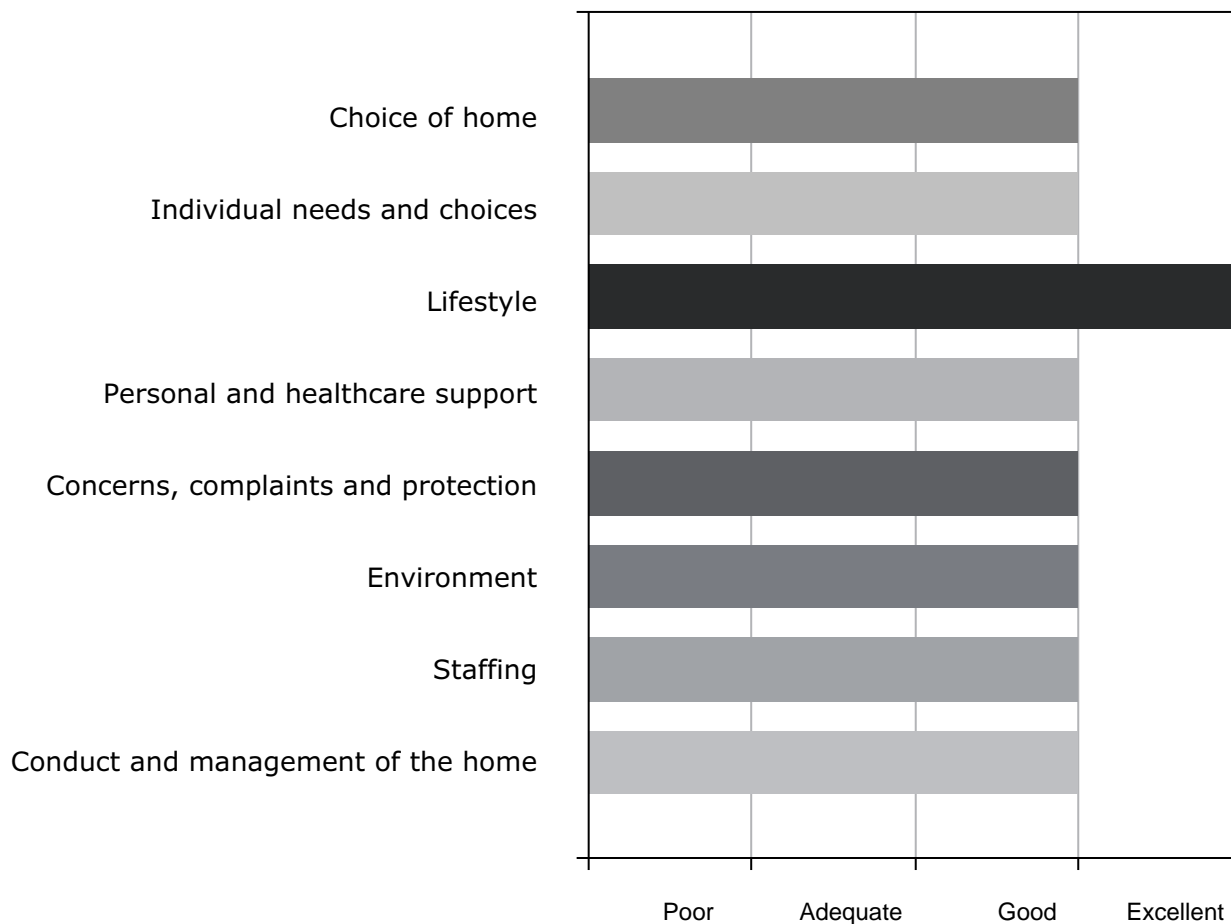
Summary

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

The quality rating for this care home is:

two star good service

Our judgement for each outcome:



How we did our inspection:

This was the first key inspection of the service, the inspection lasted a little under six hours and short notice was given to make sure that staff and service users would be at the house.

During the visit time was spent with service users, the registered manager, support staff and the befriender of one of the service users.

A tour of the building took place assisted by a service user and a range of documents and records were examined including care plans, staff records, medication records and staff training information.

The AQAA (Annual Quality Assurance Assessment) completed by the registered manager and survey forms returned to us by service users, relatives and advocates and staff also provided evidence to inform the inspection. Some comments in the surveys are included in the main text of this report.

What the care home does well:

The home has a welcoming and friendly atmosphere in which the people who live there can feel well supported and safe. Staff have remained consistent since the service changed to a new provider, and there is very little staff turnover therefore service users are comfortable with staff and who are very familiar with each persons needs.

Care plans are of good quality, person centred, kept up to date and service users are involved in developing their plans. Health needs are well met and medication procedures are thorough. Each persons medication is regularly reviewed.

Service users are supported and encouraged to reach their potential for independence and to make choices about their lives.

The home takes complaints seriously and takes prompt action to resolve them and put measures in place to make sure they are not repeated.

Staff are well trained and knowledgeable about service users needs, they are friendly and are genuinely interested in the well being and lives of those they support.

The home is well managed and all the recording inspected was of a very good standard, current and clear.

What has improved since the last inspection?

Not applicable as this was the first key inspection of the home.

What they could do better:

The home is rather shabby looking especially in shared areas such as the lounge, it needs some redecoration and refurbishment to keep it up to standard, and potential hazards such as splintering areas of woodwork and worn carpets must be repaired and replaced.

The home was not fully staffed and there was some use of bank and agency staffing. Recruitment to fill the vacancies should be considered to include the appointment of a deputy manager to support the registered manager.

If you want to know what action the person responsible for this care home is taking following this report, you can contact them using the details on page 4.

The report of this inspection is available from our website www.cqc.org.uk.

You can get printed copies from enquiries@cqc.org.uk or by telephoning our

order line 0870 240 7535.

Details of our findings

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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.

Information about the home is available to prospective service users and their representatives which is up to date and clearly reflects the service provided.

The needs of prospective service users are thoroughly assessed before a place at the home is offered and admissions only take place if the home can be sure needs can be met.

Evidence:

The home had not admitted any new service users since it became registered with a new provider, it had two vacancies and there were no current plans for new admissions. The four people living at the home were all settled there and used to living together as a group.

The home has an admissions procedure which involves assessment of prospective service users and a personalised transition to the home which would involve spending time there to become familiar with other service users and staff. Two service users who returned surveys both told us that they had been asked if they wished to move to

Evidence:

the home and had received enough information about it.

Leonard Cheshire Disability became the registered provider of the service in October 2009, the statement of purpose and service users guide have been revised to reflect the service it offers. The information is presented in text and pictorially and is clear and up to date.

Service users have been given new placement agreements and those seen on care plans had been signed by them.

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.

Care plans are person centred and reflect service users needs, preferences and abilities. Risks associated with activities are assessed and risk assessments developed.

Service users have opportunities to make choices about their lives on a daily basis and are encouraged to contribute to the running of the home.

Evidence:

Care plans are person centred and contain clear up to date and good quality information. Service users are involved in the development of their personal plans and can access them at any time. The two care plans sampled contained documents that had been signed by service users such as medication consent forms, and there was clear information about likes and dislikes, daily routines and choices. The people important in service users lives such as relatives, carers and health and social care professionals are included in relationship circle pages. Pictorial information is included in most sections of the care plan. Care plans are regularly reviewed by keyworkers

Evidence:

and there were minutes on file of annual reviews involving care managers. Current signed and dated risk assessments were in place. The plans also include health information and daily diary sheets which give information on daily activities and events. Service users have weekly activity planners that are separate from the main care plans.

Decision making is supported by the home, this was observed during the visit, for example one person feeling under the weather had chosen not to attend a day service and returned to bed after breakfast. Another chose to accompany staff driving a service user to an activity, their personal wish not to participate in any regular structured activity is respected whilst staff and their care manager are encouraging them to take up some planned activities or work again. Service users are supported to make choices about daily routines such as when they go to bed or get up and what to eat. Support with personal finances is given at the level that suits each person and independence with personal spending money is encouraged whilst advice on spending sensibly is promoted.

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

Service users have opportunities to take part in a range of activities at home and in the community and to develop independence skills.

Contact with friends and relatives is promoted and the home explores advocacy for those needing it.

Service users help with planning menus and meals are healthy, well balanced and varied.

Evidence:

Each person has their own weekly activity planner, the home supports service users to attend and take part in a good variety of activities at home and in the community and encourages them to take up new activities. One person has had experience of being in paid employment. Independence in accessing the community is promoted, one person

Evidence:

goes to local shops by themselves and at times uses buses to travel to towns further afield. Service users are encouraged to help with daily domestic tasks such as keeping their rooms clean and tidy, one person said they do their own laundry.

During the visit one service user went out to a Seeability day service, another attended an art and craft session in the community with their befriender, one cancelled their day attendance at a day centre due to illness and another had who has chosen to mainly take part in activities at home and provided by it went shopping and for a drive. Other activities include swimming, going out for meals and attending community events. Spiritual needs are respected and one person regularly attends church.

Service users go on annual self funded holidays, last year they all went to Crete together and this years holiday is to be planned. Contact with relatives is supported, one person spends every other weekend with their family and another telephones relatives regularly. The other two service users have been assisted by the home to access an advocacy service, one has a befriender from the service who they have known for several years and is waiting for an advocate, and another has a befriender and an advocate.

Menus are healthy and varied, the three people at home were joined for lunch. They had been asked what they would like, menus are written up but are flexible, and the meal of quiche and freshly made sandwiches with a variety of fillings was well presented. One service user had an alternative they had requested and the person feeling unwell was offered soup as well which they accepted. The main meal is in the evening. Breakfast is taken when service users choose as they rise at different times. Menus are written in consultation with service users, there are main weekly menus and the daily menu is displayed on a soft board in the dining room in pictures and text. Another board gives daily information such as the date, weather and any special events.

During the visit service users accessed all shared areas of the building freely and spent time with others, on their own and in their rooms as they preferred.

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.

The health and personal care needs of service users are well met and personal care preferences are respected.

The medication systems in place are robust and protect service users.

Evidence:

Personal health action plans are included as part of the main care plan. As with other sections of the care plan there was evidence that service users had been involved in completing the health sections. Health information is reviewed six monthly and some information is presented pictorially. Service users are supported to attend appointments with health professionals such as GPs, chiropodists, psychiatrists and dentists, and any concerns about health are promptly addressed by the home. The AQAA (Annual Quality Assurance Assessment) tells us that each person has had dementia and osteoporosis screening assessments and they have annual health checks with the GP.

Service users are encouraged to be as independent as they can with personal care, there are three men and one woman living at the home, male and female staff

Evidence:

are on each daytime shift so that personal care preferences can be met and the dignity of service users is preserved.

Each service user has a behavioural assessment and measures are put in place to minimise any risks that may occur as a result of behaviours that could cause harm to the service user or others. Where a service user needs support to make decisions about medical treatment they are referred for assessment by an IMCA (Independent Mental Capacity Advocate) for advice on seeking consent. The home had pursued this effectively regarding dental treatment one person needed.

There are medication policies and procedures in place, the majority of staff are trained to administer medication and refresher training is given. Medication is safely stored and medication administration record sheets sampled were correctly filled in. Each has a photo of the service user and service users sign consent forms giving agreement for the administration of their medication. There is internal medication auditing, stock is checked daily and weekly by a shift leader. Currently no one self medicates. A doctor had very recently visited to review medication for each person, no changes had been made. The current pharmacy used does not provide an external medication auditing service, the manager said they may change to one who does so they can benefit from this service.

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.

The home has a complaints procedure and service users and others can feel confident that any concerns will be listened to and addressed.

The home has policies and procedures in place to make sure that service users are protected from abuse.

Evidence:

The home has a complaints procedure that is available to service users and others, it is included in information about the home. No complaints have been received about the service whilst the manager was able to provide evidence that they have previous experience of dealing with complaints, that they are taken seriously and addressed within given timescales and measures are put in place to prevent them recurring.

Service users who returned surveys said they knew how to complain and who to speak with if they felt unhappy. The home has not had any significant staff turnover since the new provider took over, and as the service users have all lived there some time staff are well aware of how to gauge people's moods and tell if they are feeling upset or unhappy. Some service users would need support to raise a formal complaint depending upon its nature, all have access to relatives or a befriender or advocate. There are internal safeguarding vulnerable adults procedures and the home has a copy of the Surrey Multi Agency Safeguarding procedures that are accessible to all staff. No safeguarding alerts have been received regarding the service and staff spoken with

Evidence:

were aware of the homes procedures. All staff receive safeguarding training and there is a reminder on the office wall of action to take if abuse is suspected.

There are thorough processes in place to support service users with managing personal finances, all the service users have appointees and bank accounts, one person still has an appointee from the ex provider a new appointee is being sought. Spending money is safely kept at the home and records are kept of any items purchased. Amounts checked for two service users were correct.

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.

Service users live in an environment that is homely, clean and hygienic and that meets their needs.

Bedrooms are personalised and reflect the personalities of service users.

Some areas of the building require attention and upgrading to make sure they are safe, any potential hazards are removed and the standard of the accommodation does not deteriorate.

Evidence:

The home is well presented, clean, hygienic and has a pleasant family atmosphere. A service user enthusiastically assisted with a tour of most parts of the home alongside the manager and support staff. The living room is large and comfortable with a TV, chairs and settees, it is pleasantly decorated although there were areas of plaster work and wooden surrounds that were peeling or splintered and some seat coverings were shabby and worn looking. The kitchen is domestic sized, clean and well ordered again it was looking a little worn. There is a pleasant dining room and well ordered office.

Bedrooms are located on the ground floor and upstairs, the ground floor bedroom was

Evidence:

visited with the service user who occupies it, it is the only room with a shower and toilet en suite. Two upstairs bedrooms were visited with service users permission. All the bedrooms seen were well decorated, clean and were personalised with items such as TV's, pictures and photos. There are two bathrooms, one on each floor that offer a choice of bath or shower, one person said they preferred showers. No domestic staff are employed and staff are responsible for laundry, cleaning and cooking, with service users being supported to help as well. One service user pointed out which mops and buckets were used for different areas and was clearly very familiar with the routine.

Overall staff are doing their best to keep the home maintained to a good standard, looking fresh and a pleasant place to live although there are areas, mainly the shared ones, that are very "tired looking" with chipped or peeling paint or worn furniture that are in need of upgrading. One part of the stair carpet was torn and other areas of carpeting were thinning and worn looking. Staff were aware of hazards and were doing their best to minimise them.

There is a safe front a back garden that is well maintained with an accessible patio area and patio furniture which is well used in good weather.

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.

The needs of service users are met by a team of staff who are experienced and competent and knowledgeable about their needs..

The recruitment procedures in place protect service users.

Evidence:

The home was not full at the time of the visit and the staffing levels reflected this. There were enough staff on duty to make sure that the needs of service users were met. There were vacancies for a deputy manager and two support workers, the manager said that the vacancy situation was to be looked into by the organisation. Gaps in the rota sometimes needed to be filled by bank or agency staff. The staff team is diverse and there were male and female staff on duty including senior support staff. The current staff team are well established, know the service users well and are knowledgeable about their individual needs. Service users and staff were observed to have a good rapport and be comfortable with each other, staff gave friendly support and when needed clear direction to people.

The majority of staff have gained an NVQ (National Vocational Qualification) in care at

Evidence:

level two or above. The registered manager had recently met with the organisations training manager, a training plan for this year has been prepared that highlights where core training updates are needed and planned.

No new recruitment has taken place since the change of provider but organisational recruitment processes are in place and each member of staff is expected to sign an annual declaration that there has been no change to their CRB status (Criminal Records Bureau).

Staff are allocated specific responsibilities one said they compile the rota and the manager was hoping that a senior staff member could go on training so they could be responsible for some supervisions. There had been gaps in regular staff supervision due to the temporary absence of the manager that had coincided with the period when there was change of provider, it appears that with the handover supervision and appraisal arrangements had been overlooked. The manager has now started reinstating formal supervision and appraisal arrangements. Staff did not express that they felt they had been unsupported and experienced senior staff had taken on some aspects of supporting others. All the staff met during the visit were friendly and confident.

Four members of staff returned surveys, they told us that they were provided with the knowledge and support necessary to meet service users needs. Comments on surveys returned by five members of staff include, "The home is friendly and has a good atmosphere to work in", "We have good effective communication between the staff team, residents, parents, day services and the multi disciplinary team" and "The home understands service users needs and strengths". Two members of staff were spoken with individually one commented "staff are very caring".

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

The home is well run and the health and safety of service users and staff are protected by the systems and policies and procedures in place.

Internal quality assurance takes place which includes seeking service users views.

Evidence:

Leonard Cheshire Disability became the registered provider of the service in October 2009, the registered manager and staff compliment transferred with the service. The registered manager is supported by the operations manager who visits the home six weekly. The home is well managed and has an inclusive atmosphere, although it was lacking a deputy manager although senior staff are competent and support the manager well. Comments on relative/carers/advocates surveys included, "This home has a good welcoming atmosphere and the residents appear to be well cared for and supported" and another said that the service did well at "Looking after (service users) needs in every way".

Evidence:

There are systems in place to monitor the quality of the service, one of the organisations managers visits monthly and compiles a report on their findings as is required, the most recent visit had taken place the day before the inspection. It was too soon for annual quality assurance surveys to have been sent out but the manager had samples of previous ones completed. Service users and other stakeholders were to be surveyed this year and the format was awaited. The views of service users are also sought through discussion at keyworker meetings and monthly minuted service user meetings. There are monthly health and safety audits and a fire audit had been completed shortly after the change of provider.

Policies and procedures are in place for the safe and efficient running of the service, those seen such as safeguarding were clear for staff to follow. All the recording inspected was of a good standard and documents requiring signing and dating were fully completed such as risk assessments. Personal information is securely kept whilst service users can always have access to their care plans.

The home is settling into the new organisation and the manager was positive about arrangements for support from the senior managers and the organisation as a whole. There are plans for improving the home for example in terms of environment, staffing and activity provision.

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	24	13	<p>R13(3)(a)</p> <p>The registered person shall ensure that all parts of the home to which service users have access are so far as reasonably practicable free from hazards to their health and safety.</p> <p>A plan for the refurbishment of areas of the home that need upgrading or present a health and safety hazard must be developed with timescales for work to take place.</p>	30/04/2010

Recommendations

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

No	Refer to Standard	Good Practice Recommendations

Helpline:

Telephone: 03000 616161

Email: enquiries@cqc.org.uk

Web: www.cqc.org.uk

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