



Making Social Care
Better for People

Inspecting for better lives

Key inspection report

Care homes for adults (18-65 years)

| | |
|-----------------|--|
| Name: | Westacres |
| Address: | 65-67 Somerset Road Basildon Essex SS15 6PP |

The quality rating for this care home is:

two star good service

A quality rating is our assessment of how well a care home, agency or scheme is meeting the needs of the people who use it. We give a quality rating following a full assessment of the service. We call this a 'key' inspection.

| | |
|------------------------|-----------------|
| Lead inspector: | Date: |
| Alan Thompson | 0 3 0 7 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 or bought from The Stationery Office (TSO) PO Box 29, St Crispins, Duke Street, Norwich, NR3 1GN. Tel: 0870 600 5522. Online ordering from the Stationery Office is also available: www.tso.co.uk/bookshop

The Commission for Social Care Inspection aims to:

- Put the people who use social care first
- Improve services and stamp out bad practice
- Be an expert voice on social care
- Practise what we preach in our own organisation

Our duty to regulate social care services is set out in the Care Standards Act 2000.

Reader Information

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

Information about the care home

| | |
|-----------------------|--|
| Name of care home: | Westacres |
| Address: | 65-67 Somerset Road Basildon Essex SS15 6PP |
| Telephone number: | 01268540734 |
| Fax number: | |
| Email address: | westacres@fsmail.net |
| Provider web address: | |

| | |
|---------------------------------|--------------------------|
| Name of registered provider(s): | Minster Pathways Limited |
| 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 |
| mental disorder, excluding learning disability or dementia | 6 | 0 |
| physical disability | 2 | 0 |
| Additional conditions: | | |

| | | | | | | | | |
|-------------------------|--|--|--|--|--|--|--|--|
| Date of last inspection | | | | | | | | |
|-------------------------|--|--|--|--|--|--|--|--|

Brief description of the care home

Westacres is a large detached house situated in a residential area of Laindon within easy reach of local amenities, shopping facilities and a local park. There is public transport close by for access to the main Basildon town centre and other areas further away.

The premises comprise two houses that have been joined to provide accommodation for six residents with staff facilities. The home has a well-fitted kitchen. There is a separate dining room that leads to a large lounge and can be separated by folding doors. A conservatory overlooks the garden to the rear of the property and there are patio doors opening to the garden.

There are two bedrooms on the ground floor, one of which has a separate lounge and en-suite shower and wc. There is a separate assisted bathroom with wc. Stairs lead to

Brief description of the care home

the first floor where a further four bedrooms are provided. Two of these have a separate lounge and three have an en-suite shower and wc. All remaining bedrooms have washbasins. In addition there is a separate assisted bathroom and wc.

The gardens to the rear of the premises are laid mainly to lawn and shrubs and seating is provided. The gardens are secure. The home is wheelchair accessible on the ground floor only. Ramps have been installed to allow wheelchair access. Parking is available on the driveway and in the road outside.

The range of fees charged to individual service users is according to assessed needs and the agreed care package provided. Additional charges incurred to service users includes toiletries and personal items.

Care Quality Commission (CQC) inspection reports can be obtained from the home, or via the CQC internet website, www.cqc.org.uk

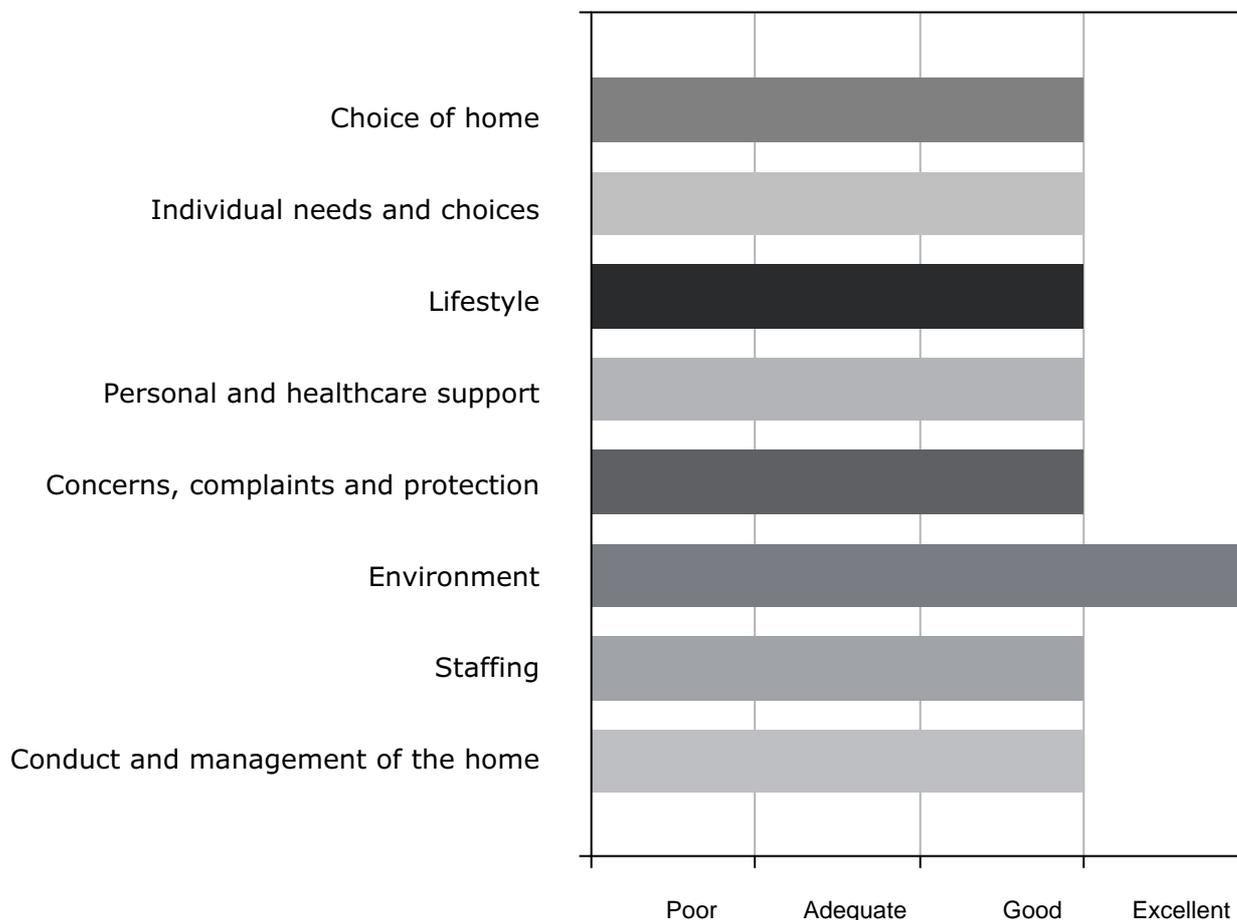
Summary

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 unannounced key inspection took place on Friday 2nd July. The new manager (in post since June 2009) and the registered provider's area manager were both present and assisted us in a professional and helpful manner. Our most recent inspection prior to this visit was on 26th July 2007.

The content of this report reflects the inspector's findings on the day of the inspection along with information provided by the service and feedback by service users, staff and other parties.

The management of the home completed and returned their Annual Quality Assurance Assessment (AQAA) to us in time for the inspection. This document gives homes the

opportunity of recording what they do well, what they could do better, what has improved in the previous twelve months as well as their future plans for improving the service. Some of the information and detail provided within the AQAA has been included in this report.

Discussions were entered into with the manager, area manager, service users and staff on duty. CQC survey questionnaires were also provided for service users, staff and stakeholders to complete. Unfortunately none were returned to us in time for any comments in these to be included in this report.

Random samples of records, policies and procedures were inspected and a tour of parts of the premises and grounds took place.

All matters relating to the outcome of the inspection were discussed with the manager of the home, with full opportunity for discussion given and/or clarification where necessary.

What the care home does well:

Westacres provides a relaxed, friendly and welcoming atmosphere.

The accommodation provided is very spacious and the decoration and facilities in the home offer service users an excellent environment to live in.

Staff on duty were knowledgeable about service users care needs and the staff team worked together well and were enthusiastic about their work.

Service users are involved, as appropriate, in the day to day planning of their own care and in the way the home is managed on a daily basis.

What has improved since the last inspection?

The format used for care support plans had been updated to include more detailed needs and the inclusion of short term as well as long term goals.

Full recruitment records were in place for all staff employed since our last inspection.

The hallway and some bedrooms had been redecorated. There was a new fish tank in the lounge and a new washing machine had been installed in the laundry room.

What they could do better:

The quality assurance process needs to include evidence of the findings and of any actions taken by the registered provider, following the annual gathering of views on the quality of service provided from service users and stakeholders.

Staff should receive training on managing challenging behaviours and records should be kept of the dates and issues discussed at staff meetings.

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

The report of this inspection is available from our website www.cqc.org.uk. You can get printed copies from enquiries@cqc.org.uk or by telephoning our order line –0870 240 7535.

Details of our findings

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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 considering moving into the home can be confident that the admission processes ensures that the home can meet their needs.

Evidence:

The current service users are placed and funded by local authorities. Records confirmed that, except with an emergency admission, these organisations had provided a full assessment of needs to the home before admission. In addition to this the area manager said senior staff from the home carry out a written pre-placement assessment of needs for all prospective service users prior to admission.

Two new service users had moved into the home since our last inspection and the admission information for these people was looked at. Included was information on the individual's background, with assessed areas of need under headings that covered, health and medication, mobility, personal hygiene, domestic skills, vision and hearing, communication, family contact, recreation, work and employment, health and safety awareness, behaviours, social skills and travel support needs.

Evidence:

Discussion with service users confirmed that they were asked if they wanted to move into this home and could look around before deciding. One said it was their choice to live at Westacres.

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 information in care plans ensures that people's needs could be met in a way they would wish.

Evidence:

At the time of this inspection there were four service users living at Westacres. Two of their support/care plan files were inspected. These had risk assessments with guidelines for staff on methods to minimise risk and had been reviewed. Files seen included assessment consideration of behaviours and a mental capacity assessment. Staff had not been trained on managing challenging behaviours. The manager showed us a written booking form to show that this training was planned for August 2009 but until this takes place we will include a recommendation on this issue in this report.

Daily assessed needs were listed under individual headings including, accommodation, personal support, communication, physical health, mental health, professional input, cultural faith needs, special equipment needs, educational and employment needs,

Evidence:

family and social contacts, financial and risk management needs. Service users had a support plan for each area of assessed need and these showed both short and long term goals and interventions needed from staff to support people.

Support plan reviews take place at monthly meetings between the service user and their key worker. These were documented and covered the areas identified in the persons support plans. Care reviews included recorded notes of the service users views and those spoken with said they were included in the care planning process.

Healthcare issues were seen to be recorded on service users files including visits to medical professionals, social workers, hospital visits, GP consultations, dentists, opticians and chiropodists. Also seen recorded were notes of full reviews of placement undertaken with the placing authority and the service user.

The manager confirmed that the monthly meetings between the service user and their key worker included discussion on house issues, activities and holidays. This was to ensure that their views and opinions about the service are listened too and taken account of. Service users spoken with confirmed that they thought they are fully included in day to day decision making within the home, with staff offering choices around routines and events. This two way interaction was evident throughout our visit.

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.

Service users are encouraged to participate in a range of social and leisure opportunities that meet their expectations. Meals and mealtimes are flexible and suit the lifestyle of people living at the home.

Evidence:

One service user has a voluntary job in a shop that they hoped would lead to a paid job. Another service user was looking into the possibility of undertaking voluntary work to gain experience for working in the future. Staff were supporting the service user with this aim. College and community courses are attended by service users and 1 to 1 staff support to access community interests and activities will be provided if necessary. Two people independently go to the local shops close by, but access to the wider community for all service users is will staff support using the seven seat vehicle based at Westacres.

Evidence:

College courses booked for the coming term include gardening, improving independence, cooking, reading, maths, life skills, community awareness, music and dance. Other day time community based activities include people attending a weekly advocacy group and a weekly club.

Records had been kept of daily activities offered and all service users had a weekly activity plan showing the options available. Activities were recorded on the individual's daily record sheets and showed that people took part in, arts, games, discussions, cinema, shopping trips, holidays, shows, outings, meals out and bowling. Outings had included the coast, a zoo and parties at other homes. All service users had recently been on holiday with staff to Norfolk, and one was due to go abroad soon with their family.

Service users confirmed that they regularly attend many of the activities available and that they enjoyed what they did. They also said that staff offered them a variety of ideas on things to do.

Most of the service users see their families and friends regularly with staff offering to drive the service user home to ensure regular contact is supported. Contact includes regular visits home, including overnight stays. Records had been kept of family contact. The manager confirmed that said staff enter bedrooms only with the individual's permission, unless the welfare or well being of the service user is in question. Some have keys to their rooms but others do not, either by choice of because of the assessed risks.

During this inspection staff were observed to interact appropriately with service users and appeared to always use the individual's preferred form of address. Discussions between service users and staff about routines and choices were taking place throughout the inspection and the atmosphere in the home was supportive and friendly. Service users were very relaxed about making their views and opinions known to staff.

Nutrition records were looked at and evidenced a varied and balanced diet. The manager said that service users usually eat the main evening meal in the dining room, but may eat in other rooms, or the garden, if they wish. Breakfast and lunch were seen to be taken at times according to service users choices and their daily routines.

Menus are on a four week rotation and the manager confirmed that service users food preferences and likes/dislikes form the basis of menu planning. Service users usually accompany staff on weekly food shopping trips and will take part in meal preparation

Evidence:

and clearing up as part of a planned activity. Some will also independently go to the local shops to buy daily items such as milk or bread.

Service users told us that they liked the food at Westacres, and that they liked eating out as well.

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 living at Westacres can expect to receive support in an appropriate and dignified way that meets their needs.

Evidence:

Care records and discussion with service users and staff confirm that people are fully supported in making their own choices around clothing styles, hairstyles and general appearance. Assessment records included preferences around daily routines, and details of the levels of personal care support required were also seen documented.

Service users spoken with confirmed that they liked the staff and were satisfied with the care provided them in the home.

Care plans contained assessment of healthcare needs. The current service user group are offered staff support and guidance in recognition of their individual healthcare needs and to access community healthcare facilities.

Service users regularly visit community based healthcare services including consultant

Evidence:

psychiatrists and dentists with staff support. On-going healthcare needs were recorded within individual care plans and updated in the daily care notes.

All service users accommodated were receiving full staff support with their medication needs and files included a signed form consenting to staff providing this support.

Some service users did not appear to have a full understanding or awareness of the medical reasons for medication regimes prescribed to them. The manager confirmed that if service users refused medication then advice and encouragement is offered to them to understand the reason for the prescribed dosage. If they continue to refuse their prescribed medication the GP is contacted for advice.

The home's written medication procedure/policy clarified policies on homely remedies, side effects of the medicines prescribed, the storage of medicines and of administering prescribed dosages. There was also a written protocol on administering PRN as required medications. Records were seen relating to the re-ordering and returns of unused medication. Two staff sign when medication is administered and a record was seen for medication taken out of Westacres when service users go home or away. A random sample of medication administration records and stocks of current medication were looked at. No errors were noted.

We saw training records to show that staff had received training from the pharmacist on the medication system used at Westacres. There were also assessments of practice competency, risk assessments on medication and the area manager carries out a monthly medication audit to try to ensure best practice is maintained.

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.

Practices in the home safeguard service users and ensure that concerns are listened to and addressed.

Evidence:

The manager had a complaints procedure in place, which clarified the complaints process and the timescales that the manager should respond to the complainant.

There was a pictorial style complaints procedure in service users files for people who would not have the ability to follow any written procedure. The document seen clearly indicates to service users that they have a right to feel sad or feel unhappy and that they should tell somebody. Comments made by service users verbally confirmed that if they were unhappy they would speak with staff or speak with the manager. All but one service users have active involvement with their respective families and all had regular contact with external health/social care professionals. The home has links, including fortnightly visits to the home, with the local advocacy service and was able to demonstrate that this service is used as appropriate to ensure that service users wellbeing is paramount to any given situation. Some service users also attend a weekly group run by the advocacy service away from Westacres.

There was a set template form for recording complaints and a compliments/complaints record book. There had been one compliment and one complaint recorded in the 12

Evidence:

months leading up to this inspection. Records seen and discussion with management evidenced that the issues raised are being properly investigated.

Also seen in the home was a copy of the joint Essex/Thurrock/Southend safeguarding adults policy and procedural guidelines. This document included detailed guidance for staff on the adult protection procedures and on types of abuse that may occur.

Records seen showed that staff are trained on safeguarding vulnerable adults from abuse. Staff spoken with understood what was meant by safeguarding adults from harm and said that if they suspected an issue then they would contact the manager or other senior person. Also in place was a whistleblowing policy which clarified staffs responsibility to report any suspected abuse.

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 **excellent** 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 a spacious, well maintained, comfortable, clean and homely environment.

Evidence:

During the inspection a partial tour of the home was made accompanied by staff and the manager. The communal areas and bedrooms looked at were very spacious and clean. They were also impressively well furnished, decorated and maintained. The kitchen was well equipped and maintained, and since our last inspection the home have achieved a '5 star standard' award from Basildon Council following a food hygiene inspection of the kitchen and the food handling facilities at Westacres.

All private rooms are singles with two of these on the groundfloor and the remaining four on the first floor. All private rooms seen had wardrobes and adequate storage facilities.

Four bedrooms had private shower and wc, the others had a wash basin. Communal bathing facilities and toilets comprised of an assisted bath with wc on the groundfloor, and a further bath with wc on the first floor. Staff facilities provided include a good sized office on the first floor with a wc and shower, and a second staff wc on the

Evidence:

groundfloor.

Some of the service users spoken with showed us around their rooms and said they liked their rooms and that staff helped them keep their rooms clean and decorated. They also said they were involved in choosing their furniture and the colour of their rooms.

The manager confirmed that service users are provided opportunities to personalise their rooms to their own tastes and requirements, and rooms inspected included various items of personal possessions according to individual choices.

The laundry room was on the first floor and was spacious and well equipped. There was slight staining to the floor covering in front of the new washing machine that had been installed shortly before our visit. Management advised this had been left following removal of the previous old washing machine which had been bigger than the new machine and the area was due to be made good.

The home has a rear garden which could be accessed directly from the large lounge and from one bedroom. The garden looked well maintained. There is a driveway at the front of the property which provides car parking for visitors.

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.

Service users benefit from being supported by an experienced staff team who had received most of the training they need for their roles.

Evidence:

A clear organised staff rota was available for inspection. On the day of the inspection four service users were living at Westacres and daytime staffing was a minimum of two staff on duty, with an occasional third person working depending on arranged activities outside the home. The managers hours are supernumerary (extra). At night there is one waking member of staff with one person on call.

The new manager showed us a schedule for future regular staff meetings. Meetings had not been held regularly since our last inspection but staff spoken with said that they felt supported throughout this time, they also said that there had always been someone senior to speak with if they had any concerns about service users.

Staff recruitment records were looked at for people employed since our last inspection. Records that are now being kept included an application form, interview records, references, photograph, proof of ID, a CRB check and contract of employment.

Evidence:

Comments from staff and records looked at confirmed that new staff undergo induction training during the first six weeks of employment. This covered 1st day induction, policy and procedures and a guide to the induction process. The main areas covered were service user support and care, health and safety, infection control and operational issues. Management ask staff if they thought their supervision covered what they needed to know, written responses seen indicated that it had done so.

Basic staff training had taken place. Evidence seen on files and discussion with staff confirmed that they had been trained on, induction, safeguarding, NVQ, fire safety, health and safety, COSHH, food hygiene, medication and first aid.

We recommend that staff are trained on responding to and dealing with challenging behaviours. The area manager thought that current service users did not present this need but had booked challenging behaviour training for staff for August 2009 in case staff need these skills in future. Other training planned for 2009 was manual handling, loss and bereavement, epilepsy, diabetes awareness, dementia and continence.

Staff spoken with confirmed they were supported by the new manager. They also said that they had been offered training opportunities appropriate to their roles. Staff were open, friendly and demonstrated sound care values. All had a good understanding of work practices and routines and the observed rapport between staff and service users was relaxed and very friendly.

Regular staff supervision/support meetings had taken place and records were seen of the areas covered/agenda. The areas covered are agreed with staff and included key worker role, training, activities and personal issues.

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.

People live in a home that is managed and run in their best interests.

Evidence:

A new manager had commenced working at Westacres in June 2009. The new manager said he holds the registered managers award and has fifteen years previous experienced of working in a care setting, nine of these as a manager. Prior to the manager starting at Westacres the home had been overseen by the registered provider's local area manager. We asked staff if they felt that they had been supported properly by management and all said they had and that they received regular support supervision.

The registered provider's annual quality assurance (QA) process involved service users and stakeholders views sought by sending them survey questionnaire forms for completion. We saw evidence of this in completed surveys but we did not see any summary of the findings or of any resulting actions taken in response to comments/issues raised. We need to see this to show that people's views are listened

Evidence:

and responded too.

Random samples of records required to be kept by regulation were inspected. These included regulation 26 reports (monthly registered person report), staff rota, visitor book, nutrition records, assessments, care plans, staff recruitment, complaints, medication records, service user monies held for safekeeping, fire procedures and fire drills. All seen were in order.

Discussions with staff, management and inspection of records confirmed that training is provided to staff in first aid, fire safety, health and safety and food safety. There was also a fire risk assessment in place to try to minimise risks in this area.

Certificates and service records were seen to confirm that the home's hoists, fire equipment and alarms, gas boilers and portable electrical appliances (last checked September 2007) had all been tested/serviced.

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 | 39 | 24 | <p>The system in place for reviewing and improving the level of services provided by the home must include evidence of the findings and of any actions taken.</p> <p>This is to show that service users views and opinions are listened to and acted upon.</p> | 31/12/2009 |

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 | 32 | Staff should be trained on understanding and responding to aggression and behaviours that challenge. |
| 2 | 34 | Evidence should be available to show that regular staff meetings are held and of the issues discussed. |

Helpline:

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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.

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