



Making Social Care
Better for People

Inspecting for better lives

Key inspection report

Care homes for adults (18-65 years)

Name:	Azalea House 2
Address:	69 Winifred Road Bedford Bedfordshire MK40 4EP

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:
Louise Trainor	0 7 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

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- 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)
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Internet address	www.cqc.org.uk

Information about the care home

Name of care home:	Azalea House 2
Address:	69 Winifred Road Bedford Bedfordshire MK40 4EP
Telephone number:	01234342215
Fax number:	01234342215
Email address:	
Provider web address:	

Name of registered provider(s):	Minster Pathways Limited
Type of registration:	care home
Number of places registered:	3

Conditions of registration:								
Category(ies) :	Number of places (if applicable):							
	Under 65	Over 65						
learning disability	3	0						
mental disorder, excluding learning disability or dementia	3	0						
Additional conditions:								
Date of last inspection	2	4	1	0	2	0	0	8

Brief description of the care home
<p>Azalea 1 and 2 are two privately owned care homes adjacent to each other and are situated in a residential street on the west side of Bedford. They share the same manager, house 1 is registered for five people and House 2 has three people who have a diagnosis of learning disabilities and mental health needs. The aim of the service is to offer appropriate support to the people living in the home, including personal development and maintaining their independence skills. The house is a domestic property and offers single bedrooms to everyone living there.</p> <p>Each house has a rear garden and there is a common office located in an extension in one of the back gardens. The house is located approximately one mile from the town centre and within walking distance of local shops, pubs and transport links. The fee quoted by the manager was in the range of £700-£1300. This remains unchanged since the previous inspection.</p>

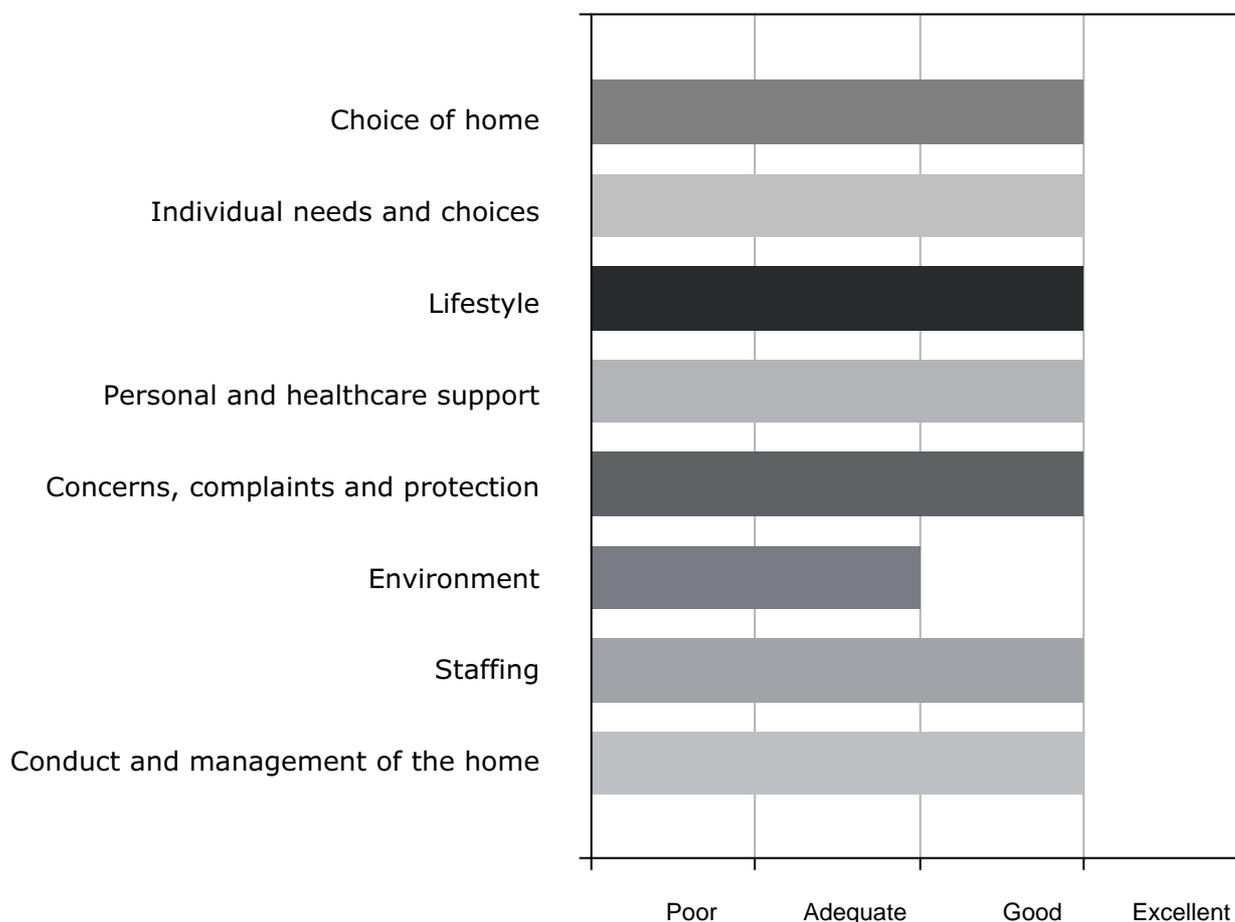
Summary

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 inspection was carried out in accordance with the Care Quality Commission (CQC) policy and methodologies which require review of the key standards for the provision of a care home for younger adults that takes account of service users views and information received about the service since the last inspection. Information from the home, through written evidence in the form of an Annual Quality Assurance Assessment (AQAA) has also been used to assess the outcomes within each standard. Evidence used and judgements made within the main body of the report include information from this visit.

This was a one star home and had therefore not received a Key Inspection since July 2008. This inspection was carried out on the 7th of July 2009 by Regulatory Inspector

Mrs Louise Trainor, between the hours of 10:00 and 16:00 hours.

The inspection for this service was completed in conjunction with Azalea 1, as the two houses function as one service. During this inspection we picked two residents to 'case track' in detail, and looked more briefly at the documentation relating to another. We spent time observing care practices and informally chatting with staff and residents. There were no visitors present during this inspection.

We examined three staff files, all documentation relating to their recruitment, and other records relating to staff training and supervision.

A full tour of the premises was carried out, and documentation relating to health and safety checking procedures, medication administration, complaints, accident and incident reporting and resident's finances were also inspected.

The home manager was present to assist throughout this inspection, and feedback was given periodically throughout, and at the end of the inspection.

We would like to thank everyone involved for their assistance and support.

What the care home does well:

The home understands the importance of having sufficient information, in appropriate formats, when choosing a care home.

Admissions are not made to this home until a full assessment of needs has been carried out.

Care plans are all very individualised and reflect the involvement of individual residents. They are reviewed regularly to reflect changing needs, and are supported by risk assessments.

Routines and activities are person centred and dictated by the individual residents in this home. Residents are responsible for making decisions about all aspects of their lives and are supported with making informed choices when necessary.

People in this home receive personal and healthcare support appropriately. Residents are supported and helped to be independent and encouraged to take responsibility for their care needs.

There is a complaints procedure in place that is produced in appropriate formats so that it is easy for all residents to understand.

Training of staff in safeguarding is regularly arranged by the home, and other training relating to managing violence and aggression is also made available to staff.

There are consistently enough staff on duty to meet the needs of the residents in this home, and the training programme indicates subjects specific to this client group are promoted to all staff.

The manager demonstrates a clear understanding of the key principles and focus of the service. The AQAA contains clear and relevant information that is supported by a wide range of evidence.

We spoke to staff about the supervision process in the home, and all said that they received supervision every one or two months with either the manager or the deputy. This was confirmed in the supervision records.

Throughout this inspection the manager demonstrated a clear understanding of the needs of the residents in the home, and the importance of encouraging their independence.

Health and Safety records relating to fire evacuations, smoke detector testing, call point testing, water temperature testing, food temperature probing and general environmental checks. All of which are carried out on a daily or weekly basis and recorded on file.

What has improved since the last inspection?

MAR sheets were tidy and well presented, and were being completed with omission codes and signatures appropriately. Where medication was refused they were disposing of tablets in line with their present policy, and recording on the reverse of MAR sheets when 'as required' medication was administered.

Staff in this home have been recruited following a robust recruitment policy.

What they could do better:

The home should consider replacing the television arial and look at the advantages of having additional channels installed on the television. This matter was raised by numerous residents throughout this inspection.

This registered person must ensure that appropriate storage facilities are available for all medication in this home.

The home is generally clean and free from offensive odours, however some of the furniture is in need of replacing to enhance the environment and make it more homely and comfortable.

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

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.

The home understands the importance of having sufficient information, in appropriate formats, when choosing a care home.

Admissions are not made to this home until a full assessment of needs has been carried out.

Evidence:

During this inspection we looked at the information documents, which are issued to all residents and their representatives at point of enquiry / admission. These are produced both in a written and a pictorial format so that everyone can understand what facilities the home offers. They included summaries of some of the home's core policies such as the Complaints policy, although there are some minor amendments required, particularly relating to the Care Quality Commission, to ensure contact details are correct.

We looked at the Terms and Conditions and contracts of three people living in the

Evidence:

home. With the exception of one very recent admission, all were signed and dated appropriately.

We case tracked two of the seven residents who live at Azalea 1 & 2.

One of these people had been living in the home for two years and the other had been admitted within the last month.

Both of these individuals files contained very detailed pre admission assessments that had been carried out well in advance of admission.

They outlined a clear social history, which included both cultural and spiritual needs and how they should be managed, a mental health diagnosis, medical history and a list of present medication.

Personal preferences were very clearly identified, as was the level of physical and cognitive ability and understanding. Mental Capacity Assessments were in place. The individuals' personal goals and aspirations were identified, and potential behavioural changes were outlined, with a management plan, so that continuity of care and approach was promoted.

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 all very individualised and reflect the involvement of individual residents. They are reviewed regularly to reflect changing needs, and are supported by risk assessments.

Evidence:

During this inspection we looked at the personal files of two of the residents in detail, one from Azalea 1 and one from Azalea 2. We also spent time talking to those residents who wanted to be included in this inspection process.

Information on each resident at this home is filed in three personal folders. These were tidy and well organised, making it easy to triangulate evidence throughout the inspection.

Folder 1 contained personal profiles in the form of a 'Quick Glance Summary' / 'Grab Sheet', historic information such as assessments and appointments, accident forms,

Evidence:

Service User agreement, Access to personal information form, signed and dated, Equal Opportunites statement signed and dated, and many more besides.

Folder 2 contained all the documentation relating to possessions, allowances and the individuals finances.

Folder 3 contains current information including risk assessments, care plans and the daily record sheets.

The documentation that we looked at for the resident living in Azalea 2, identified a range of needs relating to all aspects of his life. The home have carefully assessed all this persons abilitites since admission, and identified exactly how much assistance he requires. This includes bathing, shaving, dressing, communication and understanding and behavioural issues.

Clear instructions are in place in care plans for staff so that the management of these aspects of care are delivered with continuity, and the resident is aware of certain boundaries, particularly in the behavioural management programme.

His personal preferences indicated that he enjoys food shoppong, long walks, art and television. The level of support for all activities was clearly identified.

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.

Routines and activities are person centred and dictated by the individual residents in this home.

Residents are responsible for making decisions about all aspects of their lives and are supported with making informed choices when necessary.

Evidence:

Each client has a personal profile which clearly identifies their personal preferences and wishes, relating to all aspects of their lives. For one resident, in Azalea 2, details were very specific relating to religious and cultural preferences. This included place of worship and specific dietary requirements. There was a very detailed information sheet for staff in this individual's file, which explained these cultural beliefs and practices, including prayer and fasting relating to Islamic law. This resident was relatively new to the service and therefore information and records relating to activities were not yet

Evidence:

fully completed. This was acceptable as his likes and dislikes were clearly recorded and there was already evidence present indicating that he wants to commence college, and this possibility was being addressed.

On the day of the inspection some residents were away from the home involved in daily activities, and others were going about their daily routines in the home as they wished. Residents are aware that their own personal rooms are their responsibility, and although the communal areas of the home were clean and tidy, it was evident that for some clients keeping their rooms tidy was not a priority. This was their choice as long as it did not present a health hazard.

Most of the residents in this home have a mental health diagnosis and are supported and encouraged to live as independently as possible. One client attends a day centre two days a week, and we witnessed her trying to arrange her transport with a local external travel company in preparation for the next visit. She was encountering general frustrations of daily life, such as problems getting through to this transport service on the telephone, and was supported to manage these frustrations appropriately.

Residents in this home are encouraged to make decisions relating to menus, and on the day of this inspection, a small group went out to do the weeks shopping. Meal times are a social event and meals are prepared similarly in both Azalea 1 and 2. We looked at the current menu, which the manager informed us is regularly subject to changes at very short notice. However it provided a wide variety of choices, which included healthy salads, homemade soups, cakes, puddings and smoothies, as well as an array of international dishes, such as beef rice and black eyed peas, chinese stir fry, lamb and sweet potatoes and roast dinners.

Residents are encouraged and supported to maintain contact with families and friends if this is their preference.

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 in this home receive personal and healthcare support appropriately. Residents are supported and helped to be independent and encouraged to take responsibility for their care needs.

Evidence:

The residents in this home have a wide range of support requirements. Some are very independent and others require more assistance in certain areas of their daily lives. It was very evident that both physical and emotional support is available but not imposed on those who prefer to manage things themselves.

Risk assessments are in place to ensure potential risks are minimised for all activities of daily living whether individuals are independent or not.

Records identified that health appointments are encouraged where appropriate, including dental visits, psychiatrist appointments, Community Psychiatric Nurse visits, Smear testing and other 'well being' clinics where appropriate, support is available and offered as appropriate for each individual.

Evidence:

During this inspection we looked at the Medication Administration Record (MAR) sheets for all the residents living in Azalea 1 and 2. Medication for both houses is stored in the office area in Azalea 1. Although residents are risk assessed and have the opportunity to retain their own medication if appropriate, presently all medication is administered by staff.

MAR sheets were tidy and well presented, and were being completed with omission codes and signatures appropriately. Where medication was refused they were disposing of tablets in line with their present policy, and recording on the reverse of MAR sheets when 'as required' medication was administered. We did however have some problems reconciling stocks, as all refused medication was being disposed of in one bottle, as the home had been advised following a previous inspection. It is important that records reflect exactly what has been put into this disposal bottle, so that reconciliation can be carried out. The home does have a weekly audit in place, however we did discuss with the manager that this could be improved to make it more robust, and that staff must be more diligent when auditing stocks.

Our main concern was that this home has no facility for Controlled Drugs. Although at present there is no one living in the home that requires this class of medication, it is important that this facility is installed, as potentially any of these residents could be prescribed a Controlled Drug, and in this event the home would no longer be able to meet their needs legally.

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.

There is a complaints procedure in place that is produced in appropriate formats so that it is easy for all residents to understand.

Training of staff in safeguarding is regularly arranged by the home, and other training relating to managing violence and aggression is also made available to staff.

Evidence:

This home has a complaints policy in place which is produced in various formats to meet the needs of each individual resident.

The policy clearly outlines who the residents should approach if they are not happy with any aspects of care in the home, and specific timeframes for responses to any complaints made. The policy includes reference to National Minimum Standard 22, with a clear aim. 'to ensure Service Users feel confident they are listened to'. There are also contact details for external organisations, for complainants who may not be satisfied with the homes response. The contact details for CQC are in need of review in these documents.

We looked at the complaints file, and there had not been any written complaints received since the last inspection, however there were two verbal complaints received. These has been clearly logged in the file, investigated, and a letter of response sent to

Evidence:

the complainant in line with the service policy. All actions / letters were clearly filed.

All staff at this home have attended training in safeguarding, and those that we spoke to about the subject were able to demonstrate a basic awareness of procedures. The manager has a clear understanding of safeguarding and has used the reporting process appropriately over recent months where necessary. Deprivation of Liberty (DOLS) and the Mental Capacity Act (MCA) are also incorporated into the training programme for this home so that staff have a basic awareness of how this legislation may affect the clients in this home.

Over the past few months there had been two incidents reported of residents personal money going missing. This has been addressed appropriately with the police, and a new system for managing the 'safe access' has been introduced, whereby only one individual each shift has the ability to do this.

We checked the accounts for all residents who have money held by the home. All accounts balanced correctly with funds remaining, individual residents and staff had signed for all transactions, and there were receipts to support all these transactions.

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 home is generally clean and free from offensive odours, however some of the furniture is in need of replacing to enhance the environment and make it more homely and comfortable.

Evidence:

During this inspection we were given a complete tour of the premises. We were shown round Azalea 2 by one of the residents. There is accommodation for three residents in single rooms, and there are shared bathing / showering facilities. There is also a communal lounge area, in the form of a conservatory, a dining room and a small kitchen on the ground floor.

The home was generally clean and tidy and free from offensive odours in the communal areas, and the conservatory was quite homely and comfortable.

We were told that previously the home had had the facility for Sky television, which enabled the residents to have a better reception and choice of programmes, such as sports, which were a particular favourite of one person. Residents that we spoke to were very keen to have this reinstalled, and have the external aerial adjusted so that they could get full enjoyment out of this facility.

Evidence:

We visited one of the residents' rooms in this home and he advised us that he could personalise it as he wished.

There is an ongoing programme for maintenance and decoration in the home, and this is carried out by the maintenance man.

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 in this home have been recruited following a robust recruitment policy.

There are consistently enough staff on duty to meet the needs of the residents in this home, and the training programme indicates subjects specific to this client group are promoted to all staff.

Evidence:

The staff employed by this service work in both Azalea 1 & 2. The shifts run from 07:45 to 15:00 hours, 14:45 to 22:00 hours. Each day shift has four staff on duty, two in each house, and has one member of staff sleeping in throughout the night. Generally the manager is not included in these numbers.

During this visit we picked three staff files at random to view in detail, and we also spoke to three members of the team at length about their work experiences in the home. Generally staff were very happy with the day to day running of the home, and felt that they were a strong team that was compatible with the present group of residents. Two of the three staff that we spoke to had been working in this home for several years.

Evidence:

The recruitment process for each employee was very clearly documented, and files contained all the necessary documentation, which included; fully completed application forms, at least two references, including one from their most recent employer prior to coming to this service, Criminal Record Bureau (CRB) and POVA first checks, Home Office documentation where required, various forms of identification, including passports, birth certificates and driving licences. There was also photographic ID present in the files. Letters in the files indicated that any performance issues are addressed and managed formally and recorded appropriately.

We looked at the training matrix for all staff. This indicated that a wide variety of training is available and staff attend as required. The manager told us that all staff have now either completed or are working to achieve NVQ levels two and three in care, and the training programme which everyone is expected to attend as mandatory includes subjects ranging from, Fire Safety, First Aid, Health and Safety and Medication Administration to Managing Violence and Aggression, Deprivation of Liberty, Report Writing and Anger Management. All the staff that we spoke to had done training on Learning Disability and Mental Health awareness, and observations of interactions between the staff and the residents was relaxed, familiar and a mutual respect was evident. Staff were confident and competent in their approach to residents, and demonstrated a good knowledge and understanding of their individual needs and abilities, so that support and independence was promoted with tact and continuity. Each member of staff is an allocated Key Worker for one resident in the home, and they write monthly reports and participate in the care planning process with the individual resident and the manager.

We spoke to staff about the supervision process in the home, and all said that they received supervision every one or two months with either the manager or the deputy. This was confirmed in the supervision records.

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 manager demonstrates a clear understanding of the key principles and focus of the service. The AQAA contains clear and relevant information that is supported by a wide range of evidence.

Equal opportunities are promoted amongst all staff and residents in this home.

Evidence:

The manager at this home has been in post for approximately four years. She is very passionate about the residents that she cares for and promotes their independence as a priority. She told us she feels well supported by her area manager. Discussions with both staff and residents indicated that she is well respected. One resident told us. "I have lived in several other places, and have been here two years now. The manager is lovely, she's always there for me and will do anything for me".

All three staff that we spoke to indicated they were very happy in their jobs and felt well supported by the manager. One said. "She's always available to us and we can

Evidence:

talk to her about anything".

Throughout this inspection the manager demonstrated a clear understanding of the needs of the residents in the home, and the importance of encouraging their independence.

There are clear policies in place in this home and the Annual Quality Assurance Assessment (AQAA) we received prior to this inspection clearly identified when reviews had taken place. Residents in this home are issued with copies of core policies, and we saw documents signed by residents confirming these had been received.

Records that we looked at in this home were well organised and reflected individuals progress, problems, and reviews very clearly. Risk assessments were in place for each individual, and were being reviewed as individuals abilities and needs altered.

We looked at Health and Safety records relating to fire evacuations, smoke detector testing, call point testing, water temperature testing, food temperature probing and general environmental checks. All of which are carried out on a daily or weekly basis and recorded on file.

The manager was able to demonstrate her understanding of reporting both regulation 37 notifications when necessary, and referring to the safeguarding team. Over the past year CQC have been kept informed of any incidents that have occurred in the home, and we were able to discuss and look at information relating to these incidents in personal files, and see how different incidents had been concluded.

The manager told us that service quality questionnaires have recently been sent out by the area manager to residents, relatives and health professionals who are involved with these residents. We look forward to seeing the final report as a result of this process.

Are there any outstanding requirements from the last inspection?

Yes

No

Outstanding statutory requirements

These are requirements that were set at the previous inspection, but have still not been met. They say what the registered person had to do to meet the Care Standards Act 2000, Care Homes Regulations 2001 and the National Minimum Standards.

No.	Standard	Regulation	Requirement	Timescale for action
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Requirements and recommendations from this inspection:

Immediate requirements:

These are immediate requirements that were set on the day we visited this care home. The registered person had to meet these within 48 hours.

No.	Standard	Regulation	Requirement	Timescale for action
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Statutory requirements

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

No.	Standard	Regulation	Requirement	Timescale for action
1	20	13	<p>This registered person must ensure that appropriate storage facilities are available for all medication in this home.</p> <p>There must be appropriate storage facilities on site to legally accommodate any medication prescribed for the people who live in this home.</p>	17/08/2009
2	39	24	<p>The registered person must carry out a review of quality care in this service and submit a copy of the subsequent report to CQC.</p> <p>The quality of care in this home must be reviewed annually to ensure people using this service are satisfied with the service and have the opportunity to discuss improvements</p>	31/08/2009

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
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