

# Key inspection report

## Care homes for older people

<b>Name:</b>	Oak Tree House
<b>Address:</b>	Lark Rise Brimsham Park Yate South Glos BS37 7PJ

<b>The quality rating for this care home is:</b>	one star adequate 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.

<b>Lead inspector:</b>	<b>Date:</b>
Melanie Edwards	0   2   1   1   2   0   0   9

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 Older People can be found at [www.dh.gov.uk](http://www.dh.gov.uk) or bought from The Stationery Office (TSO) PO Box 29, St Crispins, Duke Street, Norwich, NR3 1GN. Tel: 0870 600 5522. Online ordering from the Stationery Office is also available: [www.tso.co.uk/bookshop](http://www.tso.co.uk/bookshop)

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- 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.

## Reader Information

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## Information about the care home

Name of care home:	Oak Tree House
Address:	Lark Rise Brimsham Park Yate South Glos BS37 7PJ
Telephone number:	01454324141
Fax number:	01454324151
Email address:	oaktree@fshc.co.uk
Provider web address:	www.fshc.co.uk

Name of registered provider(s):	Laudcare Ltd (a wholly owned subsidiary of Four Seasons Health Care Ltd)
Name of registered manager (if applicable)	
Mrs Janet Molly Goodfellow	
Type of registration:	care home
Number of places registered:	78

Conditions of registration:								
Category(ies) :	Number of places (if applicable):							
	Under 65	Over 65						
dementia	41	0						
old age, not falling within any other category	0	37						
Additional conditions:								
The maximum number of service users who can be accommodated is: 78.								
The registered person may provide the following category of service only: Care Home with Nursing (N), to service users of either gender whose primary care needs on admission to the home are within the following categories: Old Age, not falling within any other category (Code OP) - maximum number of 37 places, Dementia (Code DE) - maximum number of 41 places.								
Date of last inspection	2	4	0	9	2	0	0	8

## Brief description of the care home

Oak Tree House is a purpose built home, operated by Four Seasons Health Care. Mrs Janet Miller is the registered Home manager.

The home is situated in a residential location, within a quiet cul-de-sac and is accessible to local shops, amenities and bus routes. The property provides bedroom and communal accommodation over two floors for 80 residents. Bedroom accommodation is provided in good-sized single rooms with en-suite facilities. There is level access throughout the home and all areas of the home are accessible via the passenger lift. There are nine communal areas throughout the home, including an activities room. There are a suitable number of bathrooms and toilets with adaptations to meet the care needs of residents in the home. Appropriate equipment is provided for individual use based on assessed identified needs. All rooms have a call alarm system. The home is set in its own grounds with a garden and patio area to the back of the house. Car parking is available for several cars. Visitors are welcome to the home at any time. The home employs two activities organisers who make efforts to provide activities during the week.

The fees range from 380-575 pounds per week depending on individual needs.

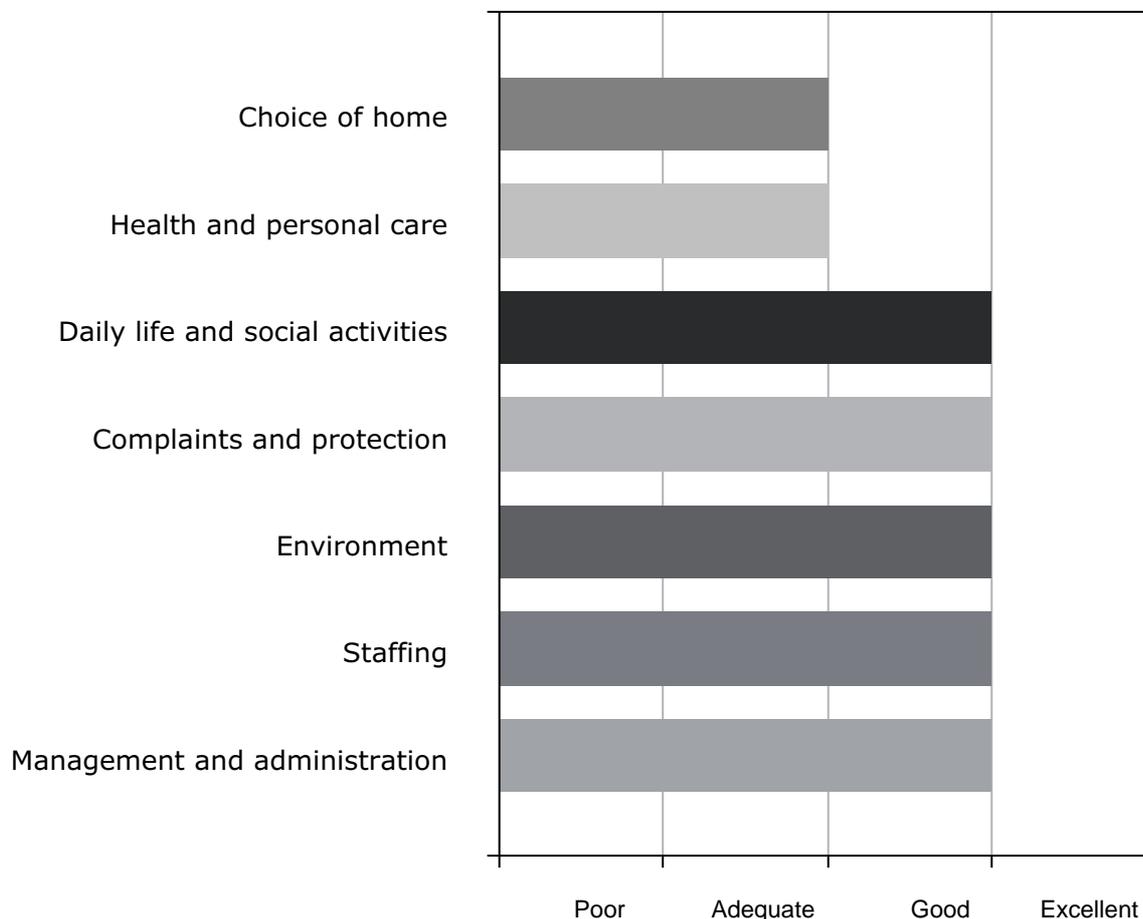
## Summary

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

The quality rating for this care home is:

one star adequate service

### Our judgement for each outcome:



### How we did our inspection:

We did the inspection over two days, the first day was unannounced.

We spoke to thirty two residents.

We spoke to Mrs Goodfellow who is the registered manager, the deputy manager, three nurses, six care staff and the cook, about what they do to help the residents.

We checked a range of records including, the statement of purpose, the service user guide, eight assessment records, eight care plans, menus, the complaints record, the complaints procedure, the 'safeguarding' procedure, four staffs training records, the staff duty rota, four staffs employment files, quality assurance information and information about health and safety.

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

The service users guide provides helpful information about the home.

Generally the information in the care plans explains what to do to support the residents and care for them.

There are a range of social activities put on for residents in the home.

Residents are able to eat a well cooked and well presented healthy diet.

Mrs Goodfellow deals with complaints about the service effectively.

Staff can do a range of training to help them in their work.

There is now a workable system of staff supervision in place to support and guide the staff.

The home is now being well run. There is an effective system used to monitor the quality of care and overall service.

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

Mrs Janet Goodfellow is now the registered manager. She has considerable previous management experience running care homes.

There is now a deputy manager who is a qualified mental health nurse supporting Mrs Goodfellow.

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

The statement of purpose must explain the reason for the use of a security key pad system on the first floor. The statement of purpose also needs to explain the procedure for people who do not need this security to enter and exit the first floor.

Care plans must show how to meet residents needs.

The home must be free from offensive odour in all areas.

Staff need the skills and competency to be able to effectively communicate with people who have dementia.

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

## Details of our findings

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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 and the support they need. People who stay at the home only for intermediate care, have a clear assessment that includes a plan on what they hope for and want to achieve when they return home.

People can decide whether the care home can meet their support and accommodation needs. This is because they, or people close to them, have been able to visit the home and have got full, clear, accurate and up to date information about the home. 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 them 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 **adequate** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

People are able to get hold of mostly up to date information about the home. However up to date information justifying the use of the key pad security system on the first floor needs to be included in the statement of purpose.

Residents needs are mostly fully assessed.

Evidence:

To see what sort of up to date information there is for residents and other people to know about the service we looked at a copy of the service users guide and a copy of the statement of purpose. A copy of both of these documents are kept in the entrance hall of the home. This helps people to be able to get hold of the information if they need it. We saw in the statement of purpose and the service users guide a helpful range of information about the service for residents, the staff qualifications and the accommodation. The philosophy of care and how the service aim to meet residents needs is also written about in both documents. The complaints procedure is in the

## Evidence:

service users guide so that residents know how to complain about the service. However we advised that the statement of purpose needs to set out the reasons for the use of keypad entry systems on the first floor. This is to explain the reason why residents who have dementia and live on the first floor need this protection. The statement of purpose also needs to explain the procedure for people who do not need this security to enter and exit the first floor.

We saw a colour brochure with photos of the home and other useful information. There is also a website that tells people some useful information about the home.

We looked at eight peoples assessment records to see how well the care and support they need is planned and worked out. We read some detailed and helpful assessments about each persons nursing and social care needs. We saw an assessment for each resident of the risk the person may face of falling. We saw an assessment had been done of each persons skin vulnerability and the risk of them getting a pressure sore. We saw a moving and handling assessment for each person explaining out how best to help them with their mobility. We also read a dietary assessment explaining what the persons nutritional needs are and how to help them enjoy a healthy diet. We found the assessment records to be generally informative. However we advised that if residents are possibly considered to lack capacity in their daily lives, then an assessment of their mental capacity needs to be carried out. We gave two examples where we felt this would be really beneficial for the residents. One was the use of a specially adapted chair to stop the person from falling. The second example was the use of a foot pad alarm system at night, placed on the floor by a persons bed. The alarm goes of when someone steps on the pad on the floor. This then draws the attention of the staff to the residents. An assessment of the person mental capacity in both of these examples would help to show how the actions taken by the staff are in each persons best interest.

We read in the 'aqaa' document some useful information about how people are helped to make a choice of home .We have quoted this extract:'We give enquirers as much information as we can about the home. We make it clear to them what they should expect and what we expect of them. We give prospective residents a chance to try out the home without making a long term commitment. We ensure purchasing authorities have the information they need to place clients appropriately We make prospective residents and their supporters feel welcome We deal swiftly with any concerns or issues that arise to give relatives and residents confidence in our ability to meet changing needs'.

## Health and personal care

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 health, personal and social care needs are met. The home has a plan of care that the person, or someone close to them, has been involved in making. If they 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. People's right to privacy is respected and the support they get from staff is given in a way that maintains their dignity.

If people are approaching the end of their life, the care home will respect their choices and help them feel comfortable and secure. They, and people close to them, are reassured that their death will be handled with sensitivity, dignity and respect, and take account of their spiritual and cultural wishes.

**This is what people staying in this care home experience:**

Judgement:

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

Residents needs are met and care plans show how peoples care needs are met. However some care plans contain really clear information but other care plans lack detail and fail to show how to support people sufficiently clearly with their Dementias.

Evidence:

When we talked to residents they told us the staff are helpful and they, 'on the whole do their best'. One person said, ' I'm treated like a princess here,' another person said, 'the staff are not too bad but sometimes they take too long to answer the call bell', another person said staff are, 'caring' when they assist them with their needs.

We noticed that the staff were welcoming, warm and friendly to residents and visitors on each day of the inspection. We saw staff take the time to help and support people.

We saw people being helped with their lunch on both days of the inspection. On the first day we saw one person waiting to have their lunch. The staff were serving other people before them. We asked the nurse on duty why this was. We were told that people who have, 'normal' diets have them before the people who have the soft diets.

## Evidence:

We told Mrs Goodfellow this could be distressing if the person was hungry, as they were sat by the food trolley while other people were being served their meals before them. Mrs Goodfellow addressed this and the person was given their meal. We read eight residents care plans so that we could see how well residents are supported to meet their needs. We found three of the care plans to be informative and detailed, they explained how to meet the care needs of each resident. These care plans stated what actions staff must follow to assist the resident to meet their needs. Care plans included information about each persons physical, psychological, social ,communication and spiritual needs. However we found that the level of detail in the remaining care plans was far less clear. We noticed that there was a lack of detailed information explaining what to do and how to do it, to support people who may be really confused due to dementia. We brought to Mrs Goodfellows attention one example of this,which was that it had been written that 'communication is irrelevant ' in a person's care plan. We discussed this with her and it was agreed that what ever the reason, this style of writing was unhelpful and failed to show how to communicate and support the person concerned. We could see in the care plans that they had been written from an initial assessment of what the residents needs are and what support and help they need. The care plans we saw had been had been reviewed and updated regularly by registered nurses. This helps to demonstrate the home know what care and help people need and are still able to provide it.

We checked the way that residents medications is looked after in the home to see if this is done safely. We saw that there is suitable storage is available for all medicines. A medicines fridge is available on each floor. The nurses use medicine trolleys to transport medicines safely around the home. Staff do checks of medicines each week to make sure that they have been used safely and this is good practice. We saw printed medicines administration record sheets each month for staff to complete. These had been filled in correctly showing that medicines had been given as prescribed. We checked a sample of medicines and found that the administration records were accurate and up to date. This helps confirm medication has been given as needed. We saw that there is a homely remedy policy available so staff can people for minor ailments. We saw that these are used safely and we saw records kept on each floor of the home. We found that medication is handled and given to residents safely.

We read some useful information in the 'aqaa' about ways that the home aim to improve health and personal care standards even more and we have quoted this extract :'We continue to look at ways to assist new members of staff work through their Induction process currently by making experienced carers as well as trained staff responsible for completing the induction in a timely fashion.We are reviewing the

Evidence:

training plan and hope to incorporate more sessions on basic care to keep all staff as up to date with best practice as possible.

We are looking at amalgamating training sessions with other Four Seasons Homes in the area to improve the amount of sessions on offer'.

## Daily life and social activities

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 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. They are as independent as they can be, lead their chosen lifestyle and have the opportunity to make the most of their abilities. People have nutritious and attractive meals and snacks, at a time and place to suit them.

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.

Residents can eat a nutritious traditional and really well cooked diet.

Residents can do a variety of different social and therapeutic activities to entertain them.

Residents are able to keep close contact with family and friends and significant people in their lives if they wish to.

Evidence:

There are two activities coordinators who work with the residents in the home. We saw the flexible timetables of social activities for residents throughout the home. The timetables is so that residents know what activities are taking place. We could see residents can do a range of social activities as well arts and craft classes and trips out into the local community.

The home has its own newsletter and this is a really good way for residents to be kept involved about daily life in the home.

## Evidence:

We saw that there is a hairdresser service in the home that takes place regularly. This means residents have their hair attended to if they so wish.

We saw a 'mobile shop' being taken around the home to sell day to day items to residents. This is a good way for them to make choices in their daily lives.

We saw one of the activities coordinators running a discussion group with a group of residents. We could see that residents were relaxed and talking with each other in the group.

Mrs Goodfellow told us that the home have a relaxed visitors policy. She also told us visitors can and often do, have a meal with the people they visit at the home. This is a really good way for residents to keep in touch with people who matter to them.

We were told by residents that within reason they are able to choose what time they get up and what time they go to bed. We saw residents being asked about their meal options and their likes and dislikes. We were also told there are residents meetings held in the home. These are good way for residents to exercise choices and have some autonomy in their daily lives.

To find out about the quality and variety of meals residents can eat we ate a portion of both lunchtime meal choices on the first day of the inspection. We found the meal choices of beef pie and vegetables and fishcakes were tasty, well cooked and properly presented. We saw a choice of homemade puddings or yogurts for dessert. Residents can also make choices of other options if they do not like the two main meals choices We saw the chef offer a choices of meal to residents. We also saw how residents who need to eat a softer diet are given food that is well presented on the plate.

## 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. Any concern is looked into and action taken to put things right. The care home safeguards people from abuse and neglect and takes action to follow up any allegations.

People's legal rights are protected, including being able to vote in elections.

**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.

Complaints are properly dealt with.

The home have good systems and training to make sure people are safe from abuse.

Evidence:

We saw a copy of the complaints procedure on display in the reception area. The procedure includes our details for anyone who wishes to contact us directly. The contact details of the registered providers of the home are included if residents or representatives wish to contact them to complain. The procedure explains how to make a complaint, what will be done in response and how long it should take to address.

When we asked residents, they told us they knew who to complain to if they were unhappy. We talked to the staff about how they support residents with dementia if they thought they were unsatisfied or unhappy. The staff demonstrated a good understanding of their role in representing the views of residents who may not be able to directly express them. We looked at the record of complaints received to see how the home responds when complaints are made. There had been five complaints received since the last inspection relating to day to day matters in the home and care practices. We saw written information to show Mrs Goodfellow had responded really well to each complaint and investigated them thoroughly.

Evidence:

There is a procedure in place relating to the issue of protection of vulnerable adults from abuse. The procedure makes reference to the need to contact and be guided by the 'Adult Protection team' in the event of an allegation of abuse. We saw a copy of the homes safeguarding procedure for staff to be supported and to feel confident to raise allegations of poor practice. All staff are given a copy of the policy to ensure they know their rights and are protected if they do raise legitimate concerns.

The staff do training in understanding abuse, the use of the whistle blowing policy and how to report alleged bad practice.

## Environment

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

People stay in a safe and well-maintained home that is homely, clean, 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.

**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 generally safe and suitable for the people who live there. However one part of the home has a strong odour.

Evidence:

Oaktree care home is in the town of Yate in South Gloucester. The home is near a pub, some shops and a Church. There are also a range of community facilities in the town itself.

The home is run as two units. The ground floor unit is primarily run to provide care and support for older people with general nursing needs. The unit on the first floor also supports people with nursing care needs and a number of the residents also have dementia.

We saw that the bedrooms and communal rooms are spacious and the standard of fixtures and fittings was homely and satisfactory maintained.

We found the home was mostly clean and we saw domestic staff working really hard cleaning the environment. However we noticed there was a strong odour from one part of the home. We advised that action must be taken to make this part of the home free from odour for the benefit of the residents, staff and visitors.

## Evidence:

There are single bedrooms and a few designated double rooms in the home. The bedrooms are spacious with en suite toilet facilities. A number of bedrooms have an internal connecting door that allows them to be used as a double bedroom with private lounge by couples that wish to share. We saw residents have televisions in their rooms and some people telephone lines are in many of the rooms. There are call bells fitted in each bedroom so that residents can call staff for help if they need to.

We saw that the building is easily accessible for people with reduced mobility. We saw a passenger lift so that people can get to the first floor easily. There are adaptations in place throughout the home to help residents and visitors who are disabled. Please see our comments in the first part of this report about the use of the key pad entry system on the first floor.

There is a full time maintenance workers employed to do general maintenance. We saw them carrying out their duties during the inspection.

We checked the service records for the fire fighting equipment the lift and electronic equipment. The records showed that an external contractor had serviced equipment in The last twelve months. This helps demonstrate that the home is safe and well maintained.

## 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 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 to care for them. Their needs are met and they are cared for by staff who get the relevant training and support from their managers.

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.

Staff are trained to help them support residents with their needs. However it would benefit residents if staff revisited the principals of communicating with people with dementia.

Evidence:

We checked the training files of one nurse and three care staff. We saw that the staff team do a range of training in and outside of the home. There are also trainers who come to the home and talk to staff about a range of clinical and general issues relevant to residents needs and the running of the home.

There is a high number of staff in the home who have obtained National Vocational Qualifications known as 'nvq' training. We saw an 'nvq' trainer working with care staff on both days of the inspection. Catering staff and ancillary staff also have completed 'nvq' qualifications in subjects relevant to the work that they do.

We checked the number of care staff to see if there is enough staff on duty to support residents. There is a minimum of two to three registered nurses on duty and eleven care assistants in the morning and two nurses and eleven care assistants on in the afternoon. At night there are two nurses and six care assistants on duty. There are additional staff members on duty on a regular basis, if needed to give extra support to residents both in and out of the home. Mrs Goodfellow the registered manager works

## Evidence:

full time management hours. She is supported in her work by a full time deputy manager who is a qualified mental health nurse. Mrs Goodfellow said she feels the extra input from a mental health nurse will really help the residents and staff supporting those people with dementia. We observed that peoples needs were being met by the numbers of staff on duty.

We observed staff talk to residents with kindness and respect. We also observed staff communicate really well with residents who have dementia. However we did observe staff responded in a less patient tone of voice with residents, this was noticeable at lunchtime. We discussed this with Mrs Goodfellow. From what she told us it is apparent staff get anxious that residents may fall or hurt themselves, if they have mobility problems. We noticed this can make some staff sound controlling and as if they are telling the people what to do. We noticed this during the lunch time meal on the first day of the inspection.

We checked the staff employment files of three care staff and one nurse. We saw two written professional references for the staff. We also saw completed 'criminal records bureau' checks for all the staff before starting employment at the home. These checks are a further safeguard for vulnerable residents. They are a way of making sure only suitable people are employed to work in a care home.

## Management and administration

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 led and managed appropriately. People control their own money and choose how they spend it. If they or someone close to them cannot manage their money, it is managed by the care home in their best interests. The environment is safe for people and staff because appropriate 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. The people staying at the home are safeguarded because it follows clear financial and accounting procedures, keeps records appropriately and ensures their staff understand the way things should be done. They get the right care because the staff are supervised and supported by their managers.

**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.

Residents finances are properly looked after.

There is staff supervision in place.

Peoples Health and safety is well protected.

Evidence:

Mrs Janet Goodfellow is the registered manager. She has been the manager of the home for a year. Before this she was the registered manager of two other homes and she has worked as a deputy manager for other care providers. Mrs Goodfellow is supported in her work by an operations manager. From our knowledge of Mrs Goodfellow's career 'track record' in running care homes and from her having been registered with us, we judge her to be fit and very suitable to fulfill the role of manager of the home. She is further supported in her work by the recently recruited

## Evidence:

deputy manager who we have already mentioned in the report.

We saw written evidence that Mrs Goodfellow has put in place a system of staff supervision and support for the staff team. We met staff who told us they have regular 'one to one ' meetings with a senior member of staff to provide them with support and guidance. This is good evidence that staff are well supported in their work.

We checked the finance records of three residents. The home holds a number of residents money for safekeeping for them. We checked the records and cash of the three residents. We found that the records were easy to follow, clear and up to date. The home has a system that is safe and show residents money is properly looked after. Someone from the finance department also comes to the home and do a regular check on the systems to make sure they are safe and in good order.

We saw a really detailed and helpful format used to monitor the quality of the care and the overall service. We could see that the care and service in the home is checked on and closely monitored by Mrs Goodfellow and by senior managers. We could see that the views of residents are obtained so that the home can improve standards in the home even more.

Mrs Goodfellow is required to write a health and safety report each week and send this to a senior manager. This helps show how the health and safety of people at the home is closely monitored.

The maintenance manager takes responsibility for maintaining health and safety matters in the home. They do regular health and safety checks of the building and the furniture and equipment in it. We saw recent checks that had been done. They demonstrated to us that really good effort is made to keep the building safe and to maintain peoples health and safety. We saw that there are health and safety policies and procedures in place for staff to follow to ensure the safety of residents is maintained. We also saw good evidence that health and safety practices in the home are also addressed at staff training sessions.

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
1	7	15	15A  Ensure that detailed care plan is in place for identified residents.	24/11/2008
2	26	23	23  The registered manager must ensure that the home is clean at all times.	24/11/2008
3	30	18	18  Ensure that staff receive training that meets specific needs of the residents.	24/11/2008

## 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
1	1	1	The statement of purpose must explain why the keypad security system is in use and what procedure there is in place for people who do not require this level of security.  Legal rights of residents.	06/11/2009
2	7	15	Care plans must show how to meet peoples needs.  Care and support.	05/12/2009
3	26	16	All parts of the home must be free from offensive odour.  Health,safety and well being.	12/11/2009

### 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

### 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	30	Staff should be trained to communicate with people who have dementia.

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