

Key inspection report

CARE HOME ADULTS 18-65

Parkcare Station Road

**8 & 8a Station Road
London
N21 3RB**

Lead Inspector
Wendy Heal

Unannounced Inspection
7th April 2009 11:45

This report is a review of the 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.

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 home adults 18-65 can be found at www.dh.gov.uk or bought from The Stationery Office (TSO) PO Box 29, St Crispins, Duke Street, Norwich, NR3 1GN. Tel: 0870 600 5522. Online ordering from the Stationery Office is also available: www.tso.co.uk/bookshop.

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

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

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SERVICE INFORMATION

Name of service	Parkcare Station Road
Address	8 & 8a Station Road London N21 3RB
Telephone number	020 8360 2274
Fax number	020 8360 6565
Email address	station.road@craegmoor.co.uk
Provider Web address	
Name of registered provider(s)/company (If applicable)	Parkcare Homes (No2) Ltd
Name of registered manager (if applicable)	Mrs Tunay Arslan
Type of registration	Care Home
No. of places registered (if applicable)	15
Category(ies) of registration, with number of places	Learning disability (15)

SERVICE INFORMATION

Conditions of registration:

1. Service Users
Limited to 15 adults of either gender with a learning disability (LD) not to exceed 12 accommodated at 8 Station Road, London N21 3RB and 3 accommodated at 8a Station Road, London N21 3RB
2. One specified service user who is over 65 years of age may remain accommodated in the home.
3. The home must advise the regulating authority at such times as the specified service user vacates the home.

Date of last inspection 11th April 2008

Brief Description of the Service:

8 & 8a Station Road is managed by Craegmoor Healthcare Services. It is a service for young people with a learning disability. Station Road provides a service for 15 young people, both male and female, between the ages of 18 and 65 years. The people have a wide range of needs and require very variable levels of support. Some of the people require support in relation to their behavioural difficulties.

Station Road is a large detached building located in Winchmore Hill. Eight people live in the main part of the home. Three people live in a separate flat with its own kitchen and lounge and are accessed by a separate staircase from the rear garden of the home. All of the people living in the home have a single bedroom. The bedrooms are located across three floors of the house. There is no lift in the home. Two of the bedrooms have their own en suite shower room but the rest access four shared bathrooms/shower rooms. On the ground floor there is a large lounge, dining room and kitchen. On the first floor there is a small, quiet sitting room. At the rear of the home there is an enclosed garden. The fees at the home range from six hundred pounds to thirteen hundred pounds approximately. The home has the purpose and function document and inspection report on their notice board for interested parties to view.

SUMMARY

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

The quality rating for this service is (2 stars) this means that the people who use this service receive good outcomes.

This was an unannounced inspection and took place as part of the inspection programme. Compliance was checked against key standards and took the inspection started at approximately 11:45 am and was completed at 845pm. I undertook a tour of the building spoke with the people who live in the home and members of the staff team. I gained further information from the Annual Quality Assessment form, by an inspection of the documentation kept in the home, including care plans and health and safety documentation. The manager and staff members offered their assistance throughout the period of the inspection. I would like to thank the people who use the service and the manager and staff for their openness and participation.

What the service does well:

The service provides people with up-to date information to enable them to decide if this is the place they wish to live. People's aspirations and needs are assessed and they are assisted to make decisions about their lives. People are supported to take risks as part of an independent lifestyle. People are supported to undertake a range of activities in the community, which enriches their lives. People are supported to choose healthy nutritious meals, which benefits their health and wellbeing. Procedures in relation to medication are good. This protects the health and wellbeing of people living in the home. People are protected by the homes recruitment procedures. This protects people from potential abuse. The home is well maintained which benefits the people living in the home as they are living in a comfortable environment. People can be confident their views are taken seriously as an established quality assurance system is in place. All health and safety documentation was found to be in order. This further protects the health and well being of people living in the home.

What has improved since the last inspection?

The exterior of the home has been painted this provides a good first impression for people who may wish to live at the home. The manager has been proactive in further improving the homes environment in identified areas where requirements had not been made at the time of the previous inspection. The manager has advertised vacant posts, which was a requirement at the time of the previous inspection.

What they could do better:

The manager needs to ensure that the identified staff undertake refresher training in the areas specified in the report. This will ensure that staff are fully informed and have the knowledge and skills to meet people's needs.

The manager must ensure that the deputy manager position is advertised if the deputy manager decides to leave the home having obtained the registered managers award and discussed the options open to him/her with the relevant parties. The position for a domestic staff must also be advertised. This will ensure that a consistent staff team is maintained which will benefit the quality of care received by the people living in the home.

One identified person needs to increase the amount of storage space in their bedroom this will prevent them have items such as games stored on the floor. One identified person needs to obtain a new easy chair as it is looking worn and dated. This will continue to ensure the home is well maintained.

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

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

DETAILS OF INSPECTOR FINDINGS

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Scoring of Outcomes

Statutory Requirements Identified During the Inspection

Choice of Home

The intended outcomes for Standards 1 – 5 are:

1. Prospective service users have the information they need to make an informed choice about where to live.
2. Prospective users' individual aspirations and needs are assessed.
3. Prospective service users know that the home that they will choose will meet their needs and aspirations.
4. Prospective service users have an opportunity to visit and to "test drive" the home.
5. Each service user has an individual written contract or statement of terms and conditions with the home.

The Commission consider Standard 2 the key standard to be inspected.

This is what people staying in this care home experience:

JUDGEMENT – we looked at outcomes for the following standard(s):

1,2,5,

People using the 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 who use the service are provided with the information they need to make an informed choice about whether the service is suitable for them and their needs. The service is good at assessing people's individual aspirations and needs. People living in the home have an individual contract of terms and conditions. This ensures that their individual rights are respected.

EVIDENCE:

No new people have been admitted to the home since the last key inspection. However the manager has completed individual assessments which identify areas of people' specific individual needs in relation to the people who currently live in the home. There is an up to date statement of purpose, which ensures that the people living in the home are provided with clear information to enable them to decide if the home can meet their individual needs.

The home has an up to date service user guide, which uses a pictorial format and is therefore accessible to all of the people who may wish to read the document. The date on which a copy was provided to the identified person is also recorded which ensures that a recorded is kept to guarantee that all of the people living in the home have been provided with a copy of the document.

People living in the home have an individual contract of terms and conditions.
This means their individual rights are respected.

Individual Needs and Choices

The intended outcomes for Standards 6 – 10 are:

6. Service users know their assessed and changing needs and personal goals are reflected in their individual Plan.
7. Service users make decisions about their lives with assistance as needed.
8. Service users are consulted on, and participate in, all aspects of life in the home.
9. Service users are supported to take risks as part of an independent lifestyle.
10. Service users know that information about them is handled appropriately, and that their confidences are kept.

The Commission considers Standards 6, 7 and 9 the key standards to be inspected.

This is what people staying in this care home experience:

JUDGEMENT – we looked at outcomes for the following standard(s):

6,7,9,

People using the 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 being kept up to date which benefits people's wellbeing. People make decisions about their lives, which empowers them. People are supported to take risks. This assists them to develop their independence.

EVIDENCE:

People's care plans were inspected and they were clear to read. The care plans are in a pictorial format. This means they are accessible to the people that the document has been completed for to ensure their individual needs are met. The care plans are therefore based on person centred care planning. The care plans cover areas such as life history, personal care, medication, activities, important dates in the person's life and people's finances.

The risk assessments to show potential risks for individual people are being kept up to date. This minimises the potential risks to people both living and

working in the home. The risks identified include physical harm; self harm, slips trips and falls fire, personal relationships and challenging behaviour.

Lifestyle

The intended outcomes for Standards 11 - 17 are:

11. Service users have opportunities for personal development.
12. Service users are able to take part in age, peer and culturally appropriate activities.
13. Service users are part of the local community.
14. Service users engage in appropriate leisure activities.
15. Service users have appropriate personal, family and sexual relationships.
16. Service users' rights are respected and responsibilities recognised in their daily lives.
17. Service users are offered a healthy diet and enjoy their meals and mealtimes.

The Commission considers Standards 12, 13, 15, 16 and 17 the key standards to be inspected.

JUDGEMENT – we looked at outcomes for the following standard(s):

This is what people staying in this care home experience:

12,13,15,16,17,

People using the service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service. People are being supported to broaden the activities they participate in within the community. People are part of the community and are encouraged to take part in age peer and culturally appropriate activities. People are supported to choose healthy nutritious meals, which benefits their health and wellbeing.

EVIDENCE:

The people who live at Station Road arrange day services ranging from one day a week to five days per week. A number of the people attend sessions at college and participate in cookery, art classes, relaxation sessions, discussion groups, dance and movement classes. One identified person is undertaking a twelve week course to further develop their confidence with the hope in future they can gain employment. One the day of the inspection one identified person was attending a charity shop where they go for two hours a week on an identified day to help at the shop. I spoke with this person on the day of the

inspection and they said, "I love helping there the people are friendly." The person was also very pleased with an item they had obtained from the shop and was showing it to all the people in the home. One identified person has one to one support from staff and enjoys going to the library. A number of people attend a social club on a Thursday evening, which provides them with the opportunity to meet other friends from outside their home. This makes them feel valued.

Evidence was seen on the day of the inspection that the people at station Road use the local pubs and shops, they go to the cinema, and have lunch out and undertake day trips. This promotes social interaction within the community.

One person attends church regularly on a Sunday, which promotes their spiritual wellbeing.

A number of people travel independently and make good use of their freedom passes, which assists to further develop their self-esteem.

People living in the home do have a key to their bedroom and they do use this to lock their bedroom doors. This ensures their privacy and personal space is respected.

The contact arrangements at the home vary and range from personal visits to their family home and visits to their current home for people to see them. A number of people receive telephone calls from family and friends. This assists to promote their emotional wellbeing and makes them feel valued.

The menu of food available was inspected. The menu of food available was wholesome and nutritious. Staff are aware of people's preferences in relation to the meals that the people living in the home prefer to eat.

The fridge and fridge freezer was inspected and the food stored in the fridge was labelled properly and was in use by date. This ensures that people's health and wellbeing is promoted and protected.

The people living at Station Road used to have their own means of transport. This vehicle is now being used at another home. On the day of the inspection this matter was discussed with the inspector. A discussion with the manager and area manager has clarified this matter. This means of transport is to be shared by both homes and Station Road is going to use the bus on the days people go to college. The bus will be booked at weekends depending on the activities undertaken and a record of the agreed dates will be kept by each home.

Personal and Healthcare Support

The intended outcomes for Standards 18 - 21 are:

- 18.** Service users receive personal support in the way they prefer and require.
- 19.** Service users' physical and emotional health needs are met.
- 20.** Service users retain, administer and control their own medication where appropriate, and are protected by the home's policies and procedures for dealing with medicines.
- 21.** The ageing, illness and death of a service user are handled with respect and as the individual would wish.

The Commission considers Standards 18, 19, and 20 the key standards to be inspected.

This is what people staying in this care home experience:

JUDGEMENT – we looked at outcomes for the following standard(s):

18,19,20,

People using the 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 receive appropriate support in accordance with their needs and preferences. People's physical and emotional health care needs are met. The process of administering medication is effective and promotes the good health of people living in the home.

EVIDENCE:

People's health care records were inspected on the day of the inspection. They indicated that people are being supported to receive their individual healthcare checks. This ensures that people's health is being monitored. People are all registered with a General Practitioner, people attend the dentist, optician, chiropodist and hospital appointments as required. The information was effectively recorded. This assists with the effective monitoring of people's health care needs. A consistent process with the recording of health care information is now being used.

Health action plans are being kept up to date. This further promotes people's health and wellbeing.

People's weight charts are being kept up to date. This means that people's weight monitoring programme is being effectively monitored which benefits their health and wellbeing.

People's preferences in relation to how their personal care is provided are highlighted in their individual care plans. This means that people's personal wishes are being respected. People living in the home need varying degrees of support with their personal care. People spoken to confirmed they were happy with the assistance they received.

The medication and medication records were inspected and all medication had been signed for on the medication administration record. The medication cupboard was inspected and found to be in order. People's PRN guidelines are in place and have been signed by a professional person. All of the above practice ensures that people's health is safeguarded.

People were appropriately dressed at the time of the inspection. This promotes people's self-esteem.

Concerns, Complaints and Protection

The intended outcomes for Standards 22 – 23 are:

- 22.** Service users feel their views are listened to and acted on.
- 23.** Service users are protected from abuse, neglect and self-harm.

The Commission considers Standards 22, and 23 the key standards to be inspected.

This is what people staying in this care home experience:

JUDGEMENT – we looked at outcomes for the following standard(s):

22,23,

People using the 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 in the home can be confident that their views are listened to and acted upon since the recording and action taken in relation to complaints was found to be in order. People are protected from abuse neglect and self-harm as all of the required guidance with regard to adult protection policy and procedures were available on the day of the inspection.

EVIDENCE:

The complaints book was inspected and there had been three complaints made since the previous inspection. People living in the home had made the complaints. The information had been recorded and documented and had been signed and dated and had been responded to appropriately to resolve any identified issue raised.

People living in the home are provided with a copy of the complaints procedure, which is also in a pictorial format. This ensures that people's rights are protected as they have been informed about the complaints procedure and how to make a complaint if they wish to make one.

The home has a copy of the adult protection guidance issued by the London Borough of Enfield the local authority the home is situated in. The manager also has a copy of the homes adult protection policy and procedure. This ensures that staff are provided with the necessary information to follow

professional procedures and act in a professional manner in relation to the people living in the home to protect them from potential abuse.

Staff had undertaken adult protection training. This ensures that staff have been provided with the necessary knowledge and skills to protect people living in the home from potential abuse.

The organisations whistle blowing procedure was seen and found to be in order. This ensures that people have the necessary information to report any concerns in relation to professional practice within the home. This will benefit the wellbeing of the people living and working in the home.

When the inspector spoke in private with people living in the home no concerns were expressed in relation to the home. They were clear in relation to their right to express concerns and knew who to express their concerns and complaints to if they wished.

People's individual finances were inspected and found to be in order. The home has a safe. This further safeguards the money of the people living in the home.

Environment

The intended outcomes for Standards 24 – 30 are:

24. Service users live in a homely, comfortable and safe environment.
25. Service users' bedrooms suit their needs and lifestyles.
26. Service users' bedrooms promote their independence.
27. Service users' toilets and bathrooms provide sufficient privacy and meet their individual needs.
28. Shared spaces complement and supplement service users' individual rooms.
29. Service users have the specialist equipment they require to maximise their independence.
30. The home is clean and hygienic.

The Commission considers Standards 24, and 30 the key standards to be inspected.

This is what people staying in this care home experience:

JUDGEMENT – we looked at outcomes for the following standard(s):

24,30,

People using the service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service. People are living in a clean, comfortable safe environment, which benefits their health and wellbeing.

EVIDENCE:

Station Road is a large detached building located in winchmore Hill. Two people also live in a separate flat with its own kitchen and lounge and bathroom and this is accessed by a separate staircase from the rear garden of the home.

All of the people living in the home have a single bedroom. The bedrooms are located across three floors of the house. There is no lift in the home. Two of the bedrooms have their own en suite shower room but the rest of the people living in the home use four shared bathrooms/shower rooms. On the ground floor there is a large lounge, dining room and kitchen. On the first floor there is a small sitting room. At the rear of the home there is an enclosed garden.

People's bedrooms were inspected having sought their permission on the day of the inspection. The bedrooms were found to be appropriately furnished, people's rooms were personalised with people's own individual items, such as, a television, music centre, DVD player, pictures and exercise machine which further assists people to maintain their own identity and feel at home.

On the day of the inspection the kitchens were clean and tidy. This protects the health and wellbeing of the people living in the home and the staff that work there. The kitchen was appropriately equipped to enable staff to meet people's needs when they are being assisted to prepare meals or cook meals independently.

During the inspection I identified a number of environmental improvements, which, are as follows: there is now a new table and matching chairs in the lounge which enables people to socialise together when eating their meals. There is also a coffee table, which means the people living in the home now have a table to rest their drinks on when sitting in the lounge area. The patio door in the lounge area needs to be replaced and evidence was provided that the work will commence the week of the 27th April 2009.

The ground floor bathroom is going to be refurbished and work commences 14th of April 2009. During the period that the report was being completed I was informed that the refurbishment had been completed. This will ensure that the people living in the home are provided with a pleasant bathroom that meets their needs. Two further bath panels had been replaced in identified bathrooms, which further assists to ensure the environment is well maintained.

All the radiators within the home are going to be fitted with radiator covers by the 26th of April 2009. I have since been informed this work has been completed.

A number of magnetic door closures are going to be fitted to specific bedrooms in the home. The manager of the home informed me that this task has now been completed. This promotes the health and safety of the people living in the home. Evidence was seen that a company had been contacted to complete this work by the organisation.

The exterior of the home is due to be painted. The start date for the work to commence is the 14th of April 2009. This task has started and this will provide a good first impression for those people who live or wish to live at the home.

The vacant bedrooms no longer have items stored in them and the rooms can be made fit for use. One identified persons bedroom is scheduled for redecoration.

The laundry room has been painted and a new washing machine and tumble dryer have been obtained they are industrial machines and the manager felt they would be more effective than the previous domestic machines in meeting the needs of the people living in the home.

On the day of the inspection the maintenance man was replacing the bathroom flooring in one identified bathroom, one identified person's wardrobe door was being repaired and the side gate to the home was being repaired. This work was completed on the day of the inspection.

A new washing machine had been obtained in the kitchen within the flat and the person living in the flat confirmed that they were pleased with the new purchase. The person stated, "I like it here I would not like to leave the flat." The manager of the home has been pro-active in relation to improving Station Road and ensuring the home is comfortable safe and free from offensive odours. This provides people with a pleasant home to live in.

On the day of the inspection it was suggested that one identified person obtain furniture to ensure that the personal items can be stored more effectively. Another person would benefit from purchasing a new easy chair for their bedroom, as the chair is looking dated. The manager has agreed to act on the above. Given the proactive action taken by the manager to improve the standard of the home only recommendations will be made in relation to the two items identified above.

Staffing

The intended outcomes for Standards 31 – 36 are:

31. Service users benefit from clarity of staff roles and responsibilities.
32. Service users are supported by competent and qualified staff.
33. Service users are supported by an effective staff team.
34. Service users are supported and protected by the home's recruitment policy and practices.
35. Service users' individual and joint needs are met by appropriately trained staff.
36. Service users benefit from well supported and supervised staff.

The Commission considers Standards 32, 34 and 35 the key standards to be inspected.

This is what people staying in this care home experience:

JUDGEMENT – we looked at outcomes for the following standard(s):

32,34,35,36,

People using the service experience **adequate** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service. Not all staff have undertaken their refresher training in identified areas to ensure they can meet the needs of the people living in the home. People are protected by the homes recruitment policies and procedures. Staff are receiving supervision, which means that a consistent approach by staff can be maintained. This improves the quality of care for the people living in the home.

EVIDENCE:

There is both a registered manager and a deputy manager in post at station Road. The current deputy manager had transferred from another home whilst a professional qualification was undertaken. The deputy manager is unable to return to their previous position and clarity now needs to be provided as to if the deputy manager wishes to remain in their current position or if this is not the case then discussions need to take place to clarify any other options that are available to him/her. This will ensure consistency is provided to the staff team and those people living in the home.

On the day of the inspection it was expressed that if a cleaner were employed staff would be able to concentrate more on the needs of the people living in the home and the completion of the necessary documentation. This matter was noted at the time of the previous inspection. The organisation have agreed to employ a cleaner and at the time of the inspection interviews had been undertaken with the involvement of one of the people living at the home to undertake the recruitment of a cleaner and support worker. The response in relation to vacancies had been limited but it is essential that all posts filled.

The staff rota was inspected and there were adequate numbers of staff on shift to meet the needs of people living in the home on the day of the inspection.

Staff had undertaken a range of training including fire safety, food hygiene, infection control, First aid, epilepsy training, medication training, manual handling, and secondary prevention training. Four staff have completed their National Vocational Qualification level 2. Three staff have a nursing qualification and the manager and deputy manager have their registered managers award. On the day of the inspection the inspector was asked for clarification on who could undertake their National Vocational Qualification. A discussion took place and the matter was discussed with the area manager and manager of the service. The manager has confirmed that those staff that wish to undertake their National vocational Qualification have been asked to put their names forward on a list and this list will be forwarded to the appropriate person for the necessary action to be taken.

However, within the staff team some identified staff members need to undertake refresher training in relation to fire safety, food hygiene, first aid, epilepsy, training, medication health safety and cosHH training. This will ensure that staff are provided with all the necessary skills to meet the needs of the people living in the home.

Staff files were inspected and contained all the criminal records bureau checks, staff references and required staff identification records, which assist to protect people from potential abuse.

On the day of the inspection the inspector became aware that staff felt that when they support the young people to attend college the agreed arrangements for this could be improved upon. The manager has organised a meeting with all relevant parties to see how these arrangements can be improved upon.

Staff records were inspected and staff were receiving regular supervision from the homes manager. The interview was recorded and signed by both the staff member and registered manager. This ensures that a professional consistent

approach is undertaken by staff. This assists them to support the people living in the home in a professional manner.

Conduct and Management of the Home

The intended outcomes for Standards 37 – 43 are:

- 37.** Service users benefit from a well run home.
- 38.** Service users benefit from the ethos, leadership and management approach of the home.
- 39.** Service users are confident their views underpin all self-monitoring, review and development by the home.
- 40.** Service users' rights and best interests are safeguarded by the home's policies and procedures.
- 41.** Service users' rights and best interests are safeguarded by the home's record keeping policies and procedures.
- 42.** The health, safety and welfare of service users are promoted and protected.
- 43.** Service users benefit from competent and accountable management of the service.

The Commission considers Standards 37, 39, and 42 the key standards to be inspected.

This is what people staying in this care home experience:

JUDGEMENT – we looked at outcomes for the following standard(s):

37,39,42,

People using the 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 quality assurance system takes into account the views of the people living in the home. This assists with the self-monitoring and development of the home. People's health safety and welfare is promoted and protected.

EVIDENCE:

An experienced registered manager manages the home. The manager has passed their Registered Managers Award. This means that the manager has the skills and knowledge to manage the home effectively. The manager is knowledgeable with regard to the people living in the home and their specific needs, which assist to ensure people's individual needs, are met.

There is an established quality assurance system in place. On the day of the inspection one of the people living in the home that acts as a representative for the people living in the region had just returned from the three monthly quality assurance meeting held in another part of the country. The person concerned had enjoyed their stay in the hotel as part of this process. They stated they had "enjoyed themselves" and seemed very excited about the event, which is called your voice.

The inspector is sent regulation 37 notifications of incident forms. This means that the manager ensures that legal requirements are met and professional practice is followed.

A range of health and safety documentation was seen that included a gas certificate, electrical installation certificate, a current public liability insurance certificate, records of fire drills, weekly alarm bell tests, emergency lighting tests fire fighting equipment and servicing of the fire alarm.

All of the records were found to be in order and indicate that the home takes health and safety seriously. This promotes the health and safety of the people living in the home and the staff that work there to support them.

SCORING OF OUTCOMES

This page summarises the assessment of the extent to which the National Minimum Standards for Care Homes for Adults 18-65 have been met and uses the following scale. The scale ranges from:

- 4** Standard Exceeded (Commendable) **3** Standard Met (No Shortfalls)
2 Standard Almost Met (Minor Shortfalls) **1** Standard Not Met (Major Shortfalls)

"X" in the standard met box denotes standard not assessed on this occasion

"N/A" in the standard met box denotes standard not applicable

CHOICE OF HOME	
<i>Standard No</i>	<i>Score</i>
1	3
2	3
3	X
4	X
5	3

INDIVIDUAL NEEDS AND CHOICES	
<i>Standard No</i>	<i>Score</i>
6	3
7	3
8	X
9	3
10	X

LIFESTYLES	
<i>Standard No</i>	<i>Score</i>
11	3
12	3
13	3
14	X
15	3
16	3
17	3

PERSONAL AND HEALTHCARE SUPPORT	
<i>Standard No</i>	<i>Score</i>
18	3
19	3
20	3
21	x

CONCERNS AND COMPLAINTS	
<i>Standard No</i>	<i>Score</i>
22	3
23	3

ENVIRONMENT	
<i>Standard No</i>	<i>Score</i>
24	2
25	X
26	X
27	X
28	X
29	x
30	3

STAFFING	
<i>Standard No</i>	<i>Score</i>
31	X
32	3
33	X
34	3
35	2
36	3

CONDUCT AND MANAGEMENT OF THE HOME	
<i>Standard No</i>	<i>Score</i>
37	3
38	X
39	3
40	X
41	X
42	3
43	X

No

Are there any outstanding requirements from the last inspection?

STATUTORY REQUIREMENTS

This section sets out the actions, which must be taken so that the registered person/s meets the Care Standards Act 2000, Care Homes Regulations 2001 and the National Minimum Standards. The Registered Provider(s) must comply with the given timescales.

No.	Standard	Regulation	Requirement	Timescale for action
1.	YA35	23	The Registered Person must ensure that the identified staff undertake refresher training in relation to medication, epilepsy training, first aid, manual handling, fire safety, infection control, food hygiene, health and safety and CosHH. This will ensure that staff have the knowledge and skills to meet the needs of the people living in the home.	01/06/09
2.	YA37	18 (1)	The Registered Person must ensure that the deputy manager post is advertised if the deputy manager decides to leave the home. Along with the domestic. This will ensure that the home is effectively managed and the needs of the people living in the home are met.	10/07/09

RECOMMENDATIONS

These recommendations relate to National Minimum Standards and are seen as good practice for the Registered Provider/s to consider carrying out.

No.	Refer to Standard	Good Practice Recommendations
1	YA24	The identified person needs to obtain a new easy chair for their bedroom.
2	YA24	The identified person needs to obtain item furniture to expand further on storage space in their bedroom.

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