



Making Social Care
Better for People

Inspecting for better lives

Key inspection report

Care homes for adults (18-65 years)

Name:	The White House
Address:	39a Shaftesbury Avenue Feltham Middlesex TW14 9LN

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:
Sarah Middleton	1 4 0 4 2 0 0 9

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

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

Outcome area (for example Choice of home)

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

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

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

This is what people staying in this care home experience:

Judgement:

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

Evidence:

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

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

The Commission for Social Care Inspection aims to:

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

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

Reader Information

Document Purpose	Inspection report
Author	CSCI
Audience	General public
Further copies from	0870 240 7535 (telephone order line)
Copyright	Copyright © (2009) Commission for Social Care Inspection (CSCI). This publication may be reproduced in whole or in part, free of charge, in any format or medium provided that it is not used for commercial gain. This consent is subject to the material being reproduced accurately and on proviso that it is not used in a derogatory manner or misleading context. The material should be acknowledged as CSCI copyright, with the title and date of publication of the document specified.
Internet address	www.cqc.org.uk

Information about the care home

Name of care home:	The White House
Address:	39a Shaftesbury Avenue Feltham Middlesex TW14 9LN
Telephone number:	02088903020
Fax number:	
Email address:	white.house@craegmoor.co.uk
Provider web address:	

Name of registered provider(s):	Parkcare Homes Ltd
Type of registration:	care home
Number of places registered:	6

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

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

Brief description of the care home
The White House is a detached house in a quiet residential area near to Feltham and Bedfont. The Hounslow shopping centre can be reached by public transport and there are leisure facilities at Feltham and Bedfont. The home is registered for six people with learning disabilities. All the people living in the home currently are male. The house is owned and managed by Craegmoor, trading at Parkcare Homes. There are six single bedrooms. Two are on the ground floor, one of which leads into the lounge. One of the first floor bedrooms has a full en suite, with a bath. The remaining five have washbasins. There are two bathrooms; the one on the ground floor is an assisted shower room, which meets the needs of one particular person. There are three toilets in the home. The communal facilities are a lounge/dining room, which has French doors to the garden. There is also a small room, where there is a telephone for

Brief description of the care home

residents to talk in private. This is close to the office, laundry room and kitchen. The staff team consists of the Registered Manager and day/night support workers. At night there is one waking night staff and the Registered Manager is on call in the event of an emergency. The staff provide support with personal care, practical tasks, day services and leisure activities. Staff also receive training to support people with disabilities. The fees range from £1,122 to £1,318 per person per week, depending on the needs of each person.

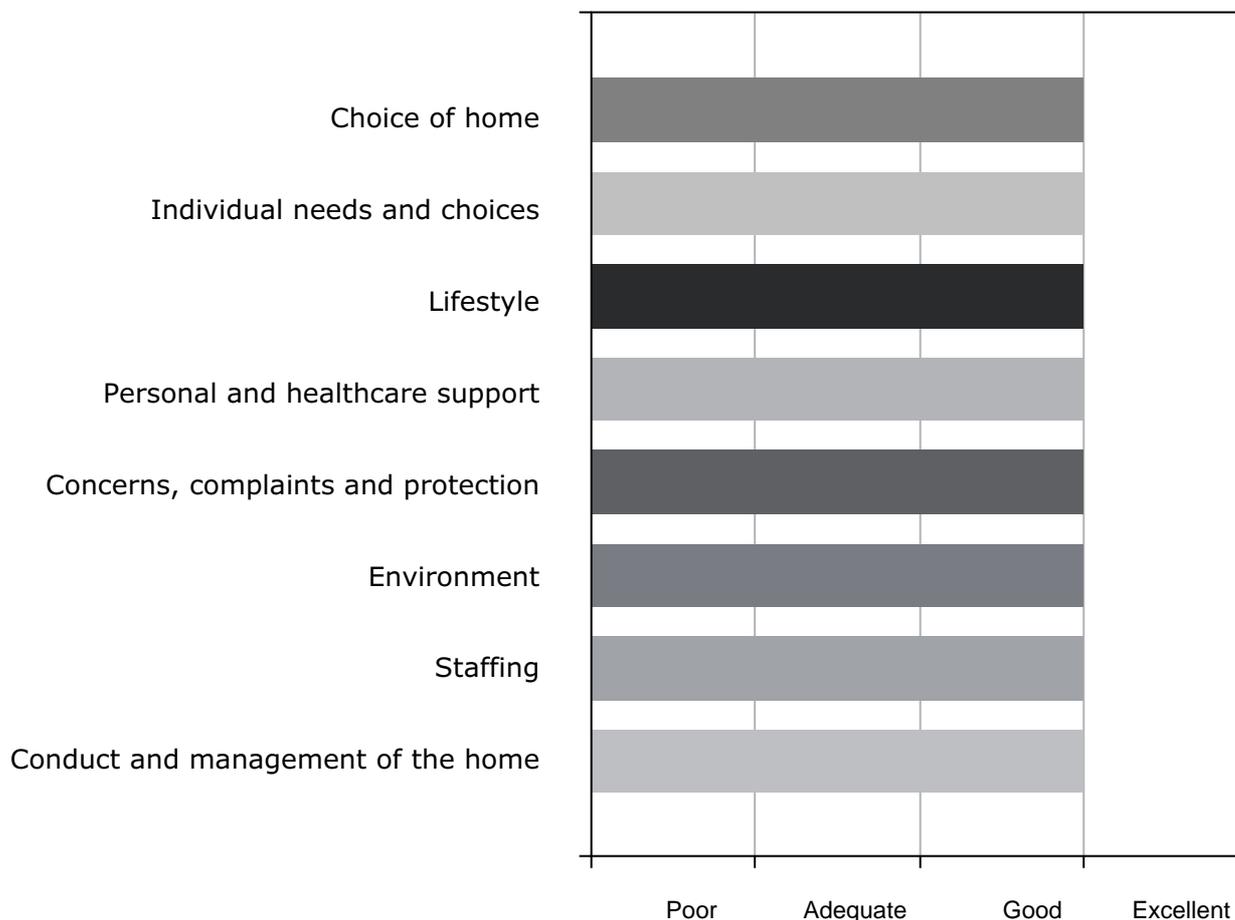
Summary

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:

An announced visit was made on 14th April 2009. It was made announced as the Registered Manager had been off sick for several weeks and a person in charge needed to be present during the visit so that certain documents could be accessed.

Before the visit we looked at:

Information we have received since the last visit on 20th May 2008. The Annual Quality Assurance Assessment (known as the AQAA). The AQAA gives the Care Quality Commission evidence to support what the service says it does well and gives them an opportunity to say what they feel they could do better and what their future plans are. How the service has dealt with any complaints and concerns since the last visit. Any

changes to how the home is run.

During the visit we:

Talked with people who use the service, staff and the Senior Area Manager, who assisted with the inspection. Looked at information about the people who use the service and how well their needs are being met. Looked at other records which must be kept, Checked that staff had the knowledge, skills and training to meet the needs of the people they care for. Looked around the building to make sure it was clean, safe and comfortable. Checked what improvements had been made since the last visit. Before the inspection we sent out questionnaires for people to complete. We had four staff surveys returned and four from the people living in the home.

We told the Area Senior Manager what we found.

What the care home does well:

The home provides people with a safe and homely place to live in. The staff team is small and can offer a consistent approach when supporting people.

People are supported to make daily choices and decisions in their lives.

Comments from the returned postal surveys included, the person living in the home can do what they choose to take part in and they know who to make a complaint to. All of the people who were supported to complete the surveys said that staff treat them well and that the home is clean.

Some of the comments from the staff surveys said, privacy is always respected and that staff are trained to provide a good service.

What has improved since the last inspection?

Information about people had improved and is regularly updated and reviewed.

Overall the medication systems in the home had improved. Monthly checks and counts on all the medication now takes place.

Various improvements had been made to the environment, such as the garage had been fitted with a new safer roof, the kitchen had been replaced along with a new kitchen floor.

There was now a fire risk assessment in place and fire doors were kept closed or fitted with equipment that ensure these doors closed in the event of a fire.

What they could do better:

Staffing levels need to be reviewed to ensure there are sufficient numbers of staff working at any one time. This would then provide people with the opportunity to take part in more activities.

A clear complaints record needs to be developed and sensitive or confidential information must be locked away.

Medication Administration records must be accurately completed so that there is a clear record of what staff have, or have not, administered.

Recruitment checks must be thorough and every attempt must be made to obtain relevant and informative information about a potential new member of staff.

All staff, including night staff need to take part in fire drills to ensure everyone working in the home knows what to do in the event of a fire.

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.

New people are assessed before moving into the home.

Evidence:

Since the last inspection visit there have been no new people admitted into the home. We viewed a blank pre- admission assessment. This looked at various areas such as assessing a person's health and social needs. The assessment did not look at whether the person wanted a male or female member of staff assisting them, should they need support with personal care. This should be looked at and addressed during the pre-admission process and was discussed with the Area Senior Manager.

Individual needs and choices

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

People's needs and goals are met. The home has a plan of care that the person, or someone close to them, has been involved in making. People are able to make decisions about their life, including their finances, with support if they need it. This is because the staff promote their rights and choices. People are supported to take risks to enable them to stay independent. This is because the staff have appropriate information on which to base decisions.

People are asked about, and are involved in, all aspects of life in the home. This is because the manager and staff offer them opportunities to participate in the day to day running of the home and enable them to influence key decisions. People are confident that the home handles information about them appropriately. This is because the home has clear policies and procedures that staff follow.

This is what people staying in this care home experience:

Judgement:

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

The health and social needs of the people living in the home were identified and overall were being met. Risks had also been considered.

People are encouraged to make decisions about their lives.

Evidence:

We viewed the files and information on two people. One of the people was present whilst we looked through the file. Overall care plans and risk assessments were up to date. Care plans look a wide range of subjects, such the person's individual personal and health needs. The information recorded the support a person needed and how to encourage them to be independent.

Overall the information was available and showed that the staff team are carrying out monthly reviews on the person's needs. However there was a lot of information on

Evidence:

each file viewed and it was difficult to locate all the information. This issue had been raised at the last inspection visit and based on the findings at this inspection visit it did not look as though this had been addressed. The Area Senior Manager said he was aware that the files needed looking at and would be asking the staff team to go through the files to tidy them up. Information needs to be up to date, relevant and accessible for the staff team to read. This then ensures that people are supported appropriately and safely.

Where possible the staff team encourage people to make daily decisions and choices. As stated above, where the staff team agree to restrict a person's liberty and freedom, then it must be clearly documented as to the reasons for the action the staff team have taken. It was seen on one file that the restriction of liberty was considered and this should be followed up in more detail.

People are able to contribute their views about the home at meetings and through the Provider's meetings known as "Your Voice". Here representatives from the care homes can meet to hear any news from the Provider and to contribute the views and opinions of the people living in the homes.

Risk assessments were seen in the files viewed. Some of the risks were written in a general way and staff should be mindful that care plans and risk assessments need to be written for each person needs. Overall risks had been assessed and recorded so that the staff team would know the different ways to minimise the identified risks.

A sample of daily notes were seen and these outlined what the person had done each day.

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.

People need to have the opportunity to regularly engage in activities and pursue their interests.

People are supported to maintain social relationships with relatives.

People's rights are respected.

The meal provision provides a varied and healthy diet for the people living in the home.

Evidence:

Two people attend different day centres and a College. The other three people take part in various activities and tasks with the staff team. One person spoke of how they

Evidence:

enjoy going out and visiting different places. The staff team explained that the majority of places are accessed by public transport. One person does not like to go out with other people, only with members of staff, whilst another person who has a day off in the week from the day centre needs one to one support. Therefore it could prove difficult at certain times of the week to take people out into the community as often there are two members of staff working on the early shift from the morning until early afternoon. On the day of the inspection two people were seen to be in all day. We were concerned that at times people are not engaging in activities and tasks. A requirement was made for this area of people's lives to be reviewed and looked at to ensure people are not bored and that they have the opportunity to take part in the activities they wish to.

The home encourages family contact and one person spoken with said they enjoyed seeing their relatives. There is a pay phone for people to use should they wish to make a call in private.

People can receive their own post, although only one person can read their own post. People are able to lock their bedroom doors for privacy. Staff were seen to interact positively with the people who live in the home. One person spoken with said they can choose to spend time with others or in their bedrooms.

We viewed the new kitchen and saw that the fridge and freezer had now been moved to another room nearby. Opened food that was seen in the fridge had been covered and dated. Staff explained that they were encouraging people to eat more fresh vegetables and evidence was seen that the staff team had been working hard on promoting healthy eating within the home, as people had had lost weight and were looking healthier. We viewed a sample of menus and saw that the meals were varied, offering people the chance to say what they wanted to eat. Those people asked, said they liked the meals and also enjoyed having meals out in the community. One person said they liked eating meals alone and staff confirmed that they respect this person's wishes.

Staff said that some people take part in the preparation of meals or assisted in laying the table, whilst others are not interested, or are unable, to help out at mealtimes. Staff make a note of any alternative meals eaten.

Overall it was pleasing to see that the staff team have made a conscious effort in the meal provision and it is hoped that this will continue.

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 can receive personal care support in private and in a respectful way.

The health needs of people was recorded and being met.

Medication administration records need to be completed accurately, in order to fully protect the welfare of the people living in the home.

Evidence:

People are supported with any personal care needs that they are unable to complete independently. Those staff asked said they prompt and encourage people where needed to ensure people maintain good personal hygiene. One new member of staff confirmed that they had observed personal care being given so that they knew what to do. As mentioned earlier in the report, consideration should be given regarding whether a person prefers a male or female member of staff supporting them with personal care. This should be recorded in a person's file.

Everyone who lives in the home has access to all the health professionals, such as GP,

Evidence:

dentist and chiropractist. We viewed a sample of records that record when a person has seen a health professional so that the staff team can monitor a person's health needs. Health needs were written in each person's file that was viewed.

We viewed a sample of medication with a member of staff. The medication has now been moved to the small office on the first floor. The majority of medication is sealed in blister packs or provided in boxes. The member of staff explained that the home does not keep an overstock of medication. The people living in the home are not able to self-medicate. At the time of the inspection there were no controlled drugs in the home.

All the medication seen and checked was correct at the time of the inspection. We saw that one person had recently been prescribed cream and drops for an eye infection, but that often the person refused to receive these medications. There were many gaps on the Medication Administration Record, where staff should have recorded that it had been offered and refused. This was brought to the attention of the member of staff who was present during these checks. A requirement was made for the staff team to be more vigilant in signing the medication records.

We saw evidence that every month a member of staff counts and checks all the medication. We reminded the member of staff that checks should ideally be carried out during the middle of the medication cycle. We also suggested that a counting tool is obtained so that should any medication come into the home in a bottle, staff would need to be able to count this in a safe way.

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.

People's complaints are listened to and would be acted on. A clear complaints record would provide a clear indication of how the home manages complaints.

Systems are in place to protect the welfare of the people living in the home.

Evidence:

We viewed the complaints folder and book. It was not clear how many complaints there had been since the last inspection visit. The Annual Quality Assurance assessment stated there had been two complaints. There must be a clear complaints record kept which need to include, the number of complaints, the nature of the complaints and any action taken. A requirement was made for this to be addressed. We also spoke with the Area Senior Manager about the need to keep any sensitive or confidential information relating to a complaint locked away, as the complaint folder seen was freely available for anyone to access. Those people spoken with said they would speak to staff if they had any concerns or complaints. People who were supported to complete the postal surveys also confirmed that they knew who to speak to if they were unhappy.

Staff receive training on adult abuse, known as safeguarding adults. We had been informed of one concern recently raised by a relative regarding the Provider's financial

Evidence:

department. Although the concern and issue had been resolved we spoke with the Area Senior Manager to ask that he looked into the finances of all the people living in the home. Clear records must be kept in the home so that should a person be requested to pay a large sum of money for their rent the reasons and transactions are clear for audit purposes. We were informed that twice a year a financial audit is carried out and a report was seen dated November 2008. Recommendations had been made following on from this visit but not in relation to people's personal money or the incorrect payment of rent.

We counted two people's personal money in the presence of a member of staff. These were correct. Receipts are obtained for day to day financial transactions and the these are documented. We were informed that the money is counted at each handover but there was no record of these counts and checks on the balance sheets. We recommended that evidence needs to be available of these checks and that this should be recorded.

Environment

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

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

People stay in a home that has enough space and facilities for them to lead the life they choose and to meet their needs. The home makes sure they have the right specialist equipment that encourages and promotes their independence. Their room feels like their own, it is comfortable and they feel safe when they use it. People have enough privacy when using toilets and bathrooms.

This is what people staying in this care home experience:

Judgement:

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

The home was clean, bright and welcoming for the people living in the home.

Evidence:

We took a tour of the home and viewed a sample of rooms. There was evidence that attention had been paid to the environment, with a new roof on the garage in the garden, the main hall had been painted and there was a new kitchen and kitchen floor. Overall the home was brighter and welcoming.

Staff keep the home clean and tidy with some assistance from the people who live in the home. People keep their own bedrooms clean and tidy and staff help with this task where needed.

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.

People are supported by a experienced and competent staff team.

The recruitment checks need to be robust in order to fully protect the people living in the home.

Overall the training needs of the staff team were being met.

Evidence:

The staff team has various work experiences, backgrounds and knowledge. Some staff expressed concern regarding the staff vacancies. One new member of staff recently started and the Area Senior Manager informed us that he had been informed that all the necessary recruitment checks had come through for two more new members of staff, who would be able to start in the near future. We were informed by the Area Senior Manager that there was no-one in the staff team with an NVQ. However all had been enrolled to start studying for this qualification. It is important that people are supported by a qualified and competent staff team and it is hoped that everyone in the team will obtain this qualification.

We viewed the rota with the Area Senior Manager. It was noted that the Manager

Evidence:

remained on the rota as the third person working in the home on a morning shift. This had been discussed at the last inspection, as we felt that the Manager should have been focusing on the running and management of the home. Although it is good practice for a Manager to know how the home operates and how people are supported by the staff team, it is also important that the Manager has the time to concentrate on their particular duties. We were informed that there is one person who staff said needed one to one support if they were to go out into the community. This person is not currently funded to have one to one support and therefore this is provided when the staff team have the time. We had concerns that the current number of staff working at any one time needs to be reviewed in order to ensure the individual needs of the the people living in the home are met. A requirement was made for this to be looked at.

Furthermore it was discussed with the Area Senior Manager, that some staff might be requesting to work certain shifts and hours. The Area Senior Manager agreed to look into this, as he acknowledged that the staff team should be working the same shift pattern and not pick and choose the shifts they feel able to work.

The staff team usually meet on a regular basis and this should continue in order for the team to share information and support each other.

We looked at two staff employment files. Both had no current photograph and this needs to be obtained. One new staff member had a POVA first clearance in the file and confirmed that they now had a Criminal Record Bureau Check. It was noted and discussed with the Area Senior Manager that on one file the references were not from the previous employer. This would have been informative and relevant as the previous job had been relating to care work. The references seen were from a friend and former classmate. In order to protect the safety of the people living in the home, it is important that every attempt is made to obtain work related references. A requirement was made for employment checks to be more detailed. All other relevant documents were present at the time of the inspection.

We looked at training. there were some training subjects that staff needed to attend, such as Health and Safety and First Aid. The Area Senior Manager informed us that he would ensure all staff enrol on all core subjects. We also discussed the importance for the staff team to receive not only information on the new Mental Capacity Act and Deprivation of Liberty safeguards but training so that they have a clear understanding of this new legislation and good practice guidelines. Information on the Mental capacity Act was seen in the office.

A training plan was viewed that records the training attended by all staff. Individual

Evidence:

training records were also seen. There was no evidence of the induction the new member of staff had gone through since working in the home. We were informed that each new member of staff will attend a three day induction with the Provider, however it is vital that any in house shadowing and inducting is recorded and available for inspection. We were informed by the member of staff that they had received an induction and had been slowly introduced to the home to see how it is run.

Those staff asked informed us that since the manager had been off work, they had not received one to one supervision. The Area Senior Manager confirmed that he would be meeting with members of staff individually in the forthcoming weeks. We made a recommendation for this to be addressed.

Conduct and management of the home

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

People have confidence in the care home because it is run and managed appropriately. People's opinions are central to how the home develops and reviews their practice, as the home has appropriate ways of making sure they continue to get things right. The environment is safe for people and staff because health and safety practices are carried out.

People get the right support from the care home because the manager runs it appropriately, with an open approach that makes them feel valued and respected. They are safeguarded because the home follows clear financial and accounting procedures, keeps records appropriately and makes sure staff understand the way things should be done.

This is what people staying in this care home experience:

Judgement:

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

The home has made improvements and is managed well.

The views of people are obtained and listened to.

The health and safety checks ensure people are living in a safe home.

All staff do need to attend fire drills to protect the safety of the people living in the home.

Evidence:

The Manager had not been at work for several weeks. The staff team informed us that the home was managing and that they could seek advice or support from the Area Senior Manager who was on call, when he was not at the home. There are plans to recruit a temporary manager who will be based in the home full time until the Registered Manager returns to work. Overall the home has made improvements since the last inspection visit and this is due to the hard work of the Manager and staff team.

Evidence:

The home actively seeks the views of the people living in the home. This is done through a variety of ways, sending surveys to people and their relatives and acting on the results of these. House meetings are held, where people can voice their views about the home and through having a representative who attends the "Your Voice" forums organised by the Provider, which enables the views of people to be heard by the Provider. We discussed with the Area Senior Manager the benefit of having a short report completed each year that outlined the work that had taken place in the home, areas still to be looked at and future aims and objectives. We recommended that this is developed over the forthcoming months.

We viewed a sample of the health and safety checks. The Gas safety test was carried out on the day of the inspection, the testing for Legionella and Portable Appliance test were both up to date.

We saw two fire risk assessments, one completed in 2008 by an external company and one recently completed by the Area Senior Manager, who confirmed he had attended training on completing these assessments. Those fire doors kept open had been fitted with door releasing equipment.

Fire drills had been held on a regular basis but there was no evidence that staff working at night had attended a fire drill. A requirement was made that all staff team attend a suitable number of fire drills throughout the year.

Are there any outstanding requirements from the last inspection?

Yes

No

Outstanding statutory requirements

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

No.	Standard	Regulation	Requirement	Timescale for action
-----	----------	------------	-------------	----------------------

Requirements and recommendations from this inspection:

Immediate requirements:

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

No.	Standard	Regulation	Requirement	Timescale for action
-----	----------	------------	-------------	----------------------

Statutory requirements

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

No.	Standard	Regulation	Requirement	Timescale for action
1	12	16	<p>People should have the opportunity to engage in regular activities and occupation.</p> <p>In order to provide a stimulating and interesting life, people should be able to take part in the activities they want to.</p>	01/06/2009
2	20	13	<p>Medication Administration records must be signed for all prescribed medication.</p> <p>In order to show there is a clear record of whether medication has been administered or refused, medication records need to be accurately completed.</p>	24/04/2009
3	22	17	<p>There should be a clear complaints record kept in the home.</p> <p>A clear record would show the number of complaints and action taken to address any complaints.</p>	30/04/2009

4	33	18	<p>There must be sufficient numbers of staff working in the home.</p> <p>To meet the needs of the people living in the home, there needs to be sufficient numbers of staff working on each shift.</p>	29/05/2009
5	34	12	<p>The home must seek references from the applicant's current or last employer.</p> <p>To protect the welfare of the people living in the home, detailed checks, such as obtaining a reference from an applicant's current or last employer need to be sought.</p>	24/04/2009
6	42	23	<p>All staff must attend fire drills throughout the year.</p> <p>In order to protect the welfare of the people living in the home all members of staff need to know how to respond to a fire drill in a quick and safe manner.</p>	24/04/2009

Recommendations

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

No.	Refer to Standard	Good Practice Recommendations
1	7	The information in people's files should be reviewed and tidied up to ensure they are accessible and easy to follow.
2	23	A record of the counts and checks on people's personal money should be in place to evidence how often checks are made and to ensure there are no financial errors.
3	36	Staff should be receiving regular one to one support and supervision from their line manager. Evidence of these

		meetings should be available for inspection.
4	39	A short report should be devised to evidence how the home has developed over the past year, record the improvements made and areas still to be addressed. The views of the people living in the home should be also included.

Helpline:

Telephone: 03000 616161 or

Textphone: or

Email: enquiries@cqc.org.uk

Web: www.cqc.org.uk

We want people to be able to access this information. If you would like a summary in a different format or language please contact our helpline or go to our website.

Copyright © (2009) Commission for Social Care Inspection (CSCI). This publication may be reproduced in whole or in part, free of charge, in any format or medium provided that it is not used for commercial gain. This consent is subject to the material being reproduced accurately and on proviso that it is not used in a derogatory manner or misleading context. The material should be acknowledged as CSCI copyright, with the title and date of publication of the document specified.