

Key inspection report

Care homes for older people

Name:	Lime Tree House Residential Home
Address:	Lewes Road Ringmer East Sussex BN8 5ES

The quality rating for this care home is:	two star good service
--	-----------------------

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.

Lead inspector:	Date:
Elizabeth Dudley	2 0 0 7 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 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.

Reader Information

Document Purpose	Inspection report
Author	Care Quality Commission
Audience	General public
Further copies from	0870 240 7535 (telephone order line)
Copyright	Copyright © (2009) Care Quality Commission (CQC). 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 CQC 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:	Lime Tree House Residential Home
Address:	Lewes Road Ringmer East Sussex BN8 5ES
Telephone number:	07801225549
Fax number:	01273813755
Email address:	zeenatnanji@aol.com
Provider web address:	www.southcarehomes.com

Name of registered provider(s):	Zeenat Nanji, Salim Nanji
Name of registered manager (if applicable)	
Type of registration:	care home
Number of places registered:	30

Conditions of registration:		
Category(ies) :	Number of places (if applicable):	
	Under 65	Over 65
old age, not falling within any other category	0	30

Additional conditions:

The maximum number of service users to be accommodated is 30.

The registered person may provide the following category/ies of service only: Care home only - (PC) to service users of the following gender: Either Whose primary care needs on admission to the home are within the following categories: Old age, not falling within any other category (OP).

Date of last inspection

--	--	--	--	--	--	--	--

Brief description of the care home

Lime Tree House provides personal care for up to 30 residents. It is in a rural location approximately half a mile from the village of Ringmer. Local bus services from Lewes and the surrounding areas serve the home and there is ample parking for around fifteen cars. The residents' accommodation is over two floors and residents can reach all areas of the building by shaft lift.

The home has recently been extended and refurbished. There are thirty single

Brief description of the care home

rooms, all of which have an ensuite facility consisting of a washbasin and toilet, nine of these have an ensuite shower facility and one has a bath.

There are three general bathrooms with assisted baths and showers, a hairdressing room and ample w.c facilities.

The home has a large parking and seating area to the front of the property and a smaller garden to the rear. This has a patio area covered in decking and has garden furniture and is accessible to all residents. The remainder of the garden is awaiting landscaping.

Other communal accommodation consists of a four lounges, one of which includes a dining area.

The fees range between £408.11p and £575 per week, with extra services such as chiropody, hairdressing and newspapers being charged seperately, these charges are available from the manager (this information is correct as of the 20th July 2009)

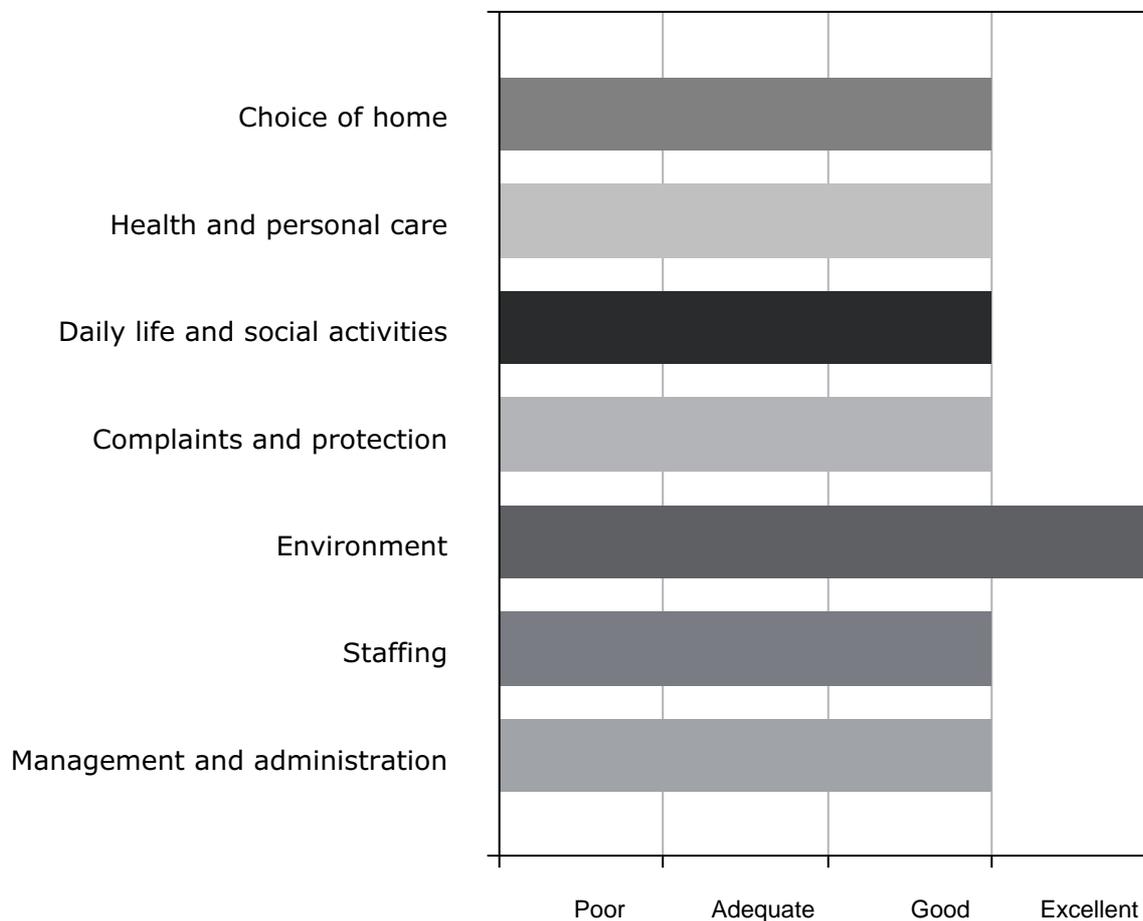
Summary

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

The quality rating for this care home is:

two star good service

Our judgement for each outcome:



How we did our inspection:

This unannounced key inspection took place on the 20th July 2009 from 09:00 to 15.30 and was facilitated by the acting manager, and later during the day, by the Registered owner (provider) Mrs Z Nanji. The home does not currently have a registered manager and for the purposes of this report the acting manager will be referred to as 'the manager'.

The Annual Quality Assurance Review (AQAA), (a document required by regulation in which the manager or the registered person sets out what has been achieved or changed in the home during the past twelve months, and their plans for the next twelve months. It also contains numerical information which is used in the formation of the judgments made in this report); was received when we asked for it and provided accurate and current information about the home.

Prior to the inspection surveys were sent out by the Care Quality Commission to

residents, staff and health and social care professionals who visit the home. Four surveys from residents and three from staff have been received to date. These are used in the inspection process to gain understanding about the daily life in the home and thanks are extended to those who responded.

Other methods used to inform the inspection involved the examination of documentation. This included care plans, medication records, staff recruitment and training and catering and health and safety documentation.

Areas of the home, including residents' accommodation, was visited and policies and procedures were examined.

During the day five members of staff and eight residents were directly involved in the inspection by discussions with them and by observation of staff working with the residents. Discussions were also held with the manager and the provider.

The last key inspection took place on the 11th September 2007

What the care home does well:

The home provides personal care for up to thirty older people in a homely and comfortable atmosphere. The service has recently been extended and refurbished to a high standard. New bedrooms and communal space are provided and an area of decking covered patio provides a pleasant area for residents to sit outside.

All prospective residents receive an assessment by the manager prior to being admitted to the home, these assessments were thorough and identified the personal care and social needs of the individual. These then form the basis of the individual's care plans. The care planning was generally of a high standard and showed that residents had been consulted on how they wish their care to take place.

Medication records showed that some people are encouraged to administer their own medication if they are able and wish to do so, in some cases the staff administer the majority of the medication whilst residents keep the ones they wish to administer themselves. An activities coordinator has recently been employed on a part time basis and is soon to be joined by another person to provide leisure activities to residents. The coordinator is currently in discussion with residents about their interests and what activities they would like to participate in.

Arrangements for a summer barbecue are in progress.

Surveys received from residents said 'It is excellent here, the staff are friendly and polite'. 'Very nice and caring staff, can't fault it here'. 'Nice food, we get a choice at all meals'. Residents spoken with in the home also made similar comments. Staff are encouraged to undertake further training and currently 70% of the staff have attained the National Vocational Qualification Level 2 in care. Other training has included dementia care, the Mental Capacity Act and nutritional care.

The home is currently in the process of recruiting more staff as although there are thirteen residents in the home at present, the completion of the building has enabled them to increase their registration and to admit up to thirty residents.

Residents receive questionnaires on a quarterly basis to seek their views on the services provided by the home and this enables the home to identify where improvements are needed. The views of residents and their representatives are also gained at the residents' and representatives' meetings held at the home.

The home has received few complaints in the last year, those received were of a minor nature and records showed that these had been addressed promptly.

What has improved since the last inspection?

The building and extension has provided more communal space for residents and has resulted in all rooms now having an en suite facility.

Three requirements were made at the last inspection relating to care planning, the manager applying for registration and risk assessments. Two of the three have been complied with, the previous manager has resigned from the management position and has another role in the home, so this requirement was non applicable. The new

manager is in the process of applying for registration.

The number of staff who have attained their National Vocational Qualification in care has increased, and this will benefit residents by them having a well trained staff who are aware of their needs.

What they could do better:

Whilst there were some shortfalls found at this inspection, requirements have not been made as the provider gave assurances that these would be addressed.

One resident stated that there were some areas in the building that required attention including the bath on the first floor and central heating. The provider gave assurances that these are in the process of being attended to and she will inform the commission when these have been completed.

The manager must ensure that no member of staff commences work at the home prior to two written references having been obtained and should be aware that professional references are preferential to personal references. Assurances that this would be done were given.

Following the completion of the new building, risk assessments will be required for all new areas, the manager must also ensure that the garden area is continually risk assessed until the landscaping is completed and then risks are assessed on a regular basis.

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 our findings

Contents

Choice of home (standards 1 - 6)

Health and personal care (standards 7 - 11)

Daily life and social activities (standards 12 - 15)

Complaints and protection (standards 16 - 18)

Environment (standards 19 - 26)

Staffing (standards 27 - 30)

Management and administration (standards 31 - 38)

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

Residents are only admitted to the home following a comprehensive and detailed assessment which determines whether the home can meet their needs.

The home produces sufficient up to date information to enable people to make the decision over whether or not they wish to live there.

Evidence:

Sufficient and up to date information is provided for prospective residents. This information includes A Statement of Purpose and Service User Guide, which clearly define the aspirations of the home and give guidance about the staff who work there and the services provided. This information has been regularly reviewed to incorporate any changes which may have taken place.

Each prospective resident has a preadmission assessment undertaken by the manager. This is a comprehensive assessment of the individual's personal, health and social care needs and determines whether these, and the individual's expectations,

Evidence:

can be met by the home. This manager confirms this decision in writing to the prospective resident. Following the implementation of the Deprivation of Liberty Safeguarding and the Mental Capacity Act, preadmission assessments should include details regarding any limitations which may have to be put in place regarding the residents daily activity or life at the home.

Following admission a contract and 'Statement of Terms and Conditions of Residence' is given to the resident. This is given to all residents admitted irrespective of the individual's funding arrangements, and clearly identifies how any fees are to be paid and by whom.

Relatives or other representatives and prospective residents are invited to visit the home prior to making the decision whether they wish to live there.

Residents are admitted for permanent and respite care but the home does not admit residents under the intermediate care scheme.

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

The standard of the care planning ensures that resident's personal, health and social care needs are met in a proactive and knowledgeable manner.

Systems in place for the administration, receipt and disposal of medication safeguard the residents in the home.

Whilst the home cares for people who have reached the end of their lives, they do not have sufficient advance information to ensure that people's preferences will be met.

Evidence:

During the visit to the home a total of six care plans were examined. These belonged to a variety of residents including those who have lived at the home for several years and those who have recently been admitted. This sample of care plans showed that staff have a good perception of what is required to ensure the holistic care of the residents, and included a care planning for a variety of needs for individual residents including social care needs, continence, nutrition and skin care. Nutritional care planning showed that residents were being weighed regularly and any deviations to

Evidence:

the normal weight of the residents followed up by involvement with the General Practitioner and the dietitian. In all parts of each care plan there was evidence that appropriate actions were taken with health care professionals as required. Daily records were informative and identified the care that had been given in accordance with the directions in the care plans. It is recommended that night care plans are put in place, and also that social care plans are expanded and give details relating to the persons social needs and how these are to be met. ie a survey returned showed that one resident expressed the wish for care staff to take residents to the shops or for walks, this should be in the care plan with information on how the home will address this need. Care plans will also need to include any limitations that are put on a person's mobility around and out of the home and any restrictions that have to be put in place including details of the actions taken and authority contacted.

Most of the residents seen were content and all appeared to be receiving a good standard of personal care .Generally they spoke very positively about the staff and their experience of living in the home including the care they received. "Staff are very nice here, they do as you ask and they are very friendly". " I don't use my call bell much but the once are twice I've used it they have come quite quickly". " They are caring, helpful, friendly and courteous at all times'.

A health care professional visiting the home said that she had a good rapport with the staff and that staff were very cooperative and involved with the residents, continued with the treatments she wished residents to have and reported resident's progress back to her.

The home uses the local General Practitioner's practice, but residents can use their previous GP if they practice within this area.

The standard of medication administration was generally good and only staff who have received medication training are permitted to administer the medication.

Medications had been signed following administration and controlled drugs records were in place, although currently no residents are prescribed these. Medication policies and procedures were in place including a policy and risk assessment for residents who control their own medications. There are no residents that administer all their medications at present, but some residents had control of specific medications and risk assessments had been reviewed to ensure resident's continuing ability to do this.

Staff must ensure that they inform the GP if a resident continues to refuse prescribed

Evidence:

medication (which is not prescribed on an 'as required' basis) over a number of days, to avoid putting the resident's health at risk.

Current care planning does not include the resident's wishes for the care they want to receive at the end of their lives. Residents can be cared for in the home during this period, with community nurses providing any nursing care required, and the home has received compliments and thanks from relatives of bereaved relatives. However the home should have sufficient knowledge of the individual's preferences for their care during this time in order to ensure that these are adhered to . This was discussed with the manager and the provider.

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 are able to make choices around their activities of daily living and the way they spend their days.

Leisure activities are provided and these are currently being tailored to the preferences of the residents.

Residents expressed satisfaction with the standard of catering and the meals provided.

Evidence:

The home has recently appointed an activities co ordinator to provide a range of leisure activities to the residents in the home, prior to her appointment staff were responsible for ensuring that residents had sufficient mental and physical stimulation. A second activities coordinator is in the process of being recruited and together they will serve this home and the two sister homes in the area.

The activities coordinator is setting up an activities programme and whilst she explained that this is currently in 'its infancy' whilst she finds out resident's preferences, it shows that board games, discussions, musical entertainment and quizzes are being offered. It is hoped that the future landscaping of the garden will provide raised beds for those residents who enjoy gardening.

Evidence:

There was evidence in care plans that care staff have been providing similar activities on a daily basis to residents prior to the employment of the coordinator. A barbecue is planned for later in the summer.

Surveys and discussion with residents showed that they would like some outings to be included, either to places of interest or to the local shops.

Residents are encouraged to make their own choices around activities of daily living such as times of rising and retiring, choice of clothing and how they would like to spend their day. Care plans showed evidence that they had been based on resident's preferences and choice when care was being planned.

Residents were pleased with the new televisions supplied throughout the home and some said that they had particularly enjoyed watching recent sporting events. Residents can have visitors when they wish and the home arranges for local ministers of religion to visit.

On being asked about their views on the catering provided, residents said it is 'Very good'. 'Excellent and we get a choice.' 'Very nice food'. The menus showed the choice of foods provided to be basic home cooking but with choices at the main meal and taking into account resident's preferences. Whilst the supper menu does not offer choices, the cook and staff said that they will always offer something different on request.

Residents are asked to choose their week's menu on a Sunday, with the cook reminding them on a daily basis what is on the menu and enabling them to revisit the menu if they wish. The menu is displayed in the dining room.

As resident numbers increase the manager may have to rethink this routine in order to ensure residents are able to decide on a daily basis what they would like to eat that day.

Special dietary requirements are catered for and residents requiring these confirmed that these were always prepared and both the cook and the other staff were all fully aware of these.

A new kitchen has been provided and therefore there have been two environmental health inspections in the past six months. These showed no requirements. All members of staff have the Food Hygiene Certificate, care staff take responsibility for the preparation of breakfast and the serving of supper.

Evidence:

There was adequate supplies of fresh, frozen and dried food and there was fresh fruit and vegetables available and used in meals.

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.

Residents felt confident that any complaints they may have would be addressed in a prompt and professional manner.

Staff are aware of their role and responsibilities in the safeguarding of those in their care.

Residents have access to, and use, the services of an advocate as required.

Evidence:

Whilst many of the residents spoken with were unaware of the home's complaints policy or how to make a formal complaint, all said that they would feel comfortable with speaking to the manager or staff and pursuing any complaint or concern they may have. The majority saying that they were confident that any matter would be dealt with in a fair and prompt manner.

The home's complaints policy includes the time scales the home will take to address a complaint and is displayed in the entrance hall. Residents have their own copy in the Service User Guide. It may benefit residents to provide a copy of this in the lounges and to issue this in a larger print format. The provider says that she normally goes through the complaints procedure at resident's meetings to ensure that residents are conversant with this.

Six minor concerns and one complaint have been received in the past twelve months. The complaint was from outside the home and was regarding the building works which

Evidence:

have been in progress this year. All concerns and complaints were addressed promptly and records kept of the way in which they had been dealt with. There was evidence that residents are able to access and receive the services of an advocacy service if required.

The home has policies regarding adult safeguarding and all staff have receive training about this. This takes place at the home or in one of the other homes belonging to the group, and is included in the staff induction at commencement of employment. The manager has undertaken this training through the local authority. Policies and procedures relating to this were in line with the local 'Multi agency guidelines' and staff spoken with were fully aware of how what constitutes abuse of the older person and how to report this if they became aware of it.

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

The service has been refurbished and extended to a high standard, providing a clean and spacious home for residents. Residents are encouraged to bring in their own possessions to personalise their rooms.

Evidence:

The home has recently been extended and refurbished to a high standard. This has provided four communal rooms, one of which is used as a dining room and lounge and other rooms which are used as lounges. All areas of the home are now served by a shaft lift. Residents also have the benefit of a large area of timber decking in the garden which is accessible from the lounge areas and is furnished with garden chairs, tables and parasols.

The garden is awaiting landscaping and raised beds are planned to enable those residents who wish to do so, to be involved with the gardening.

The refurbishment has provided extra residents accommodation with eighteen single rooms on the ground floor and twelve on the first floor. All rooms have en suite facilities, nine of which have showers and one with a bath. All rooms are suitably furnished and have call bells and lockable drawers and doors. Residents are encouraged to bring in their own possessions to personalise their rooms.

Evidence:

Two new assisted bathrooms with showers have been provided which brings the total number of assisted bathing facilities to three. Baths are fitted with temperature selectors but regular monitoring of the temperature of the hot water delivered to residents outlets still takes place. Records showed that these were maintained within recommended parameters. There are some areas remaining which are not fully completed with residents saying that the bath on the first floor is not yet working and there are some difficulties with the central heating provision. However the provider said that this is being addressed and they will inform the commission when these are complete. It is recommended that the walls around toilets are covered with an easy clean surface.

The building has also provided a new clinic room, office space, provision for the installation of sluices, an industrial style kitchen and a shaft lift. Corridors have hand rails to enable residents to maximise their independence.

Staff have received training in infection control and supplies of disposable aprons, gloves and hand gel were evident. There are policies and procedures relating to infection control and the provider intends to contact the Health Protection Agency regarding further training and policies.

New laundry areas and equipment have been provided and red bags are used for soiled linen.

All areas of the home were very clean with two housekeeping staff are employed for general housekeeping duties.

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 provided with sufficient training to enable them to meet the needs of the residents living in the home.

Some shortfalls in recruitment practices could have a detrimental effect on residents.

Evidence:

Discussions with staff, observation of residents and examination of the duty rota showed that there are sufficient staff on duty over a twenty four hour period. There are twelve members of care staff currently working in the home, with recruitment on going in view of the proposed increase in resident numbers.

Nine of the twelve members of care staff (70%) have attained the National Vocational level two or three in care, with some members of staff working towards level four. Care staff are supported by housekeeping, catering, maintenance, leisure activities and administrative staff.

Staff spoken with said : " There are enough staff on duty to make sure that the residents are well looked after". " We have enough time to do our job without being too hurried." "We have plenty of training".

Residents described the staff as ' Considerate and caring". " Excellent staff very kind and courteous". " I get on with almost all of them". " I think that only having one staff

Evidence:

on at night is not sufficient , they are putting two on now, but I don't know if that will be enough". " Staff do talk very quickly and they talk quickly when they talk to each other, I cant always understand them".

Two residents said that at times the staff could not be understood, but this generally seemed to be the speed at which they were speaking. Those staff spoken with had a good command of English and other residents agreed with this. This was discussed with the manager.

Four personnel files were examined, the majority of these had all documentation included as required by regulations, however one file only contained one written reference and the manager must ensure that no member of staff is employed without two written references, the manager and provider gave assurances that this would be addressed therefore no requirement has been made, this will be checked at the next inspection.

The manager should also be obtaining professional references as opposed to personal references for staff whenever possible, this was discussed with the manager.

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.

Management systems in the home ensure the safety and well being of residents and staff.

The home enables residents and their representatives to make known their views on the services offered by the home and acts for improvement on issues raised.

Evidence:

The home is currently managed by an acting manager who is intending to apply for registration with the commission. The acting manager has received training on the Mental Capacity Act and is awaiting training on the Deprivation of Liberty Safeguarding.

Surveys received and discussions with residents and staff showed that the home was well managed and maintained a friendly and open atmosphere. " Everything is excellent here". " The staff are friendly and polite". Whilst there has been considerable disruption to the life of the home whilst the extension and refurbishment was taking place a resident said that:"It was all managed very well, life went on as normal and

Evidence:

there was very little disturbance to the way they looked after us or the meals, the staff managed very well, and now we have a lovely new home, I miss the garden but that will get back to normal soon".

The Annual Quality Assurance (AQAA) was received when we asked for it and accurately reflected the current status of the home. This is a document required by regulation in which the provider tells us about what has happened in the home in the past year and the plans for the next year. It also provides us with some numerical information which is used in the inspection process.

The home gains the views of the residents and their representatives on a quarterly basis by sending out questionnaires relating to the services offered by the home. Responses are collated and used to inform the services offered. It also holds residents and relatives meetings at intervals throughout the year, although the last one was at the commencement of the building work, but intend to hold another one soon. This enables people to have their say about the running of the home and how it affects their lives.

Staff meetings are held at regular intervals throughout the year. Policies and procedures to inform the staff are reviewed on a regular basis and records showed that the servicing of utilities and equipment was up to date.

Whilst not acting as appointee for residents, the home does hold money for some residents for 'safe keeping'. Records kept of this were up to date and accurate.

Records showed that staff are receiving regular formal supervision at intervals directed by the National Minimum Standards and that the provider undertakes Regulation 26 visits (monthly visits by the provider(owner) which are required by regulation, and subsequent reports written reflecting the progress in the home).

The training matrix showed that all staff undertaken mandatory health and safety training at regular intervals and during their induction period.

Risk assessments were in place for the use of free standing fans and any other equipment in the home, but the manager has not yet completed risk assessments on all areas in the home. There was also some rubbish in the garden awaiting disposal and a risk assessment is required to ensure resident's safety. The manager gave assurances that these two issues would be addressed therefore no requirement was made.

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

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	3	That preadmission assessments include any detail regarding the residents capacity or limits that may be required on their personal liberty and how the home will meet these needs. This should be also included in the care planning which results from the preadmission assessment.
2	11	That the home includes residents preferences for end of life care including any advance directives and preferred place of death.

Helpline:

Telephone: 03000 616161

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) Care Quality Commission (CQC). 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 CQC copyright, with the title and date of publication of the document specified.