

Key inspection report

Care homes for older people

Name:	Rosedale Manor Care Centre
Address:	Sherborne Road Crewe Cheshire CW1 4LB

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:
Wendy Smith	2 8 0 5 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

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

Reader Information

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Information about the care home

Name of care home:	Rosedale Manor Care Centre
Address:	Sherborne Road Crewe Cheshire CW1 4LB
Telephone number:	01270259630
Fax number:	01270259640
Email address:	
Provider web address:	

Name of registered provider(s):	Four Seasons 2000 Limited (wholly owned subsidiary of Four Seasons Health Care Limited)
Name of registered manager (if applicable)	
Type of registration:	care home
Number of places registered:	80

Conditions of registration:		
Category(ies) :	Number of places (if applicable):	
	Under 65	Over 65
dementia	80	0
mental disorder, excluding learning disability or dementia	80	0
old age, not falling within any other category	0	80
physical disability	80	0
Additional conditions:		
The registered person may provide the following categories of service only: Care home with nursing - Code N 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 - Code OP Dementia - Code DE Physical disability - Code PD Mental disorder - Code MD The maximum number of service users who can be accommodated is: 80		
Date of last inspection		

Brief description of the care home

Rosedale Manor care centre is a two-storey purpose-built home set in its own grounds. The home is in a residential area approximately one mile from Crewe town centre. It is close to local shops and other facilities and is convenient for public transport.

The home is divided into three discrete living units. On the ground floor, Willows unit provides accommodation and nursing care for ten younger adults with a physical disability, and Woodlands unit provides accommodation and nursing care for 24 people with dementia. The first floor of the home, provides nursing and personal care for a maximum of 46 older people.

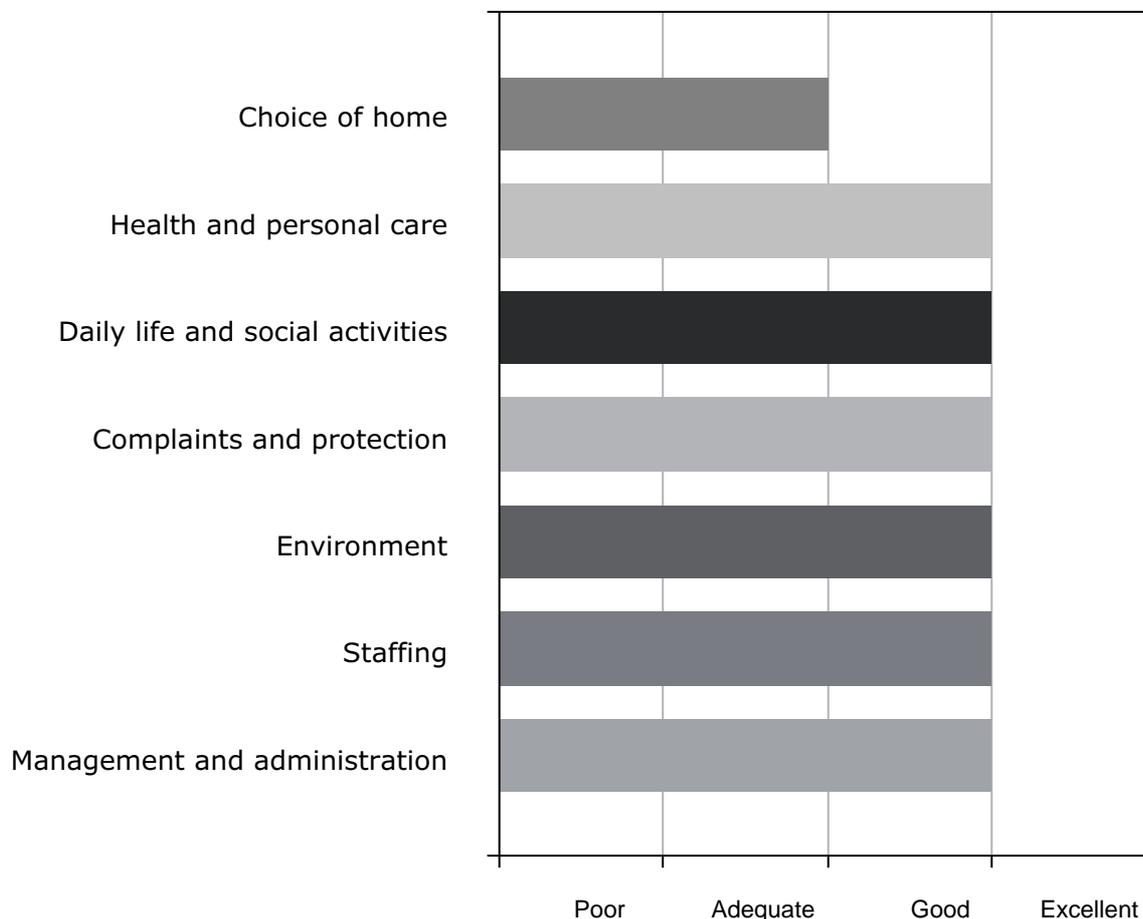
Summary

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:

The quality rating for this service is two stars. This means that the people who use this service experience good quality outcomes.

Two inspectors visited Rosedale Manor unannounced on 28 May 2009 as part of this inspection. During the visit we spoke with residents, staff and visitors. We walked round the building to see all the communal areas and were able to visit some of the bedrooms. We checked some of the records kept at the home and spent time talking with the acting manager.

We also looked at any information that we had received about Rosedale Manor since our last inspection there. Before the inspection the manager was asked to complete a questionnaire to give us up to date information about the service and survey forms were sent out for staff to give us their views.

We visited Rosedale Manor on 7 April 2009 in response to concerns about the running of the home and the care of some of the people living there that were brought to our attention by social services. The registered manager was suspended following these concerns and a very experienced peripatetic manager has been assigned to manage Rosedale Manor on a temporary basis.

Social work professionals from the local authority and nurses from the primary care trust had been carrying out reviews of the people living at the home to find out whether people's needs were being met to a satisfactory standard. The acting manager told us that she had been making a point of meeting as many visitors/relatives as possible. She had held meetings for the various groups of staff and the minutes of these meetings showed that important issues were discussed.

What the care home does well:

The overall standard of the care plans was good and in general the assessments of people's needs were very thorough; instructions for staff were clear and relevant; and regular evaluations identified whether the care given was successful in meeting people's needs. The care plans provided evidence that people's health needs are monitored and that support and advice is sought from health professionals as needed.

Residents' medicines were handled and stored appropriately, and administration records showed that people receive their prescribed medicines at the correct time.

The people we spoke with were happy with the care that they received and considered that the staff were kind and attentive. We saw evidence that staff have been receiving training about how to ensure that people's dignity is protected.

Two staff are employed to provide social and recreational activities for residents. Rosedale Manor shares a minibus with another home and makes good use of this to take residents out. The large lounge on the ground floor is used for entertainment and for religious services that are organised on a regular basis. There is also a small trolley shop in the home. This means that there are plenty of opportunities for the people who live at Rosedale Manor to take part in activities and social occasions.

The home is participating in an initiative to improve the quality of life of people with dementia and in the dementia care unit we saw staff sitting in the lounge with the residents and providing social stimulation for them.

Visitors are made welcome at all times of day and the acting manager told us that she has made great effort to speak to as many visitors as possible and get their views about the home.

There is a choice of dishes available at all mealtimes and a selection of snacks is provided for supper at 9pm to make sure that people who are unable to eat a large meal can have enough to eat.

Complaints received had been recorded since the beginning of March 2009. They were recorded in detail and the action taken to address the complaint was also recorded. There were copies of letters that had been sent to relatives who had made a complaint. No new complaints had been received since our visit in April.

The interior of the home is generally well-maintained and we found it to be clean and tidy so that people living at Rosedale Manor live in comfortable, clean and safe surroundings.

Enough staff are employed to ensure that people's needs can be met. We looked at the recruitment records for new staff and found that they had all completed application forms in full and the manager had carried out all of the required checks to find out whether they were safe and suitable to work with vulnerable people.

We received 12 comments cards from staff and it was encouraging that so many staff wanted to express their views. All confirmed that they were receiving training to help

them do their job well. All except one replied that they receive regular supervision from the manager. A number of positive comments were received from staff including: 'I think Rosedale Manor has changed for the better in the last few months and I have enjoyed working here', 'I love my job and have great satisfaction when things are done right', 'Most of all Rosedale Manor makes sure that the residents are all safe and cared for', 'I love working here it is very satisfying', 'Good team work most of the time. Good care to the elderly. Good senior care and communication'.

In March 2009 a very experienced peripatetic manager was assigned to manage Rosedale Manor on a temporary basis and to investigate complaints that had been made. The regional manager has also been visiting once or twice every week. Meetings have been held for residents and their relatives and for staff and this has given people opportunities to express their views about the home.

In the annual self-assessment, the acting manager provided information about the testing and servicing of equipment and this showed that all had been completed up to date. We looked at the fire records and these showed that a weekly test of the fire alarm system is carried out. Fire safety training is up to date for all staff and there is a full fire risk assessment for the building. This helps to make sure that the building is safe for people to live and work in.

What has improved since the last inspection?

A lot of work has been put into improving the standard of care planning so that good information about people's needs is available.

The acting manager has been taking action to address issues with laundry, food and drinks service, cleaning, answering of call bells and care plans. She is continuing to review the way that the three units of the home are managed and the way that daily routines in the home are organised, to ensure that the home is run in the best interests of the people who live there.

The large dining room on the first floor has been much improved with matching table cloths, flowers and other domestic touches to make it softer and more pleasant. A water boiler and juice dispensers have made it much easier for staff to make drinks for people throughout the day and night.

A significant amount of staff training has been taking place over recent weeks and more was booked. Letters have been sent to members of staff giving them dates for training that they are required to attend. The subjects covered include safe moving and handling, end of life care, nutrition, falls prevention, safeguarding, diabetes, pressure care, health and safety, medicines and fire safety. More staff are working towards a national vocational qualification in care, which will show that they are competent in providing good quality care for the people living at Rosedale Manor.

What they could do better:

Not all of the care plans met the same high standard and the acting manager was aware that further training was needed for some staff.

We noticed that in the dementia care unit, and on the first floor, female residents who were wearing skirts did not have tights or stockings on and this detracts from their dignity. We are aware that there are some people who do not wish to wear tights or

stockings but this should not be considered to be the general rule.

We did not see staff spending social time with residents except on the dementia care unit. We considered that there is scope for further training to give staff a more positive view of what people are able to do or enjoy and how they can play a role in supporting them.

The gardens were tidier than they had been on previous visits but there is still a need to create safe outdoor areas for residents to enjoy. This has been an issue we have identified for several years and has not been addressed.

The ground floor unit for people with a physical disability has never had a bath that is suitable for the people accommodated in that part of the home and this has been mentioned in several inspection reports. A shower is available, but most of the people living in this part of the home do not have a choice between a shower or a bath.

Some of the comments we received from staff showed that there are still issues to be addressed, for example: 'Sack some of the staff who cannot get on with others', 'Some staff could try and communicate better' and 'Some staff could try to get on better and have a better understanding of people'.

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

There have been no recent new admissions to Rosedale Manor.

Evidence:

When we visited Rosedale Manor there were 53 people living at the home and three other people who usually live there were being treated in hospital. There have been no new residents in recent weeks. This is due to an agreement between Four Seasons, the company that owns the home, and the local authority not to make any new admissions until concerns about the management of the service and the care of some of the people who lived there have been addressed.

The acting manager told us that there are good procedures in place for making sure that people's care needs are assessed in full before they go to live at Rosedale Manor, but these procedures have not been used recently. An intermediate care service is no longer provided.

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 health and personal care needs of the people living at the home are met, and in general the standard of recording had improved so that relevant and up to date information was available.

Evidence:

We looked at a sample of care plans of people living in each of the residential units. A lot of work has been put into improving the standard of care planning following recent concerns expressed by the local authority. We could see that the overall standard of documentation had improved and in general the assessments of people's needs were very thorough. Instructions for staff were clear and relevant and regular evaluations identified whether the care given was successful in meeting people's needs. There were some care plans that did not meet these high standards and the acting manager was aware that further training was needed for some staff to enable them to improve their skills in developing care plans.

The care plans provided evidence that people's health needs are monitored and that support and advice is sought from health professionals as needed. Visits from GPs,

Evidence:

dietician and continence advisor were recorded and an optician was visiting the day we were at the home. Social work professionals from the local authority and nurses from the primary care trust have been carrying out reviews of the people living at the home to find out whether people's needs are being met to a satisfactory standard. They have been giving feedback about their findings to the acting manager.

We found that residents' medicines were handled and stored appropriately, and administration records showed that people receive their prescribed medicines at the correct time. This helped to make sure their medicines were being given as prescribed by their doctors.

The people we spoke with were happy with the care that they received and considered that the staff were kind and attentive. We saw evidence that staff have been receiving training about how to ensure that people's dignity is protected. However we noticed that on the dementia care unit, and on the first floor, female residents who were wearing skirts did not have tights or stockings on. Although this may have been a choice for some, we considered this should have been recorded in their care plans and otherwise, they should be helped to maintain a dignified appearance.

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.

People living at Rosedale Manor are able to choose how they spend their time. A variety of meals is provided for them and there is a range of activities available for them to take part in so they can stay active and take part in social occasions.

Evidence:

Two staff are employed to provide social and recreational activities for residents and we spoke with one of them during our visit. Rosedale Manor shares a minibus with another home and makes good use of this to take residents out. The large lounge on the ground floor is used for entertainment and for religious services that are organised on a regular basis. There is also a small trolley shop in the home. This range of activities helps to make sure that people living in Rosedale Manor have the chance to take part in activities and social occasions.

The home is participating in an initiative to improve the quality of life of people with dementia and in the dementia care unit we saw staff sitting in the lounge with the residents and providing social stimulation for them. We did not see staff spending social time with residents on the other two units and considered that there is scope for further training to give staff a more positive view of what people are able to do or enjoy.

Evidence:

Visitors are made welcome at all times of day and the acting manager told us that she has made great effort to speak to as many visitors as possible and get their views about the home.

The large dining room on the first floor has been much improved with matching table cloths, flowers and other domestic touches to make it softer and more pleasant. A water boiler and juice dispensers have made it much easier for staff to make drinks for people throughout the day and night. There is a choice of dishes available at all mealtimes and a selection of snacks is provided for supper at 9pm to make sure that people who are unable to eat a large meal can have enough to eat.

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.

People living at Rosedale Manor are protected by ensuring that complaints are addressed in full, and that staff are aware of how to safeguard people from abuse.

Evidence:

The acting manager told us that 20 complaints had been received in the last year. When we visited in April 2009 we saw that the acting manager was taking action to address issues with laundry, food and drinks service, cleaning, answering of call bells and care plans. She is continuing to review the way that the three units of the home are managed and the way that daily routines in the home are organised, to ensure that the best interests of the people living at the home are paramount.

We looked at complaints records and eleven complaints had been recorded since the beginning of March 2009. They were recorded in detail and the action taken to address the complaint was also recorded. There were copies of letters that had been sent to relatives who had made a complaint. No new complaints had been received since our visit in April.

Four Seasons Healthcare has written policies and procedures about protecting residents from abuse. Training about this was being provided at Rosedale Manor for 76 staff, in two groups, the week after our visit. A number of staff have recently attended the local authority's, training about safeguarding. This is to help make sure that staff know what they must do to protect the people living at Rosedale Manor from

Evidence:

poor practice and abuse.

Environment

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

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

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

This is what people staying in this care home experience:

Judgement:

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

Rosedale Manor is well maintained so that it provides a clean, comfortable and safe environment for the people who live there.

Evidence:

Rosedale Manor is a large two storey building set in extensive grounds. Building work is taking place in the grounds and the acting manager told us that the builders were very considerate to the people living at the home and make sure that the work causes minimal disruption to them. The gardens were tidier than they had been on previous visits but there is still a need to create safe outdoor areas for residents to enjoy. This is an issue that we have identified for several years and has still not been addressed.

The interior of the home is generally well-maintained and we found it to be clean and tidy. Ten bedrooms on the first floor that were used for intermediate care are now vacant and are going to be refurbished. The ground floor unit for people with a physical disability has never had a bath that is suitable for the people accommodated in that part of the home although a shower is available. This means that people living in that unit may not be able to bathe according to their personal preferences.

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.

There are enough staff to meet the needs of the people living at the home and a significant amount of training is taking place to ensure that they know how to work safely.

Evidence:

At the time we visited Rosedale Manor the number of people living at the home was significantly reduced and there were enough staff employed to ensure that people's needs could be met. The acting manager has put a lot of work into sorting out staff contracts to ensure equality, and this has now been completed except for the registered nurses.

We looked at the recruitment records of new staff and found that they had all completed application forms in full and the manager had carried out all of the required checks to find out whether they were safe and suitable to work with vulnerable people.

We received 12 comments cards from staff and it was encouraging that so many staff wanted to express their views. All confirmed that they were receiving training to help them do their job well. All except one replied that they receive regular supervision from the manager. Some of the replies showed that there are still issues to be addressed, for example 'Sack some of the staff who cannot get on with others' and 'Some staff could try and communicate better', but there were also a number of

Evidence:

positive comments including: 'I think Rosedale Manor has changed for the better in the last few months and I have enjoyed working here' and 'I love my job and have great satisfaction when things are done right'.

Information provided by the acting manager showed that a lot of training had been taking place over recent weeks and more was booked. Letters have been sent to members of staff giving them dates for training that they are required to attend, which is within their contracted working hours. Night staff are included in all training. The subjects covered include safe moving and handling, end of life care, nutrition, falls prevention, safeguarding, diabetes, pressure care, health and safety, medicines and fire safety.

At the time of our visit, less than 50% of the care staff had achieved a national vocational qualification in care but five people were working towards a qualification.

Management and administration

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

People have confidence in the care home because it is led and managed appropriately. People control their own money and choose how they spend it. If they or someone close to them cannot manage their money, it is managed by the care home in their best interests. The environment is safe for people and staff because appropriate health and safety practices are carried out.

People get the right support from the care home because the manager runs it appropriately with an open approach that makes them feel valued and respected. The people staying at the home are safeguarded because it follows clear financial and accounting procedures, keeps records appropriately and ensures their staff understand the way things should be done. They get the right care because the staff are supervised and supported by their managers.

This is what people staying in this care home experience:

Judgement:

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

The home is well managed so the health, safety and well-being of the people who live at Rosedale Manor are protected.

Evidence:

The registered manager was suspended from work in February 2009 following concerns about the running of the home and about the care of some people who had been living at Rosedale Manor. In March 2009 a very experienced peripatetic manager was assigned to manage Rosedale Manor on a temporary basis and to investigate complaints that had been made. She told us that she expected to be working there for several months. The regional manager of the company that runs Rosedale Manor has also been visiting once or twice every week.

A residents' meeting had been held on 6 May 2009. The format for the meeting was a coffee morning with informal chat. A relatives' meeting was held on the same day and was well-attended. Issues raised at the residents' meeting were shared with relatives. At the end of the meeting the people attending gave a round of applause to

Evidence:

management for the improvements made. There have also been a series of staff meetings and the acting manager is assessing the performance and competence of all senior staff as a result of the concerns that were raised earlier in the year.

In the annual self-assessment, the acting manager provided information about the testing and servicing of equipment and this showed that all had been completed up to date. We looked at the fire records and these showed that a weekly test of the fire alarm system is carried out. A fire drill had been held the morning that we visited. This was the first drill for six months and the acting manager assured us that drills will now be held regularly and include night staff. This helps to make sure that staff know what to do to protect people if fire breaks out. Fire safety training is up to date for all staff and there is a full fire risk assessment for the building. A room risk assessment was being added into each care plan.

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	7	All of the care plans need to be brought up to the high standard that has been achieved by some of the nurses so that accurate and up to date information is available about the needs of all of the people who live at the home.
2	10	Action should be taken to make sure that female residents have tights or stockings (unless it is recorded that an individual does not wish to wear them). This helps to protect their dignity and self-esteem.
3	12	Care staff should be encouraged to spend social time with residents to help meet their social, emotional and recreational needs.
4	19	Action should be taken to provide safe and secure outdoor areas for residents to enjoy.
5	21	Action should be taken to provide a bath that is suitable for the people living at the home who have a physical disability so that they can have a choice of a shower or a bath.
6	28	Steps should be taken to encourage care staff to achieve a national vocational qualification in care so that there is a well qualified team who have been assessed as competent in providing good quality care for the people who live at

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
		Rosedale Manor.

Helpline:

Telephone: 03000 616161

Email: enquiries@cqc.org.uk

Web: www.cqc.org.uk

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