Key inspection report

Care homes for adults (18-65 years)

<table>
<thead>
<tr>
<th>Name:</th>
<th>1B Peak Lane</th>
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<tbody>
<tr>
<td>Address:</td>
<td>1B Peak Lane&lt;br&gt;</td>
</tr>
<tr>
<td></td>
<td>Fareham&lt;br&gt;Hants&lt;br&gt;PO14 1RP</td>
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</table>

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.

<table>
<thead>
<tr>
<th>Lead inspector:</th>
<th>Date:</th>
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<tbody>
<tr>
<td>Peter McNeillie</td>
<td>1 5 1 2 2 0 0 9</td>
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</table>
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.

<table>
<thead>
<tr>
<th>Outcome area (for example Choice of home)</th>
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</thead>
<tbody>
<tr>
<td>These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:</td>
</tr>
<tr>
<td>This box tells you the outcomes that we will always inspect against when we do a key inspection.</td>
</tr>
<tr>
<td>This box tells you any additional outcomes that we may inspect against when we do a key inspection.</td>
</tr>
<tr>
<td>This is what people staying in this care home experience:</td>
</tr>
<tr>
<td>Judgement:</td>
</tr>
<tr>
<td>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.</td>
</tr>
<tr>
<td>Evidence:</td>
</tr>
<tr>
<td>This box describes the information we used to come to our judgement.</td>
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</tbody>
</table>
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 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 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**

<table>
<thead>
<tr>
<th>Document Purpose</th>
<th>Inspection report</th>
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<tbody>
<tr>
<td>Author</td>
<td>Care Quality Commission</td>
</tr>
<tr>
<td>Audience</td>
<td>General public</td>
</tr>
<tr>
<td>Further copies from</td>
<td>0870 240 7535 (telephone order line)</td>
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<tr>
<td>Internet address</td>
<td><a href="http://www.cqc.org.uk">www.cqc.org.uk</a></td>
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## Information about the care home

<table>
<thead>
<tr>
<th>Name of care home:</th>
<th>1B Peak Lane</th>
</tr>
</thead>
</table>
| Address:           | 1B Peak Lane  
                     Fareham  
                     Hants  
                     PO14 1RP |
| Telephone number:  | 01329233149  |
| Fax number:        | 01329233149  |
| Email address:     |              |
| Provider web address: |            |

| Name of registered provider(s): | The Hampshire Partnership NHS Foundation Trust |
| Name of registered manager (if applicable) | Miss Pamela Littlechild |
| Type of registration: | care home |
| Number of places registered: | 4 |

### Conditions of registration:

<table>
<thead>
<tr>
<th>Category(ies) :</th>
<th>Number of places (if applicable):</th>
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</table>
| learning disability | Under 65: 4  
                              Over 65: 0 |

**Additional conditions:**

- The maximum number of service users to be accommodated is 4
- The registered person may provide the following category 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 category: Learning disability (LD)

### Date of last inspection

### Brief description of the care home

1B Peak Lane Fareham is a care home owned and managed by Hampshire Partnership NHS Foundation Trust who had run this service under the NHS criteria for a number of years prior to its registration by The Care Quality Commission in April 2009. The trust are also responsible for twelve similar services and four domiciliary care agencies in the area.

The home which is situated in a residential area in the South Hampshire town of
<table>
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<tr>
<th>Brief description of the care home</th>
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<tr>
<td>Fareham is on a public transport route, close to shops and communal facilities is registered to provide support, personal care and accommodation for up to four adults with a learning disability all of whom are accommodated in their own single rooms.</td>
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</table>
**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:**

- **Choice of home**
- **Individual needs and choices**
- **Lifestyle**
- **Personal and healthcare support**
- **Concerns, complaints and protection**
- **Environment**
- **Staffing**
- **Conduct and management of the home**

**How we did our inspection:**
This report was written after taking into consideration a number of sources of information and evidence.

These included, information provided for registration, a site visit to the service and responses by the registered manager to a CQC Annual Quality Assurance Assessment (AQAA) prior to the inspection.

Evidence was also gathered from examining residents and staff records, personal observations, talks with residents, staff and management and responses to a CQC pre inspection satisfaction survey.

This key unannounced visit took place on 15/12/2009 between the hours of 09.15 am and 12.45pm during which all of the key standards for care homes for younger adults were assessed.
The results and findings contained in this report will determine the frequency and type of future inspections.
What the care home does well:

The home provides accommodation in a well-maintained pleasant and welcoming environment. Care and support is provided by a stable well-managed supported, motivated, well-trained and qualified staff team who work in a manner that recognises resident's need for personal privacy dignity and independence.

Areas of particular note were the care planning, activities which we considered to be excellent.

What has improved since the last inspection?

Not applicable as this was the first inspection.

What they could do better:

As we found no areas of concern and residents appeared satisfied with the service provided no requirements or recomendations were made.

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 - 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:

<table>
<thead>
<tr>
<th>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.</th>
</tr>
</thead>
<tbody>
<tr>
<td>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.</td>
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</table>

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 a well-developed system of assessing and identifying residents needs which ensures assessed needs can be met in safety.

Evidence:

Currently no referals are being accepted as the service could change under a "Reprovision of service"

We were told that previously no resident was admitted without a full assessment of needs and risks being carried out.

Prospective residents would also visit the home on a number of occasions including overnight and weekend stays and be subject to a three month trial period of residence prior to a permanent place being offered.

During these visits a very detailed assessment of resident’s needs and risks would be carried out overseen by the manager or a member of senior staff.
Evidence:

To ensure compliance with the standards and their own policy and procedure we viewed all of the resident's files.

All included an initial very detailed assessment in a written and pictorial format that covered all aspects of day to day living, support required, the environment as well as areas of risk. External health and social care professionals also contributed to the assessments process including where appropriate a pre placement review.

All assessments of need and risk were reviewed on a regular basis to ensure they continued to reflect the resident's current needs.

All of the assessments viewed had been produced to a very high standard, were easy to understand and gave the reader all the information required.
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:

<table>
<thead>
<tr>
<th>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.</th>
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<tr>
<td>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.</td>
</tr>
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</table>

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 is a clear, comprehensive and consistent care planning system in place which ensures residents needs are met within a risk management policy that involves residents in decisions that affect them.

Evidence:

In their AQAA the home told us: "All the Service users support plans and risk assessments are person centred to ensure individuality and choice. They promote positive risk taking. Each Service user has up to date and person centred profile and communication passport. We are using Annual reviews which hi-lights any changes needed for each service user in their everyday lives and include equality and diversity. We complete and review at each service user review a Health action plan."

Staff told us they saw themselves more as supporters and enablers not careers and were there to assist residents in achieving their personal goals, aspirations and independence within a risk taking framework.
Evidence:

To confirm the AQAA statement we viewed all residents care plans.

All of the well presented, detailed and comprehensive plans viewed contained precise instructions and guidance on how assessed needs were to be met, how any risks were to be managed and confirmation that residents or their representatives were consulted when the plan was formulated.

The details in the plans viewed would enable any career who did not know the resident to deliver a high quality of personal care and support in line with the individuals wishes.

The manager told us the home takes issues of equality and diversity very seriously.

In their AQAA they told us, we do the following to ensure that race, gender identity, disability, sexual orientation, age, religion and belief are promoted and incorporated into what we do:

"Part of the ethos of Hampshire Partnership foundation trust is Equality and Diversity, because of this we work within the many policies and procedures that help us to support both Service users and Staff in ensuring that at all times we practise Equality and Diversity. This approach is supported by Key Policies such as Equal opportunities, Disability Employment, Harassment and Bullying, Mental Health at work and Race Equality".
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.

The social activities, family, contacts, the provision of varied and nutritious meals were well managed and reflected residents interests and choices.

Evidence:

The management and staff take the view that any decision taken that affects individuals, must take into consideration the individual's choices, wishes, aspirations and independence.

This was confirmed by residents in the CQC pre inspection survey when they told us they liked living in the home, were treated with respect, and could do what they chose and liked the manner in which the home is run and day to day life conducted which is in line with the staffs perception of themselves as enablers first and carers second.

As part of their responsibility to the house community all residents are encouraged to
Evidence:

assist in keeping the home clean and tidy and to prepare their own meals if at all possible with assistance if required.

Residents are responsible for choosing daily menus using numerous communication methods including signs and pictures. The homes management in recognising the individuality of residents has enabled each resident to prepare a personal daily menu which reflects their preferences and choices for which they carry their own shopping.

An individual shopping is stored in personal storage, including individual containers in the fridge. In producing menus staff offers guidance to assist the building of balanced meals.

Residents are responsible for choosing and arranging (where possible) their own social activities with help, support and encouragement from staff. Staff and residents in their responses to our pre inspection satisfaction survey confirmed they could choose in which activities to participate. The range of activities currently being undertaken include: cinema, theatre, music, shopping, hydro, visits to the beach, television, arts and crafts, cooking, keep fit dining out, trips out, pubs and day services.

Visitors and family can also be entertained in the house by individual residents at any time. Where transportation is a problem, the resident would be taken to meet with members of their family to ensure a contact is maintained.
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.

Satisfactory arrangements are in place, ensuring the personal, emotional, health care and medication needs of residents are met.

Evidence:

Details of the personal care, support and health care needs of residents were clearly recorded in individual care plans with which staff demonstrated a clear understanding and familiarity with.

In their AQAA the home told us: "All the Service Users require support from staff for all there personal need either by verbal prompting or total support, or both. For one service user this can vary according to other health issues, all Service users have support plans that are person centred and reflect their individual needs. One Service user has decided what help they would like and has helped formulate their own support plan."

Guidelines seen, comments made in the AQAA and by staff indicated that residents were exercising choice in all aspects of their lives including bedtimes, clothes, food,
Evidence:

gender of carer, key worker, GP, dentist optician and how and on what to spend their money.

Records indicated that any special medical, health or social care needs would be provided following consultation with the appropriate professional. These might include the local doctors, district nurses, physiotherapists, occupational therapists, speech language therapists, care managers and any other specialist required including the community learning disability team. Other specialists would be consulted if the need arose.

Records were kept of appointments with all health and social care professionals and included details of any advice and treatment given.

Medication records confirmed that all prescribed medication which was dispensed by a pharmacist in blister packs was securely stored in individual cabinets and administered in accordance with a medication policy and procedure by trained staff. The record of medication administered to residents and unwanted drugs disposed of was viewed and found to be complete and accurate.

A procedure that ensures residents can assume responsibility for their own medication was in place. Records viewed confirmed, following a risk assessment no resident was responsible for the administration of their own medication.
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:

<table>
<thead>
<tr>
<th>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.</th>
</tr>
</thead>
<tbody>
<tr>
<td>There are no additional outcomes.</td>
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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 clear policies and procedures in place which ensures residents are able to complain and are protected from abuse.

Evidence:

A record of complaints and a complaints procedure, which included information on how to contact The Care Quality Commission, was seen. The information in the complaints procedure is also included in the service users guide.

No complaints have been received by CQC since registration.

All members of staff spoken with of stated they felt confident in discussing any concerns or complaints with management either in house or external on behalf of any resident and were confident any issues raised would be dealt with promptly and fairly.

The homes corporate adult protection policy which works in tandem with the procedure produced by Hampshire County Council, is based on National Guidelines and the document No Secrets and is designed to safeguard residents from abuse.

Management and staff who were spoken with confirmed they had all received training in recognising various types of abuse, this was confirmed by records viewed. All were able to demonstrate they knew the procedure to follow should they witness or
Evidence:
suspect the abuse of any resident.
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.

A safe, well maintained, clean and suitably furnished home is provided for residents which meets their needs.

Evidence:

The home is situated in a residential area in the South Hampshire town of Fareham on a public transport route, close to shops and communal facilities. From the outside there is nothing to distinguish the home from its neighbours, there are no discriminatory signs and nothing to indicate it is a care home.

All areas of the home were clean and free from unpleasant odours and obvious hazards. Residents who assist in the day to day cleaning told us in their responses to our pre inspection satisfaction survey, the home is always clean and smells fresh.

Furniture was comfortable, homely and in a good state of repair and met residents individual and collective needs. A number of aids including, special beds, hoists, grab/hand rails and non slip flooring had also been provided to assist residents in moving around the property.

All communal areas were accessible by residents including the well-tended established and safe sensory garden at the rear of the property. A small amount of on site parking
Evidence:
is available.

To protect residents and staff, an infection control policy and procedure was in place as were disposal aprons, gloves, antiseptic hand soap and a washing machine fitted with a high temperature and sluice programme.
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:

<table>
<thead>
<tr>
<th>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.</th>
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<tbody>
<tr>
<td>People are supported by an effective staff team who understand and do what is expected of them.</td>
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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.

Resident’s needs are met by sufficient numbers of well trained and supported staff who are recruited and selected using a procedure designed to protect all residents.

Evidence:

At the time of the inspection staff numbers (three care staff plus the manager) and the deployment of staff was sufficient to meet the residents needs.

The manager informed us the planned staffing level for the home is minimum of two staff available at all times during the day and evening and one waking staff at night plus telephone back up for emergencies.

We were also informed staffing levels are raised if residents needs increased or a particular days programme required additional staff.

In their AQAA we were informed that the home has a robust recruitment and appointment policy and procedure in place designed to protect residents. The AQAA also informed that no new staff had commenced employment since registration.

To check the effectiveness of the procedures and compliance with the standards we viewed three staff recruitment and training files selected at random.
Evidence:

All files viewed confirmed included that staff are employed in accordance with the corporate policy and procedure and meets the current standards. This involves the completion of an application form, the signing of a rehabilitation of offenders declaration, an interview, and satisfactory Criminal Record Bureau (CRB) disclosure, Protection of Vulnerable Adults (POVA) and reference checks.

Following their appointment all staff are subject to an in house induction and a training programme that includes first aid, handling medication, food handling, moving and handling, safeguarding and infection control.

All staff are expected to undertake a National Vocational Qualification (N.V.Q.) course. Information provided in the AQAA indicated that 76.9% of has been trained to at least NVQ level 2, of these 61.5% had completed NVQ level 3.
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 management of the home ensures the health, safety and welfare of residents and staff are promoted and the home is run in the best interests of the residents whose views about living in the home are formally sought.

Evidence:

From the evidence seen we were satisfied that the service had been well managed since registration by the Registered Manager who had taken up another appointment within the same organisation eight days prior to our inspection.

A new manager is in post and is in the process of applying for registration.

Comments made by residents in their responses to our pre inspection survey, indicated they can speak to the manager and care staff at any time and they were always willing to listen and give them time. This view that was also echoed by the staff who described the manager as available and approachable.

Staff also that confirmed that there is a clearly defined management structures both
Evidence:

internally and externally and that managers operate an open door policy which encourages them to share any concerns or ideas they have for the betterment of the service.

It was also evident from our observations, the highly motivated and enthusiastic staff team worked within clear guidelines which promoted independance based on individuals ability not disability.

As part of the homes quality monitoring system, resident's resident's representatives and health and social care professionals staff and social care professionals are invited to participate in satisfaction surveys. The views expressed in the surveys are seen as key in highlighting areas that may require improvement or attention and the future development of this service.
Are there any outstanding requirements from the last inspection?

<table>
<thead>
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<th>Yes</th>
<th>No</th>
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### 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.

<table>
<thead>
<tr>
<th>No.</th>
<th>Standard</th>
<th>Regulation</th>
<th>Requirement</th>
<th>Timescale for action</th>
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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.

<table>
<thead>
<tr>
<th>No.</th>
<th>Standard</th>
<th>Regulation</th>
<th>Requirement</th>
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**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.

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<tr>
<th>No.</th>
<th>Standard</th>
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**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.

<table>
<thead>
<tr>
<th>No</th>
<th>Refer to Standard</th>
<th>Good Practice Recommendations</th>
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Helpline:

**Telephone:** 03000 616161  
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