

Key inspection report

Care homes for adults (18-65 years)

| | |
|-----------------|--|
| Name: | Holland House |
| Address: | Coulsdon Road Caterham Surrey CR3 5YA |

| | |
|--|-----------------------|
| The quality rating for this care home is: | two star good service |
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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: |
| Kenneth Dunn | 1 2 1 0 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 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

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|---------------------|--|
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Information about the care home

| | |
|-----------------------|--|
| Name of care home: | Holland House |
| Address: | Coulsdon Road Caterham Surrey CR3 5YA |
| Telephone number: | 01883383715 |
| Fax number: | |
| Email address: | Dennies.ward@sabp.nhs.uk |
| Provider web address: | |

| | |
|---------------------------------|---|
| Name of registered provider(s): | Surrey and Borders Partnership NHS Trust |
| Type of registration: | care home |
| Number of places registered: | 10 |

| | | |
|---|-----------------------------------|---------|
| Conditions of registration: | | |
| Category(ies) : | Number of places (if applicable): | |
| | Under 65 | Over 65 |
| learning disability | 10 | 0 |
| Additional conditions: | | |
| The maximum number of service users to be accommodated is 10. | | |
| 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: Learning disability (LD). | | |

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

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| Brief description of the care home |
| Holland House is owned by Surrey and Borders Partnership NHS Trust and is located in The Trust's grounds in Caterham. It is one of a number of purpose built bungalows and is designed to accommodate up to ten service users with a learning difficulty. The home is just over two kilometres from Caterham station. The area is served by buses travelling to Redhill and Croydon. There is no pressure on parking in the vicinity of the home. There are a number of shops within relatively short walking distance and a larger shopping centre in Caterham. |
| Accommodation includes ten single bedrooms without en-suite facilities. There is also a |

Brief description of the care home

large lounge, smaller lounge, dining room, and ample toilet and bathroom facilities. The bungalow is set in its own grounds with its own garden and patio. There is easy access to the local community facilities. The home has its own transport.

The fees charged at the time of this inspection were from 904 to 1038 pounds per week.

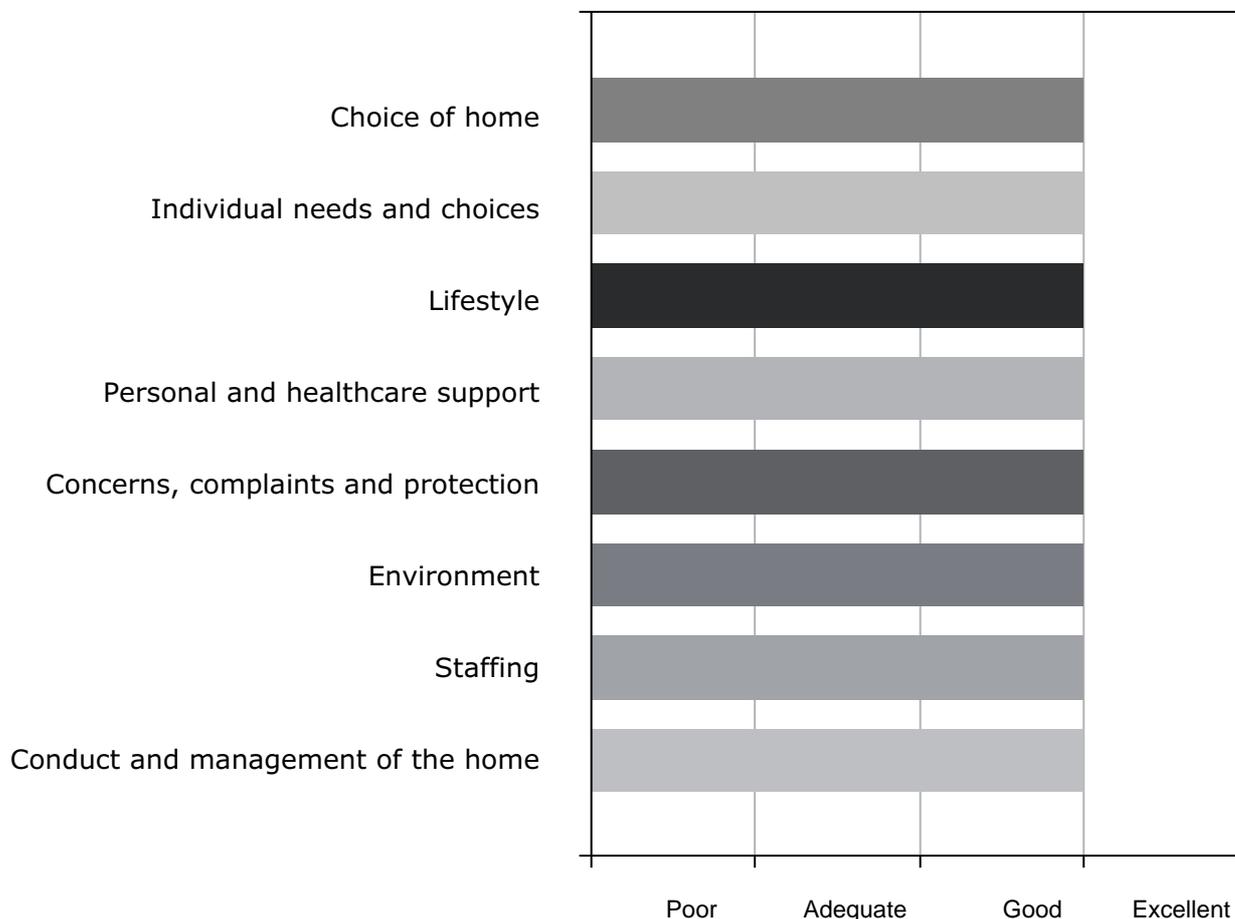
Summary

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 site visit was part of a key inspection. The visit was unannounced.

The last key inspection was carried out 16th November 2007.

Information was provided to us by the service prior to this visit in the Annual Quality Assurance Assessment (AQAA). This is a self-assessment that focuses on how well outcomes are being met for people using the service. We received the AQAA by the expected date, which was clear and gave us all the information we asked for. Reference is made to this assessment throughout this report.

During this visit we met with three people that live in the service and discussion took place with two members of staff.

During this visit we sampled staff recruitment, and training records, care plans, risk

assessments, menus, complaint, accident/ incident records, quality assurance systems, medication administration policies, health and safety records and policies and procedures We also reviewed other information that we have received since our previous including notifications.

What the care home does well:

People who live in the home have comprehensive, accessible person centred and health action plans, that outline how their needs and goals are to be met, which are agreed in consultation with the individual.

People are supported to make decisions and choices and to maintain their Independence. The service encourages and supports the people who live there to lead as independent a lifestyle as possible with care and consideration to their individual needs.

People are supported to engage in a range of meaningful vocational, educational, recreational and community activities, which meets with their preferences. A person told us that they work within the trust helping keeping the offices clean.

People spoke positively about the care and support that they receive including, "I am very happy" and "I like everything here". A health and social care professional who contacted the commission said, "that the manager and staff strive to create a warm and welcoming and individual placement".

The service provides a comfortable and homely environment, which is welcoming. People are involved in the running of the home.

People benefit from staff that know their needs well and who are well trained. During this visit people were observed to have good relationships with staff

What has improved since the last inspection?

No requirements were made during the previous inspection of the service (16th/11/2007).

However three of the four good practises recommendations made during the inspection visit on the (16th/11/2009) have been met. The external medical preparations are now labelled by staff when they are opened.

Signatures are in place for homely remedies.

All health and safety records are now available for the purpose of inspection.

What they could do better:

The manager should ensure that all residents and staff records are audited regularly. The audit should ensure that where staff compile residents files they conform to one pre agreed system. In the event that a resident wishes to participate in the process of compiling their on files in a form that they wish to use these should be clearly identified. Staff files should again conform to one system and appropriate archiving should be undertaken.

The registered provider should review to floor covering in bedrooms occupied by residents with incontinence issues.

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

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Outstanding statutory requirements

Requirements and recommendations from this inspection

Choice of home

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

People are confident that the care home can support them. This is because there is an accurate assessment of their needs that they, or people close to them, have been involved in. This tells the home all about them, what they hope for and want to achieve, and the support they need.

People can decide whether the care home can meet their support and accommodation needs. This is because they, and people close to them, can visit the home and get full, clear, accurate and up to date information. If they decide to stay in the home they know about their rights and responsibilities because there is an easy to understand contract or statement of terms and conditions between the person and the care home that includes how much they will pay and what the home provides for the money.

This is what people staying in this care home experience:

Judgement:

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

The residents are provided with a wide range of information, which meets their needs. The assessment process is robust and well developed.

Evidence:

A review of the statement of purpose and service users guide was undertaken as part of this site visit. The review demonstrated that there is a range of detailed information available to the residents to allow them or their representatives to make an informed decision on whether the service is able to meet their specific needs. There is evidence that the statement of purpose has been reviewed and updated in line with new regulations and changes to regulatory authorities.

The home has admitted two new service users since the last inspection visit (16/11/2007). A sample of four files of the residents was conducted including the two most recent individuals to move into Holland House. In all four files there had been detailed needs assessment completed for the individuals concerned by an appropriately trained representative of the service.

The assessments were detailed and contained relevant information to enable the

Evidence:

service to design a care plan for each individual and to provide accurate information to ensure that the service could meet the residents needs.

Individual needs and choices

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

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

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

This is what people staying in this care home experience:

Judgement:

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

The residents are provided with individual care plans, which record their individual needs and goals.

There is evidence that residents are supported appropriately by staff to make decisions about their lives.

Evidence:

The home has developed a series of detailed personal care plans (PCP's) and health action plans. A review of four PCP's provided evidence that they are reviewed on a regular bases. The sample provided further evidence that the reviews are undertaken within specified time frames and are updated accordingly. A member of staff stated that the residents are supported to participate in the process of reviewing their own care plans. The residents are encouraged to sign their care plans to demonstrate that they are involved in the development and review process of their documents. The review of the PCP's provided evidence to support this. A good practise recommendation was made in the previous inspection visit that "the manager should consider whether the PCP section of the service user files should be more clearly

Evidence:

separated from the persons main file with the aim of developing a more "user friendly" working document". However it was apparent that the files are still congested and operate in several different storage methods depending upon individual key workers. This was discussed during the site visit with the manager who made assurances that a audit of the files would be undertaken to ensure that one uniformed system would be introduced and archiving of additional information would be arranged.

Health action planning had taken place for all of the residents and was clearly reflected in the care documentation.

Individual needs and personal goals of residents' were clearly recorded and these have been carefully developed using the residents previous likes and dislikes. The service also consults with families and other stake holders/professionals to ensure that the individuals living at Holland House receive appropriate care and support from the staff. The random sample of the residents files provided evidence that they are fully supported by the staff team to make appropriate decisions about their lives. A member of staff stated that the "assistance offered to each resident varies from person to person but it is to provide independence".

At the time of this site visit one resident was employed by the trust to undertake tasks in and around the administration offices.

The home has developed a series of multiple risk assessments to enable the residents participate in as active and as independent a lifestyle as possible.

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 residents are able to exercise choice in their daily lives.

Staff assist the residents to maintain and develop bonds with family and friends, and to participate in social, cultural, religious and recreational activities.

The meals provide are healthy and well balanced.

Evidence:

The lifestyle expectations of the residents of Holland House are well developed and individual. All residents have individual activity timetables and essential lifestyle plans in place, both documents receive regular reviews to ensure that they still offer the most appropriate activities to the individual. It was however noted that one of the essential lifestyle plans still referred to the residents previous care home. This was discussed with a member of staff who undertook action on the day to rectify the error. The staff working in conjunction with the people living at the home have developed a series of highly individualised activities, that are age, peer and culturally appropriate

Evidence:

for the residents.

The residents attend day centres, further education collages where they participate in daily living skills, pub, eating out and art therapy are among the opportunities available to the residents.

The residents have the ability to undertake holidays. A review of the homes files and records provided good documentary evidence on the holidays taken during this year, when four individuals went to Hastings with staff in June. There was additional information regarding the remaining four residents' main preferences for holidays, which was to take several day outings with staff in place of one long holiday.

There is detailed evidence within the residents' individual files of the support they receive to maintain contact with friends and families.

One resident is registered to vote and is supported to do so by staff.

The residents have a very flexible system in place for meals, they are supported by staff in the kitchen and to ensure that the meals offer a healthy balance. Two residents are on special pureed diets, which have been developed by a dietitian. The menus offered at the home have been fully reviewed by a dietitian who undertakes regular six-month reviews to ensure that the meals meet the seasonal and dietary needs of the residents.

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.

There is good evidence that the residents health care, wellbeing and welfare are being effectively supported.

The homes medication procedures are robust to ensure the safety of the people living in the home.

Evidence:

The PCP's demonstrated that the personal support needs were well documented and had been agreed with the resident, families and health care professionals. A random sample of four care plans evidenced that where a resident have the ability to sign they are supported and encouraged to do so to indicate that they are fully engaged in the review process.

One resident has had a full independent living skills analysis undertaken to identify his dependency levels to ensure that the home could respond to his high level of independence.

A member of staff stated that the time for getting up and going to bed in the home is flexible and dictated by the planned activities of the residents or simply what the

Evidence:

residents want to do.

The random review of individual PCP's provide evidence that all residents are registered with a local general practitioners(GP).

It was documented that the residents have access to dentists, chiropodists, opticians and psychiatrist support if required and that these are provided directly through the trust.

All medication is stored in a locked cupboard in the dining room and there is documentation to indicate that the medication is reviewed and audited regularly. The homes medication administration practises were examined. Protocols were in place for service users receiving "As required" medication.

Two residents have been risk assessed to be semi independent in taking their own medication, the home has developed plans to ensure that this process is undertaken in a safe and robust way.

A sample of the Medication Administrated Records (MAR's) indicated that all appropriate signatures are in place to demonstrate that medication has been administered to the correct individual and by whom. However a review of the homes controlled drugs book demonstrated that the medication to one individual was either not administered the evening before the site visit or that the staff member engaged in this task had failed to sign the book. This was discussed with the senior member of staff on duty who stated that they would that the error would be rectified.

Concerns, complaints and protection

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

If people have concerns with their care, they or people close to them, know how to complain. Their concern is looked into and action taken to put things right. The care home safeguards people from abuse, neglect and self-harm and takes action to follow up any allegations.

There are no additional outcomes.

This is what people staying in this care home experience:

Judgement:

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

The people who use this service benefit from a robust set of policies and procedures designed to protect and safeguard them from abuse.

Evidence:

The Commission For Social Care Inspection has not received any complaints about this home since the last inspection 16/11/2007. The complaint procedure is robust and has been produced in a pictorial format to enable the residents to fully access the process. The policy was reviewed and updated February 2007. A review of the complaints records maintained by the home indicated that there have been no complaints made to the manager and staff since the last inspection.

There is a clearly written safeguarding adults procedure and a copy of the local authority safeguarding adults from abuse policy was available. The contact details for the local authority Social Care Team was also displayed however there was some confusion in current contact details for the CQC offices.

The AQAA provide evidence that all members of staff have undertaken safeguarding training, this was reaffirmed on the day of the site visit by a member of staff. This was corroborated during a random sample of staff training record.

Environment

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

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

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

This is what people staying in this care home experience:

Judgement:

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

The layout of the home should enable the people who use the service to live in a safe environment.

The home is clean, hygienic and relatively free from mal odors.

Evidence:

A part tour of the building was undertaken as part of the site visit this consisted of all communal areas a four bedrooms of residents after permission was obtained from the occupant. The home is a large detached purpose built low level building, the rooms are large, bright and fully accessible to the residents.

The manager stated that the home had just obtained notification that funding had been obtained to replace the home current kitchen and it was hoped that this will be actioned before the end of 2009. The furnishing in the communal areas is relatively new and meets the needs of the residents. However the home is maintained only to a moderate level, the decoration throughout the home was not of a good quality. Where there are carpets in the home they were found to be heavily stained and marked even with constant cleaning and washing. The home had made arrangements for the carpets to be deep cleaned on the day of the site visit.

The bedrooms seen were very individual and fully represented the owner of the room,

Evidence:

however in some rooms there was a strong mal odour even after cleaning. A good practises recommendation was made to review the appropriateness of carpeting in bedrooms where the occupants are incontinent.

The home has a good infection control policy. The staff group have all had regular training to ensure that any health and safety issue can be identified and successfully brought to the attention of the correct maintenance provider.

During the inspection the home was clean and apart from the area previously mentioned relatively free from mal odours.

Staffing

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

People have safe and appropriate support as there are enough competent, qualified staff on duty at all times. They have confidence in the staff at the home because checks have been done to make sure that they are suitable. People's needs are met and they are supported because staff get the right training, supervision and support they need from their managers.

People are supported by an effective staff team who understand and do what is expected of them.

This is what people staying in this care home experience:

Judgement:

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

The staff group appeared skilled and in sufficient numbers to provide 24-hour care within the home.

The systems for recruitment and training are designed to be robust and should protect the people who use the service.

Evidence:

The AQAA provided evidence that Holland House has "9 experienced permanent staff , 1 Home Manager, 1 Care Team Leader, 5 NVQ level 2 trained and 2 support workers, and 1 staff who is now doing NVQ3".

The staffing levels set for the home is 3-3-2 and these are maintained at all times if at any point during a shift that the staffing level is depleted then a short fall would be completed. A review of the staff duty roster reflects that the home provides a good skill-mix on all shifts and where ever possible there is always a driver and a first aider on each day shift.

A random sample of four staff files was undertaken as part of this site visit, the files were found to be very congested with old information and did not adhere to any one system making them difficult to extract information. In two file reviewed gaps were found in the employment histories of the individual staff members, this was discussed

Evidence:

with the operational line manager for the trust and measures will be actioned to ensure the gaps would be rectified with the individual staff members. The AQAA stated that the "Home Manager and the Care Team Leader conduct supervisions monthly this is for regular staff, external bank and agency staff. At each supervision session home manager discuss issues with staff from career aspirations, on going training, courses that they may need to attend and opportunity for personal development".

Staff are up to date with statutory training

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 people who use the service benefit from a well run home. The service actively seeks feed back and has a robust quality assurance processes in place.

The health, safety and welfare of residents are promoted and protected.

Evidence:

The AQAA provided evidence that the manager of Holland House is a "registered nurse with RNMH qualifications and NVQ level 4 award in management and also A1 assessor qualification. The manager has many years experience working in the learning disability sector".

The manager stated in the AQAA that the "home management encompasses the principals of the social care code of conduct which states that all people should be treated as an individual, to respect and promote views of people. to acknowledge rights and choice, to respect dignity and privacy, to promote equal opportunities and respect diversity and different cultures". During the site visit it was apparent that the privacy, dignity, diversity and the equal opportunities of the residents were being promoted and supported by the staff and the manager.

Evidence:

The home holds regular residents and staff meetings which was confirmed by staff spoken to and from records sampled during the site visit. In addition "all individuals are provided with the opportunity to express their views at service users meeting, advocacy rock meeting, third Friday group. valuing people meeting, through the key worker system, person centred plan meeting, health action plan meeting and care review manager,".

The service operates a robust quality control system and issues regular quality assurance questionnaires to relevant individuals and the residents. The residents are assisted by their key workers at day service to complete their questionnaires. A random sample of the completed questionnaires provided evidence of a high level of satisfaction with the staff and the services offered at the home.

In addition to the quality questioners the Responsible provider carries out a series of monthly regulation 26 monitoring visits to ensure that the service is operating at an appropriate level. As part of the inspection process the regulation 26 log and files were reviewed and found to be in good order. The CQC received pre- inspection in the form of a AQAA information, which indicates that the NHS Trust provides a range of policies, and procedures to the home. The policies and procedures are regularly reviewed and updated, the manger subsequently brings the information to staff attention during staff meetings.

Substances hazardous to health (COSHH) were stored securely and appropriately. Health and safety checks are completed and recorded regularly, Gas Certificate dated 23/03/2009, Electrical PAT Certificate 03/2009, Controlled Waste Contract and Insurance Certificate. The manager provided information to indicate that records and certificates and identified systems are in place for routine service and maintenance arrangements for the environment.

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 | 6 | The registered manager should consider whether the PCP section of service user files should be more clearly separated from the person's main file with the aim of developing a more "user-friendly" working document. |
| 2 | 30 | The registered provider should review the practises of carpeting in bedrooms occupied by residents who are incontinent. |

Helpline:

Telephone: 03000 616161

Email: enquiries@cqc.org.uk

Web: www.cqc.org.uk

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