

Key inspection report

Care homes for adults (18-65 years)

Name:	The Hawthorns
Address:	Coulsdon Road Caterham Surrey CR3 5YA

The quality rating for this care home is:

one star adequate 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:
Ruth Burnham	1 5 0 7 2 0 0 9

This is a review of quality of outcomes that people experience in this care home. We believe high quality care should

- Be safe
- Have the right outcomes, including clinical outcomes
- Be a good experience for the people that use it
- Help prevent illness, and promote healthy, independent living
- Be available to those who need it when they need it.

The first part of the review gives the overall quality rating for the care home:

- 3 stars - excellent
- 2 stars - good
- 1 star - adequate
- 0 star - poor

There is also a bar chart that gives a quick way of seeing the quality of care that the home provides under key areas that matter to people.

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

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

Outcome area (for example Choice of home)

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

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

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

This is what people staying in this care home experience:

Judgement:

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

Evidence:

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

We review the quality of the service against outcomes from the National Minimum Standards (NMS). Those standards are written by the Department of Health for each type of care service.

Copies of the National Minimum Standards – Care Homes for 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

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

Information about the care home

Name of care home:	The Hawthorns
Address:	Coulsdon Road Caterham Surrey CR3 5YA
Telephone number:	01883383713
Fax number:	01883383714
Email address:	john.rhodes@sabp.nhs.uk
Provider web address:	

Name of registered provider(s):	Surrey and Borders Partnership NHS Trust
Name of registered manager (if applicable)	
Mr Selvam Guna Wilson Muthu	
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								
Brief description of the care home								
The Hawthorns is on the main site of Surrey and Borders NHS Trust Headquarters. It is a self-contained building set within a group of homes. All service users have their own single bedroom. There is ample garden space to the rear of the property, which has a patio area; the rest of the garden is laid to lawn. The building is a modern bungalow style property providing accommodation for service users on the ground floor only, however there are some steps within the building. There are local shops and pubs								

Brief description of the care home

within walking distance of the home, other community facilities, such as the library and swimming pool are reached by using the home's own transport or local bus services. Many day care facilities are provided for service users on the Trust's Headquarters' site. Service users also attend activities within community facilities, such as local education services, churches and leisure centres. The service users have a complex range of needs; including challenging behaviours.

The fees range from 58.893.02 pounds to 62.964.97 pounds per year. Items that are not covered by the fees include: hairdressing, toiletries, and meals out, nail manicures, some activities and holidays.

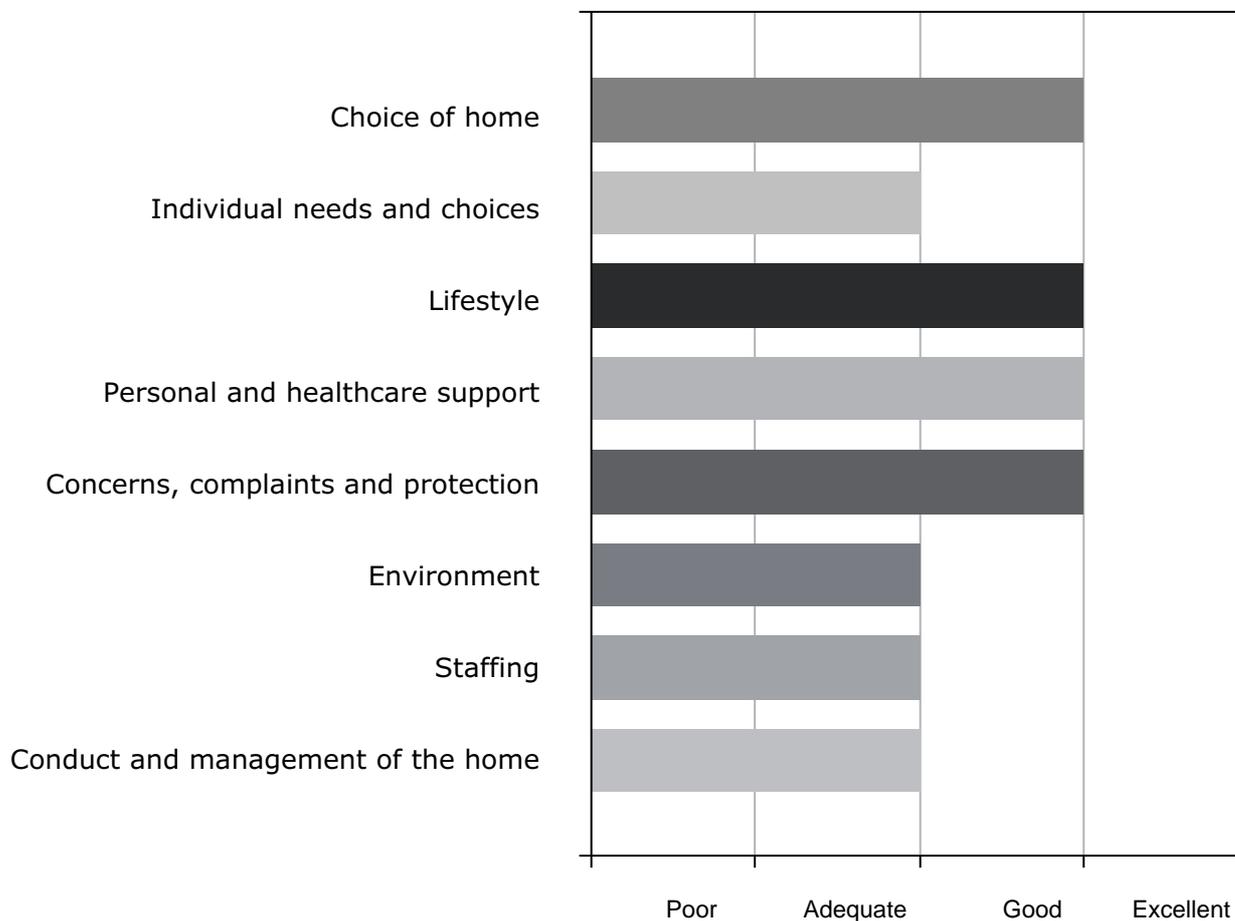
Summary

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

The quality rating for this care home is:

one star adequate service

Our judgement for each outcome:



How we did our inspection:

The unannounced site visit, which forms part of the home's key inspection was undertaken on 15 July 2009. We were in the home for six hours. from 09:00 to 15:00. The inspection was a thorough look at the service.

We asked the owner to complete and return the Annual Quality Assurance Assessment (AQAA) before our visit. This was returned to us and evidence for some of the information provided was looked at during our visit.

There are 6 people currently living in the home. We interviewed one person who lives there and observed and spoke to the other residents during the day. We also spoke to 2 members of staff, the person in charge and the service manager. We looked at most areas of the premises. We examined a number of records including staff employment records, Daily records, incident records, risk assessments and care plans.

Before the visit we sent six surveys to people who live in the home; six to their advocates; six to members of staff; five to health professionals and five to care managers. Twelve surveys were returned: Two from people who live in the home; one from a care manager, five from members of staff, one from a health professional and three from relatives. Responses were largely positive.

The last inspection took place on 21 July 2008. We found the majority of requirements made following that inspection have been met. Two requirements have not been met. We have made a further requirement following this inspection.

There is no registered manager for the service, feedback was given to the person in charge, who is currently applying to register as manager, and the service manager at the end of the visit.

The quality rating for this service is 1 star. This means the people who use this service experience adequate quality outcomes.

What the care home does well:

People who may consider moving into the home would be provided with helpful information about what life is like there. Thorough assessment and admission procedures mean people who may consider moving into the home in the future can be confident their needs will be understood and can be met.

People who live in the home enjoy opportunities to take part in a range of social and leisure activities. Their personal and healthcare needs are met in a way that respects their individual wishes and preferences and upholds their privacy and dignity. They are protected through safe systems for handling medication. They are listened to and protected from abuse.

People benefit from the support of the committed, and competent staff team. Effective quality assurance systems promote year on year improvement in the service. They are protected from harm through robust recruitment procedures and good medication policies and procedures.

What has improved since the last inspection?

Peoples' independence is no longer undermined by blanket policies that restrict access to key areas of the home. Toilet and bathroom areas are in process of refurbishment to provide better facilities and ensure effective standards of hygiene can be maintained to protect people from harm. The garden is being well maintained making this area inviting for the people who live in the home.

The Trust has now recruited a suitable manager who has made an application to be registered by the Commission. Records evidencing the safety and regular maintenance of electrical and gas installations, equipment and portable appliances are available in the home to show people are protected from harm.

What they could do better:

Care plans must be up to date to ensure staff always have access to the most up to date information about peoples' care needs. People must be protected from harm through effective care planning and risk management processes. The home must ensure it can cater for the needs of older people.

There must be an effective system for evaluating the quality of the services provided at the care home. Development plans and effective management systems should be in place to ensure people are provided with good quality services in line with their wishes and expectations.

The home must ensure that good standards of hygiene are maintained to protect people from risk of infection.

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:

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.

People who may consider moving into the home in the future would be provided with helpful information to assist them to decide if the home would be suitable for them. There are clear admission and assessment procedures to ensure people's needs can be met.

Evidence:

People currently living in the home have all lived there for a number of years. Any new residents entering the home would have a detailed assessments carried out of their needs to ensure the home will be suitable for them. There are clear admission procedures and criteria to reflect the principles of admission and assessment appropriate to the home.

Helpful information about what life is like in the home is available in the service users guide, copies of this document are available to people who live in the home and their relatives where appropriate. This document is displayed in the home and is updated each year.

Evidence:

The home does not offer intermediate care.

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

People are involved as far as possible in planning their own care according to their individual abilities. Staff do not always have access to the most up to date information and guidance about peoples' care needs. People are not always protected from harm where risk management processes are ineffective.

Evidence:

People who live in the home have detailed plans of care. All the residents' care plans were examined; these have been updated in consultation with residents and use a pictorial format to make it easier for individuals to understand. Care plans show care needs are assessed and reviewed regularly in house. Daily care notes are also recorded. One person who was spoken with was aware of the content of their care plan and confirmed that they were involved in setting it up. Not all care plans have been formally reviewed recently with care management and relatives or representatives of the resident. One care plan had not been formally reviewed since 28 May 2008. There are no management systems in place to track reviews. It was of further concern that individual behaviour management guidelines were not being

Evidence:

reviewed. Where individual residents have these guidelines they are dated in the year 2000 and were drawn up by a clinical psychologist. Since then plans of care have changed, some of these plans are now in direct conflict with the original health professional advice and guidance. In some cases the original guidance has been altered by staff, however this has not been done in consultation with relevant health professionals. Staff have still had no training in the mental health issues which affect people who live in the home. Psychiatric services are not being accessed in line with care reviews. In one review recorded in 2008 it was stated that the resident should be accessing psychiatric services, this has not happened.

It was noted at the last inspection that care planning documentation for each individual was not always up to date to provide clear guidance for staff on how to meet changing needs. Whilst we acknowledge the work that has been done to make care plans more person centred, concerns remain that people's care plans do not reflect up to date clinical guidance and are not being reviewed regularly in consultation with relevant others. Another example of this was where one person, who is over 65, is beginning to experience age related difficulties such as difficulty getting up from the sofa. There has been no occupational therapist assessment of the environment to ensure the home can cater for the needs of older people.

Risk assessments are recorded and reviewed. It was noted at the last inspection that these were not being used and developed as working documents leading to action to ensure people continue to be protected from harm as their needs change. This remains a concern. Daily records seen showed a number of incidents have occurred however these have not been picked up by current management systems. Incident sheets are recorded but these are linked with the regulation requiring the home to notify us of specific occurrences, rather than as part of any management system to promote the welfare of people who live in the home. The person in charge and deputy manager said they do not review daily records and were not aware of recent incidents of challenging behaviours recorded in the last month.

One resident who was spoken to confirmed that everyone has a designated member of staff as their keyworker, they said they were able to choose their keyworker and liked this arrangement. Keyworkers are trained to offer one to one support; they know people well and understand peoples' day to day needs. However, none of the staff have received training in the specific mental health needs of their resident. Neither have staff had training in caring for people with autism.

During the visit it was noted that staff are respectful, kind and supportive of people who live in the home. There is a friendly atmosphere and good rapport between staff

Evidence:

and the people who live there.

Lifestyle

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

Each person is treated as an individual and the care home is responsive to his or her race, culture, religion, age, disability, gender and sexual orientation. They can take part in activities that are appropriate to their age and culture and are part of their local community. The care home supports people to follow personal interests and activities. People are able to keep in touch with family, friends and representatives and the home supports them to have appropriate personal, family and sexual relationships. People are as independent as they can be, lead their chosen lifestyle and have the opportunity to make the most of their abilities. Their dignity and rights are respected in their daily life. People have healthy, well-presented meals and snacks, at a time and place to suit them.

People have opportunities to develop their social, emotional, communication and independent living skills. This is because the staff support their personal development. People choose and participate in suitable leisure activities.

This is what people staying in this care home experience:

Judgement:

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

People are supported and encouraged to plan a variety of activities. Activities support peoples' aspirations for increased independence in line with their individual interests.

Evidence:

People are supported to make choices in their everyday lives as far as they are able. The majority of people who live in the home have limited verbal communication skills. Staff have the necessary skills and experience to support people to make decisions and choices. Holidays, menu planning and outings are planned mainly with the support of staff who generally know the residents well. Information is provided in formats appropriate to peoples' individual needs to help them to make decisions. There are six people living in the home all of whom attend various activities; for example, bowling, shopping, trampolining, swimming, outings to places of interest and visiting local pubs. Some people attend the on site day centre.

Evidence:

Holidays are planned with the support of staff in line with the assessed needs, abilities and wishes of each person. People who have never been on holiday before are now enjoying this experience; one person enjoyed a short break to a spa recently at her request. The home has its own vehicle which is used for outings. One person said they enjoyed going on trips to the seaside. New activity programmes are being set up in line with people's interests and aspirations; trips to the seaside are now planned fortnightly. Some discussion took place about programming specific to one off activities people have requested such as a trip to a London show and an outing to cater for one person's interest in trains, to ensure these requests are not overlooked.

One person expressed a wish to attend church. Staff supported the resident to visit a number of churches to help her decide which one she would like to attend. Staff now take her to church and collect her at the end of the service.

Most people have contact with family members. One of the residents said they enjoyed going to church and attending art and music classes and other sessions at the day centre. This person is hoping to move into more independent living accommodation in the future. She told us that she now does some cooking and is involved in doing her own laundry.

The dining room provides a pleasant space for people to enjoy meals. Staff are trained in basic food hygiene. It was noted at the last inspection that the kitchen was kept locked which restricted freedom and independence for everyone who lives in the home. This has been addressed and people now have access to the kitchen. The front door is still kept locked, however one person who is more independent now has a key. The removal of blanket policies has improved the quality of life for people who live in the home. People who live in the home are encouraged and supported to plan the menu.

Personal and healthcare support

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

People receive personal support from staff in the way they prefer and want. Their physical and emotional health needs are met because the home has procedures in place that staff follow. If people take medicine, they manage it themselves if they can. If they cannot manage their medicine, the care home supports them with it in a safe way.

If people are approaching the end of their life, the care home will respect their choices and help them to feel comfortable and secure. They, and people close to them, are reassured that their death will be handled with sensitivity, dignity and respect, and take account of their spiritual and cultural wishes.

This is what people staying in this care home experience:

Judgement:

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

People who live in the home can be confident their personal and healthcare needs will be met in a way that respects their individual wishes and preferences and upholds their privacy and dignity. They are protected through safe systems for handling medication.

Evidence:

People who live in the home can be confident their personal and general healthcare needs will be met in a way that respects their individual wishes and preferences and upholds their privacy and dignity. People who were spoken to said they could choose when to go to bed and when to get up and are supported to choose their own clothes, hairstyles and other aspects of personal grooming.

Peoples' health is promoted through regular visits to the local G.P and they all have an annual health check. People are being supported to access physiotherapists, dentists, chiropodists and opticians when required. Each person has a detailed health action plan.

People are protected from harm through safe systems for handling medication. Staff

Evidence:

who handle medication are trained to do so. The Medication Administration Record (MAR) sheets are well maintained and up to date. None of the people who live in the home are able to take responsibility for their own medications.

Concerns, complaints and protection

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

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

There are no additional outcomes.

This is what people staying in this care home experience:

Judgement:

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

People who live in the home are listened to. They are protected from abuse.

Evidence:

People who live in the home are listened to and encouraged to offer comment or complaint. The complaints procedure is in pictorial form to make it easy for people to understand. One person said they would always tell staff if they were unhappy about anything. During the visit staff were observed to offer sensitive support when people were anxious and needed reassurance. Complaints are recorded and dealt with appropriately within reasonable timescales. There have been no complaints in the last year. All the residents and relatives who responded to our survey said they were satisfied with the service provided. The Care Quality Commission have not received any complaints about the service since the last inspection. The service manager and staff have undertaken training in the protection of vulnerable adults and staff are aware of the whistle blowing policy.

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

People who live in the home are benefiting from recent improvements to the environment. There is still risk of harm where cleaning needs to be improved to ensure effective standards of hygiene protect people from risk of infection.

Evidence:

Since the last inspection the Trust has continued to improve the environment for people who live in the home. Communal areas are well presented. Refurbishment of bathrooms and toilets is in progress. People are supported to personalise their bedrooms. Bedroom flooring is mainly vinyl which detracts from the homely feel of these rooms. There is a choice of outside space for residents to enjoy, Some fixtures and fittings are worn and need replacement. One of the residents is interested in gardening and has his own area of the garden where he grows vegetables.

A recent visit from the Environmental Officer raised a number of concerns about the safety of the kitchen in terms of hygiene standards. During our visit we found improvements were still needed to ensure the cooker and microwave were adequately cleaned. Other areas of the home also needed improvement to ensure good standards of hygiene are maintained. One toilet was particularly dirty.

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

People who live in the home benefit from the commitment of the staff team to providing good quality care. Robust recruitment procedures protect people from abuse. Additional training is needed to ensure staff understand and are able to support people with specialist needs.

Evidence:

People who live in the home benefit from the commitment of the staff team to provide good quality care. There are sufficient numbers of staff on duty to meet the needs of people who live there. Staff spoken to are committed to providing a good service in line with peoples' individual needs and expectations.

People are protected through robust recruitment and selection procedures. Staff files contain all the required information and are well maintained and up to date. People who live in the home are involved in the selection process and take part in interviewing applicants. There are still problems accessing staff training. The service manager said at the last inspection that this was now being addressed and additional training was being sourced to ensure all staff have the opportunity to attend relevant courses such as caring for people with autism and other specialist training to help staff understand the specialist needs of people who live in the home. It was therefore disappointing to find that staff have still not received training in Autism or in

Evidence:

understanding peoples' individual mental health needs.

All new staff attend the Trust's induction course where all mandatory training is covered. Supervision takes place 4 to 6 weekly for all the staff team. Appraisals are carried out annually.

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

People who live in the home cannot be entirely confident the home is managed effectively. Ineffective quality assurance and management systems have a negative impact on the service people receive and, in some instances, place people at risk of harm.

Evidence:

The Trust appointed a manager for the home at the end of 2008. They are in process of registering with the Commission. A deputy manager has also been appointed. This has had a positive impact on the quality of life of people who live in the home in that care planning is now more person centred and opportunities for people to take part in leisure activities in line with their interests and expectations has been increased. Refurbishment of bathrooms and toilets is now underway.

The Annual Quality Assurance Audit for the Commission was completed and returned and has been used as part of this inspection. This showed that there is a quality assurance system in operation in the home. Monthly management visits are undertaken in line with the requirements of the Care Homes Regulations; these are

Evidence:

unannounced and provide feedback to the home on good practice as well as areas for development. It was disappointing to find these visits had not been effective in ensuring compliance with requirements around care planning and risk management made following our last inspection. These monthly reports made no mention of these requirements. A notice was issued to the home at the end of our visit requiring compliance.

Current management systems are still not supporting effective quality monitoring of the service. Examples of this were found as follows: Failure to access training to ensure staff have the necessary skills to protect people who live in the home through safe working practices; lack of training in specialist needs such as Autism and mental health difficulties to ensure staff understand how to meet these needs; inadequate monitoring and review of daily records, care planning and risk management processes. There are no environmental risk assessments of people's bedrooms or communal areas to ensure the environment is suitable to meet their changing needs.

Records seen show that a safe environment is being maintained for the people who live in the home through regular servicing and maintenance of installations and equipment. More work needs to be done to ensure that all the recommendations made by the Environmental Health Officer following their recent inspection have been complied with. People may be at risk of infection where toilets and areas of the kitchen are not being cleaned adequately.

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
1	6	15(2)	Care records must be kept up to date to ensure staff always have access to the most up to date information about peoples' care needs.	30/08/2008
2	9	13(4)	People must be protected form harm through effective care planning and risk management processes.	30/08/2008

Requirements and recommendations from this inspection:

Immediate requirements:

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

No.	Standard	Regulation	Requirement	Timescale for action

Statutory requirements

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

No.	Standard	Regulation	Requirement	Timescale for action
1	6	12	<p>The home must make proper provision to promote peoples' health and welfare, in that care plans should be reviewed regularly, be based on up to date health professional guidance, particularly in relation to mental health needs to provide clear, up to date guidance for staff. The home must obtain relevant specialist guidance to ensure the needs of older people are catered for. Up to date behaviour management guidance should be provided where appropriate to ensure staff maintain a consistent approach to promote the welfare of residents. Actions agreed in formal reviews should be carried out.</p> <p>To ensure peoples' needs are met.</p>	31/08/2009

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
2	9	13	<p>The home must ensure unnecessary risks to the health or safety of service users are identified and so far as possible eliminated. Risk assessments should not conflict with health professional guidance. Daily records should be monitored to ensure all incidents inform the risk management process.</p> <p>To ensure people are protected from harm.</p>	31/08/2009
3	30	16	<p>The home must make suitable arrangements for maintaining satisfactory standards of hygiene in the care home.</p> <p>In that all areas of the home should be effectively cleaned to provide a pleasant and safe environment for residents. Recommendations made by the Environmental Health Officer must be fully implemented.</p> <p>To ensure people are protected from risk of infection.</p>	31/08/2009
4	35	18	<p>The home must ensure that staff employed to work at the care home receive</p>	31/08/2009

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
			<p>training appropriate to the work they are to perform. Training provided in the home must be adequate to ensure all staff understand how to meet the specific needs of people who have mental health difficulties or Autism.</p> <p>To ensure staff are competent to meet the needs and promote the wellbeing of all the people who live in the home.</p>	
5	39	24	<p>There must be an effective system for evaluating the quality of the services provided at the care home. Development plans should be in place based on a systematic cycle of planning - action - review, reflecting aims and outcomes for service users.</p> <p>To ensure people are provided with good quality services in line with their wishes and expectations.</p>	31/08/2009
6	42	12	<p>The registered person must ensure there are effective risk management systems to ensure the environment is suitable for the people who live there. Suitable arrangements must be made</p>	22/08/2009

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
			to maintain good standards of hygiene. To ensure people are protected from risk of harm or infection.	

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	14	Where people have expressed a wish to do a particular activity the home should be proactive in planning for this to take place.
2	24	Consideration should be given to upgrading bedroom flooring and fixtures to provide a more homely environment.

Helpline:

Telephone: 03000 616161

Email: enquiries@cqc.org.uk

Web: www.cqc.org.uk

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

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