

Key inspection report

Care homes for adults (18-65 years)

Name:	Rosewood
Address:	Farmfield Drive Charlwood Surrey RH6 0BG

The quality rating for this care home is:	three star excellent 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:							
Deborah Sullivan	1	2	0	4	2	0	1	0

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

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

Reader Information

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Internet address	www.cqc.org.uk

Information about the care home

Name of care home:	Rosewood
Address:	Farmfield Drive Charlwood Surrey RH6 0BG
Telephone number:	01293774907
Fax number:	01293774907
Email address:	frances.love@sabp.nhs.uk
Provider web address:	

Name of registered provider(s):	Surrey and Borders Partnership NHS Trust
Name of registered manager (if applicable)	
Mrs Francis Patricia Love	
Type of registration:	care home
Number of places registered:	8

Conditions of registration:		
Category(ies) :	Number of places (if applicable):	
	Under 65	Over 65
learning disability	8	0
physical disability	8	0
Additional conditions:		
The maximum number of service users to be accommodated is 8.		
The registered person may provide the following category/ies of service only: Care home with nursing - (N) 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) Physical disability (PD).		
Date of last inspection		
Brief description of the care home		
Rosewood is a care home with nursing owned and managed by Surrey Borders Partnership NHS Trust. The home is registered to accommodate up to eight adults with learning disabilities, neurological conditions, multiple physical disabilities and/or sensory impairments. The home is situated in a peaceful, semi rural location within easy reach of local towns and all community facilities. The property is a large,		

Brief description of the care home

detached, purpose built bungalow and wheelchair accessible throughout. Bedroom accommodation is single occupancy. Bedrooms have overhead tracking for use of hoists and specialist toilet, bathroom and shower facilities. Shared areas comprise of a large lounge, separate sun lounge, a dining/therapy room and sensory room. There is a kitchen, utility room and office facilities. The front garden is open plan and parking facilities are available for eight cars and the two specially adapted vehicles. The rear garden is secure and private with a patio, sunshade and wide paths suitable for wheelchair use. The weekly charge for the service was two thousand, eight hundred and seven pounds, fifty three pence at the end of March 2010, the service can provide information regarding possible increase in fees in the current financial year.

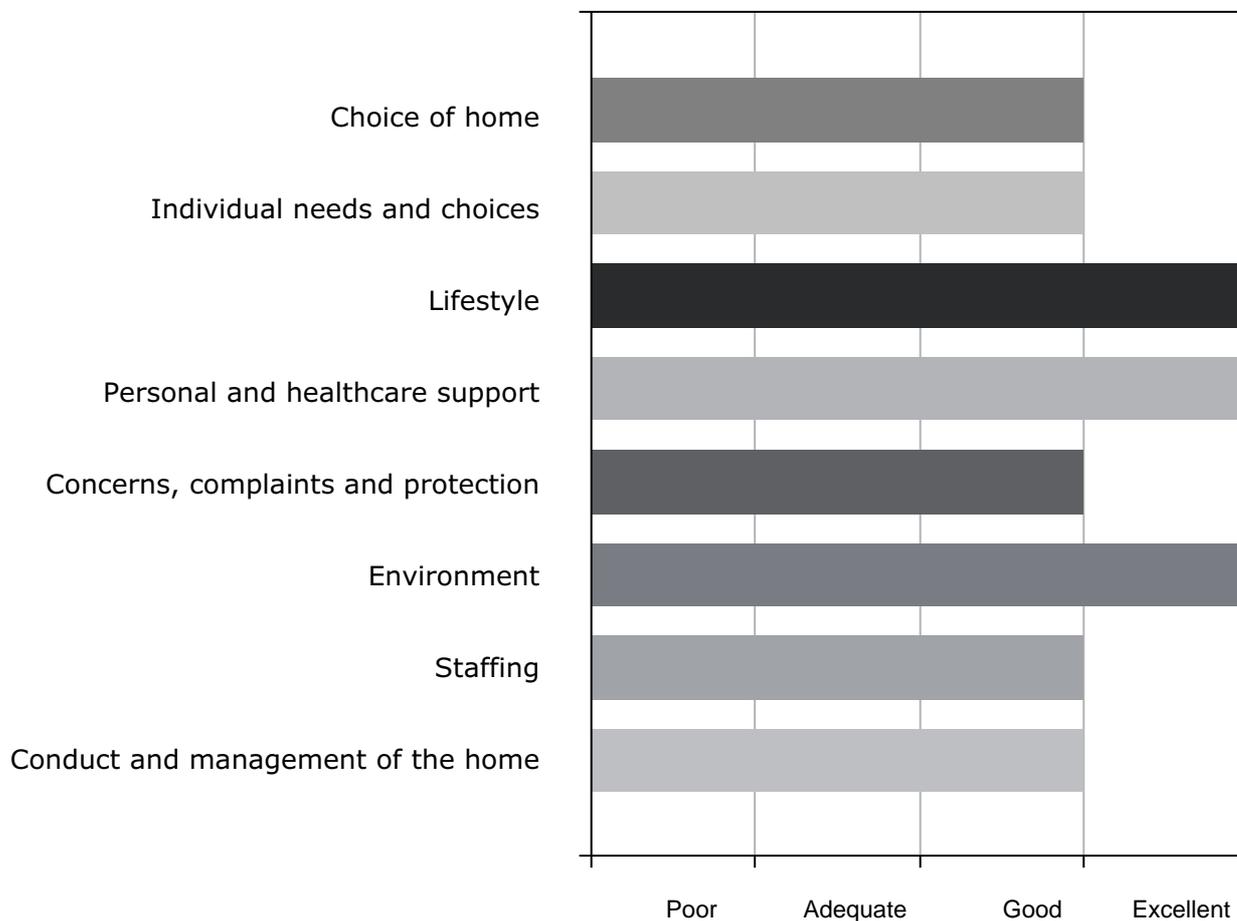
Summary

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

The quality rating for this care home is:

three star excellent service

Our judgement for each outcome:



How we did our inspection:

This unannounced key inspection of Rosewood took place over four and a half hours. During the visit time was spent with residents and staff on duty. The registered manager was not at the home on the day of the visit, although a short telephone discussion took place with her at the start of it and she was given telephone feedback later in the week. Staff on duty and present throughout the visit provided information and their contribution was very helpful.

During the visit a tour of the building took place and a range of recording and documents were examined including care plans, medication records, staff training information and some policies and procedures. The people living at the home are mainly non verbal therefore judgements about the outcomes for them and their wellbeing and welfare have mostly been based on discussion with staff and the manager, observation, records and information provided in the AQAA (Annual Quality Assurance Assessment), a document that services are required to complete each

year. Six surveys returned to us by staff have also provided information to inform the inspection process.

The AQAA was completed by the registered manager to a high standard giving us comprehensive and clear information on the service, changes and developments during the past year and plans for future development.

What the care home does well:

Rosewood provides a safe, accessible, clean, well maintained and well presented home for its residents. It has a homely atmosphere and staff do their best to include residents in the running of the home and to involve them in decision making. Residents bedrooms are furnished and decorated to a high standard and show that each person has been involved in making the room very personalised.

There is up to date information about the service available and people considering moving to the home have their needs assessed and can visit and become familiar with the service before moving in.

Care plans are person centred and residents and their representatives are involved in compiling them. Information on individual needs reflects likes, dislikes and preferences and there is clear guidance for staff on how each person likes to be supported and how they communicate.

Staff are well supported and trained and have good rapport with residents. They understand how they communicate and residents are comfortable with them.

Contact with relatives is viewed as very important and the home supports residents to keep in touch with them.

The meals provided are healthy, varied and nutritious.

What has improved since the last inspection?

Information about the service has been brought up to date.

There is wider range of activities and hydrotherapy has been introduced. Staffing has been made more flexible to allow for activities in the community.

A review of residents wheelchairs and seating has taken place to improve their comfort and posture.

A review of medication has taken place with the GP and pharmacist.

Relatives have been involved in preparing "end of life" plans.

More staff have gained a National Vocational Qualification in care at level two or above and staff have been provided with information on the Mental Capacity Act Deprivation of Liberty Safeguards.

All the occupied bedrooms have been attractively redecorated and refurbished and other areas of the home repainted.

What they could do better:

The trust must make sure that when the employers liability insurance is renewed annually the certificate is provided for the home to display by the time it is current.

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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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 information available about the home to prospective residents and their representatives is current and accurately describes the service.

People who are considering moving into the home can feel confident that their needs will be fully assessed before they are offered a place and that they will have opportunities to visit it and meet other service users and staff.

Evidence:

The home has a statement of purpose and service users guide, both are up to date and accurately describe the service provided. The AQAA tells us that ways to make the service users guide more accessible have been explored, although due to considerations regarding the needs and abilities of the people living at the home the best way found to achieve this so far is to talk through the guide. This had been done with the newest resident.

When a prospective resident is referred to the service a full assessment of their needs

Evidence:

is completed and staff from Rosewood visit them in their current accommodation as part of the process. People referred can visit Rosewood and spend time there to become familiar with other service users and staff, and all introductions to the home are personalised and go at the persons own pace.

Most of the residents are very well established at the home having moved there from a hospital setting. The home demonstrates that it continues to reassess their needs regularly and meets them well.

One person was newly admitted to the home last year and has settled in well and progressed. The resident and their relatives were involved in redecorating and furnishing their room in their favourite colours and style, and they were able to have a choice of bedroom. Pre admission assessment information was available on their care plan and the information in the assessment has been used in the development of the document.

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.

Each person living at the home has a person centred care plan that reflects their current needs, preferences and strengths. Plans are reviewed and effective management of risk protects residents from harm.

Residents are supported to make decisions about their lives and to take part in the daily running of the home.

Evidence:

All the residents have profound learning disability. Their needs are complex and include physical disability and sensory impairment. They all need a considerable amount of support with health and personal care, to access activities, communicate and to achieve personal goals.

Each person has a care plan that is person centred and includes a health action plan. Two plans were examined in detail. There was evidence in the care plans that

Evidence:

residents had been consulted about the content as far as possible and their interests, personal preferences and likes and dislikes are comprehensively recorded. Relatives and health and social care professionals had contributed to the information and reviews had taken place. Care plans were reviewed regularly and the information was up to date. The plans included some pictorial information and individual risk assessments. Communication profiles inform staff in detail of residents methods of communication, what their personal sounds and gestures mean and what they should do to respond to the resident.

Residents are supported to make decisions about their lives such as when to get up and go to bed, what to do during the day and what to wear. Choices are recorded and staff were observed to consult with residents about what they wanted to do and discuss with them what was happening that day. Discussion took place at lunchtime about what residents wished to do after the meal. One person was to be supported to clean their room and make sure their wardrobe was tidy, another appeared tired and was going to have a rest.

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

People who live at the home are supported to take part in activities in the home and community that suit their individual interests and abilities.

Contact with relatives is promoted and supported.

Meals are healthy, varied and nutritious and well presented.

Evidence:

Each resident has an individual weekly activity plan which is developed as far as possible in consultation with them and reflects their personal interests. All the residents have complex needs, they are supported by staff to make choices and decisions and staff interpret their wishes through understanding individual communication methods. During the visit staff interacted with the residents well and explained what gestures and other ways of communicating meant, one person who has

Evidence:

some speech was assisted in contributing to the inspection by staff.

Each resident is offered regular opportunities to access the community on a one to one basis with staff, with other residents, and to take part in activities at home. Staff also try hard to include residents in the day to day running of the home as much as they can. During the visit one person went out with a staff member for the morning, following a routine health check appointment they were going out for lunch and to the cinema. Each person has a one to one outing at least weekly. When necessary additional staff are on shifts to facilitate community activities, the rota confirmed this with permanent or bank staff providing the extra support.

Residents were going to a line dancing class in the evening at the trusts day service which also provides some daytime activities. Other activities that take place at home include music therapy twice a week, aromatherapy, hydrotherapy and visits from "Us on a Bus" an independent intensive interaction activity provider which staff report has proved beneficial to residents.

Residents are supported to participate in keeping rooms clean and tidy, to garden and to help with the laundry. One person was observing, and interacting with the cook during the morning, whilst another was on "office duty" observing staff and the inspector when they were in the room and another person was using the sensory room for a while.

Individual photo albums were seen in bedrooms that have photos of a variety of outings and holidays, each person has an annual holiday, one album had photos of last years trip to Cornwall, this years holidays were being planned.

Each resident has relatives who are in regular or very frequent contact. The visitors book, house diary and individual daily diaries that are kept in bedrooms showed that the weekend just before the visit several relatives had visited and one person had been to visit their relative, staff had taken and collected them. Relatives are invited to special events and a staff member said the Christmas party had been well attended by them. A resident who has some speech has a mobile phone and often calls their family. Daily diaries documented other activities in the community such as going shopping or for a hair cut.

The home is in a pleasant setting with a nature reserve next door, staff said visiting relatives often go for walks there with residents. There are two accessible vehicles and all the permanent staff are drivers.

Evidence:

A part time cook/housekeeper is employed who prepares the main lunchtime meal during the week. Staff prepare breakfast and the evening meal. The cook is responsible for the weekly shopping. There is a four week menu that is healthy and varied and includes a good range of meat and vegetable based meals. The cook has worked at the home for a long time and is very aware of the residents food likes and dislikes. The lunch on the day of the visit was tasty and well received, with liquidised meals having food components separately presented on the plate. Staff assisted residents with their meal giving each person the time and attention they needed and encouraged one person with feeding themselves.

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 **excellent** 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 that their health and personal care needs will be met in a way that upholds their privacy and dignity and respects their personal preferences.

The homes medication procedures are thorough and they protect residents.

Evidence:

Health and personal care needs are recorded in care plans and health action plans. Recording is clear and detailed and as with the rest of the care plan content there is some pictorial information included. Health appointments are recorded, residents have complex health and mobility needs and are supported to access health professionals such as their GP, dentist, physiotherapist, specialist wheelchair service and dietitian. Four of the five residents are wheelchair users and work has taken place over the past year to improve their posture, comfort and mobility with involvement from specialist wheelchair services.

The equipment each person uses is very individual to them and staff receive training in its specific use, as well as attending the required manual handling training with

Evidence:

regular refreshers. Residents have keyworkers and a staff member said that as far as possible gender preference is respected when personal care is delivered.

Each person's methods of communication are recorded and staff demonstrated that they understand residents well and are able to communicate effectively with them. Good health is promoted, residents have healthy well balanced meals and those on a pureed diet have meals appropriately presented. Weight is monitored regularly.

Medication is securely stored and the medication recording sheets checked were correctly completed. A list of staff qualified to administer medication with their signatures is maintained and there are clear medication guidelines in place. Residents would be unable to self-medicate so they are all supported by staff with medication, the AQAA tells us that during the past year medication reviews with the GP and pharmacist have taken place. One person's medication was adjusted as a result and this has benefited them.

The care plans sampled included "end of life plans" that had been completed with the support of residents' relatives.

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 home has systems in place for managing complaints and the people who live there are supported to raise any concerns.

The policies and procedures in place protect residents from harm and staff are aware of their responsibility to report suspected abuse.

Evidence:

The home has a complaints procedure that is available in a format accessible to residents. All the residents would need support to raise a formal complaint, they each have relatives who are in regular contact, and staff are aware of their methods of communication so know if they are distressed or unhappy with anything.

Relatives have good relationships with the home and are welcome to discuss any concerns before they may escalate and become a complaint. No formal complaints had been made about the home during the past year.

Procedures for supporting residents with their personal finances are thorough and the records are audited by the trust. A small amount of spending money is held at the home for each person, it is stored safely and records are audited by the trust.

There are robust procedures and processes in place to make sure that residents are kept safe. There is a safeguarding procedure and all the staff have safeguarding

Evidence:

vulnerable adults training .Recruitment procedures include vetting such as CRB(Criminal Records Bureau) checks.

Survey forms were sent to us by six staff members,they all said CRB and other checks took place before they started work.A member of staff spoken with during the visit confirmed they had been on safeguarding training and would know how to report any suspected abuse.

Environment

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

People stay in a safe and well-maintained home that is homely, clean, 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 **excellent** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

Residents benefit from living in an environment that is homely, well presented and safe. Their bedrooms reflect their personalities and interests and are spacious.

Evidence:

The home is purpose built to suit the needs of residents and accommodation is all on one level. It is spacious with plenty of room to accommodate wheelchairs throughout. There is a friendly and welcoming atmosphere and the building is light and airy, there were vases of fresh flowers that added to the homely feel. There is also a friendly cat who looked very comfortable in the sun lounge and a tropical fish tank in the dining room.

The large light and airy lounge/sun lounge leads onto a safe and accessible patio which has patio furniture and large attractive and well kept garden. There is a greenhouse in the garden, a fruit and vegetable plot and raised beds. Staff said residents make good use of the garden in good weather and like to help with gardening.

There is a well equipped sensory room that was being used by one person. The dining room is spacious and residents can watch and communicate with the cook easily as

Evidence:

there is a large hatch to the kitchen. One person was enjoying interacting with the cook and other staff and watching the lunch being prepared.

The two bathrooms are well equipped clean and hygienic, the building was very clean and tidy throughout. Care staff and the cook/housekeeper are responsible for the cleaning and laundry. There is a shower room and bedroom for sleep in staff. All the bedrooms are spacious, very attractively decorated and furnished in the choice of colour and furnishings of the occupant. Bedrooms include personal items such as televisions, music systems, family photo collages, collages of holidays and activities residents have been on and mobiles on the ceiling. Some residents have digital photo frames they can look at whilst in bed. All the bedrooms have been redecorated in the past year and have ceiling track hoists and the equipment necessary for each person's needs. There is also a large storage room where a variety of equipment and items are stored and a well ordered and hygienic laundry.

Residents were accessing communal areas of the home freely with support from staff who made sure that each person at home had an activity to do and an area to be in that allowed for them to have personal space and plenty of attention from staff.

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 people who live at the home can feel confident that they are supported by a team of staff who are well trained, confident and now their individual needs well.

Recruitment processes protect residents and are thorough.

Evidence:

The registered manager was not on duty during the inspection although a short telephone discussion took place with her early on in the visit and it was arranged she would be contacted when on duty later in the week. This took place and feedback on the inspection was then given. The manager is supported by a deputy manager. An experienced shift leader was in charge on the day of inspection and two other carers were on shift. There was a mix of male and female staff on duty, the staff group as a whole is diverse in terms of age, gender and ethnicity. Some staff who have a nursing qualification are employed. The home was not fully occupied and staffing levels reflected this, at times when additional staff are needed, for instance to support residents on trips out, to activities or medical appointments they are added to the rota.

It was not possible to inspect staff records other than the training information as the manager was not on duty, however no concerns about recruitment or staffing overall

Evidence:

have come to our attention. The surveys returned by six staff members state that they were vetted before they started work at the home, they feel well supported and that they receive training that is relevant for the role they have and helps them understand the support residents need and how to deliver it. Training files for two members of staff contained certificates for core and other training.

Staff receive regular supervision and annual appraisal, and team meetings are held and recorded. Fifty percent of the care staff now hold an NVQ (National Vocational Qualification) in care at level two. Induction and core training is provided as well as specialist training such as on epilepsy, dysphagia and eating problems, person centred planning and health action planning. The AQAA tells us that staff have been provided with information about the Mental Capacity Act Deprivation of Liberty Safeguards and on equality and diversity.

Some additional comments from staff on the surveys were-

"Rosewood looks after all the service users and their needs. It is a lovely home to work at".

"This is a very happy home to work at. The people who use the service have a lot of activities they attend, they all go out in the community on outings etc".

"For me they (residents) are close friends. I take them out in the community so they enjoy themselves and meet people".

Staff had a good rapport with residents and involved them in discussion and activities, residents were observed to be comfortable with staff. Staff spoken with were genuinely interested in the lives of the people they support and in providing them with plenty of interaction and opportunities to participate in activities.

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 home is run in the best interests of residents and staff and has developed since the last inspection.

There are effective internal quality assurance systems in place and the views of residents are sought.

Evidence:

The homes registered manager is working part time until a replacement manager is found. Having retired, she is currently employed under a temporary contract until the full time post is filled. The manager is supported by a deputy manager and senior staff. The manager is well qualified for the role and is experienced in management. The home has a welcoming and friendly atmosphere and the ethos is one of inclusiveness with residents being involved as much as possible in its daily running and interaction with staff.

The service and trust have internal quality assurance processes in place. Monthly visits

Evidence:

by a representative of the provider to the home take place and reports on the visit are written, reports were seen and they identified areas where work was required and had been actioned. There are internal audits such as of financial and health and safety records and annual surveys are distributed to relatives. The AQAA tells us that the trust provides newsletters and quarterly meetings for residents and relatives to give them opportunities to air views.

All the records examined were completed to a good standard and confidential information was appropriately stored.

Staff were seen to be using safe working practices. During the visit an employee of the trust who checks fire alarms arrived to test them and work was taking place on the boiler, there is a back up boiler so that if one has a fault residents are not disadvantaged. There is a large body of policies and procedures that are kept up to date and staff can now access them on line.

There was no employers liability insurance certificate on display, this was discussed with the manager during the feedback after the visit, she checked with the trusts head office and confirmed the insurance was in place and the certificate was being e mailed, it would then be displayed straight away.

The AQAA completed by the registered manager has provided information used in this report. It contains good quality and comprehensive information about the home, developments and plans for further improvement.

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

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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.

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