Key inspection report

Care homes for adults (18-65 years)

<table>
<thead>
<tr>
<th>Name:</th>
<th>7-8 Hancox Close</th>
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<tbody>
<tr>
<td>Address:</td>
<td>Hancox Close, 7-8</td>
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<td></td>
<td>Weston Under Wetherley</td>
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<td>Leamington Spa</td>
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<td>Warwickshire</td>
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<td>CV33 9GD</td>
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The quality rating for this care home is: two star good service

A quality rating is our assessment of how well a care home is meeting the needs of the people who use it. We give a quality rating following a full review of the service. We call this full review a ‘key’ inspection.

<table>
<thead>
<tr>
<th>Lead inspector:</th>
<th>Date:</th>
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<tbody>
<tr>
<td>Julie McGarry</td>
<td>2 5 0 6 2 0 0 9</td>
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</table>
This is a review of quality of outcomes that people experience in this care home. We believe high quality care should

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

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

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

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

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

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

<table>
<thead>
<tr>
<th>Outcome area (for example Choice of home)</th>
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<tbody>
<tr>
<td>These are the outcomes that people staying in care homes should experience. <strong>They reflect the things that people have said are important to them:</strong></td>
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<tr>
<td>This box tells you the outcomes that we will always inspect against when we do a key inspection.</td>
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<tr>
<td>This box tells you any additional outcomes that we may inspect against when we do a key inspection.</td>
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<tr>
<td>This is what people staying in this care home experience:</td>
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<tr>
<td>Judgement:</td>
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<tr>
<td>This box tells you our opinion of what we have looked at in this outcome area. We will say whether it is excellent, good, adequate or poor.</td>
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<tr>
<td>Evidence:</td>
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<tr>
<td>This box describes the information we used to come to our judgement.</td>
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We review the quality of the service against outcomes from the National Minimum Standards (NMS). Those standards are written by the Department of Health for each type of care service.

Copies of the National Minimum Standards – Care Homes for Adults (18-65 years) can be found at www.dh.gov.uk or bought from The Stationery Office (TSO) PO Box 29, St Crispins, Duke Street, Norwich, NR3 1GN. Tel: 0870 600 5522. Online ordering from the Stationery Office is also available: www.tso.co.uk/bookshop

The mission of the Care Quality Commission is to make care better for people by:

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

**Reader Information**

<table>
<thead>
<tr>
<th>Document Purpose</th>
<th>Inspection report</th>
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<tr>
<td>Author</td>
<td>Care Quality Commission</td>
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<td>Audience</td>
<td>General public</td>
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### Information about the care home

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<thead>
<tr>
<th>Name of care home:</th>
<th>7-8 Hancox Close</th>
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<tbody>
<tr>
<td>Address:</td>
<td>Hancox Close, 7-8 Weston Under Wetherley Leamington Spa Warwickshire CV33 9GD</td>
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<tr>
<td>Telephone number:</td>
<td>01926633548</td>
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<tr>
<td>Fax number:</td>
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<td>Email address:</td>
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<td>Provider web address:</td>
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<table>
<thead>
<tr>
<th>Name of registered provider(s):</th>
<th>Coventry and Warwickshire Partnership Trust</th>
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<tbody>
<tr>
<td>Type of registration:</td>
<td>care home</td>
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<tr>
<td>Number of places registered:</td>
<td>6</td>
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### Conditions of registration:

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<tr>
<th>Category(ies) :</th>
<th>Number of places (if applicable):</th>
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<tbody>
<tr>
<td>learning disability</td>
<td>Under 65</td>
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<td></td>
<td>6</td>
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**Additional conditions:**

- The maximum number of service users who can be accommodated is: 6
- The registered person may provide the following category of service only: Care Home Only (Code 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) 6

### Brief description of the care home

7 and 8 Hancox Close is a purpose built, large semi detached pair of bungalows. The home was purpose built to accommodate 6 people with learning disabilities and additional physical disabilities. The home is registered under Coventry and Warwickshire Partnership Trust and is staffed 24 hours a day. The premises are leased from a local housing association.

Both bungalows have been adapted to meet peoples and include a good range of equipment to assist with daily routines. There is a large communal living/dining area.
Brief description of the care home

Number 8 has two bedrooms with washbasins, one shower room and separate toilet and a communal living/dining area. A mini-bus driven by staff members is provided to transport people around the community.

Information regarding fees / funding is available from the home directly.
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:

[Bar chart showing ratings for different outcomes: Choice of home, Individual needs and choices, Lifestyle, Personal and healthcare support, Concerns, complaints and protection, Environment, Staffing, Conduct and management of the home.]

How we did our inspection:

The quality rating for this service is a two star; this means that people using the service receive good outcomes.

This was a key unannounced inspection visit. This is the most thorough type of inspection when we look at key aspects of the service. We concentrated on how well the service performs against the outcomes for the key national minimum standards and how the people living there experience the service.

One Regulation Inspector carried out this unannounced key inspection on one day between 09:00 and 17:00 hours. As the inspection was unannounced, the registered manager and staff did not know we were going.

Before the inspection we looked at all the information we have about this service such as information about concerns, complaints or allegations, incidents, previous
inspections and reports.

Questionnaires were sent to the service for the home to distribute to people who use the service, their relatives and staff. Four completed staff questionnaires were returned, and five questionnaires from people who use the service. The questionnaires from people who use the service were completed by staff and will therefore not be used in this inspection report.

Registered care services are required to completed an Annual Quality Assurance Assessment (AQAA). The AQAA provides information about the home and its development. This form was completed by the manager and returned to us within the required timescales.

At this Key inspection we used a range of methods to gather evidence about how well the service meets the needs of people who use it. Some time was spent sitting with residents in the lounge watching to see how residents were supported and looked after. These observations were used alongside other information collected to find out about the care they get from staff. We also looked at the environment and facilities provided and checked records such as care plans and risk assessments.

There were 5 people in residence on the day of our inspection. Two people using the service were identified for 'case tracking'. This is a way of inspecting that helps us to look at services from the point of view some of the people who use them. We track people's care to see whether the service meets their individual needs.

Our assessment of the quality of the service is based on all this information plus our own observations during our visit.

Throughout this report, the Care Quality Commission will be referred to as 'us' or 'we'.

At the end of the visit we discussed our preliminary findings with the manager of Hancox Close.
What the care home does well:

People who are considering moving into the home benefit from having their care needs assessed so they can be sure the home can meet their needs.

People are supported in a respectful manner and their personal care needs are met. Staff are knowledgeable about the people who use this service. They have a good understanding of their roles and responsibilities.

Care plans demonstrate a person centred approach to care planning, to reflect the quality of care being provided and ensure consistency of care. Person centred care ensures people who use the service are at the centre of their care treatment and support by staff should be carried out whilst ensuring that everything that is done is based on what is important to that person from their own perspective.

A lunchtime meal was observed and staff were seen to sit with residents and give help where needed in such a way that maintained the residents dignity and safety.

People are supported to gain access to advice from health professionals where they need it so their health needs can be met.

The service provides daily in-house activities. This provides people who live there the opportunity to participate in their interests and preferences both within and outside of the service.

Good medicine management helps ensure people using the service are given their prescribed medicines correctly to promote their health and well being.

Visitors are made welcome which supports people to maintain enduring relationships.

The agency has an induction and training programme for staff which should lead to people’s needs being met by a competent workforce. All aspects of the recruitment procedures are managed well. This ensures protection of people using the agency.

There is a quality assurance system in place that includes direct contact with people to review the quality of the service provided.

The home has a complaints policy in place. Staff were aware of how people with limited verbal communication make their needs known. At the time of this inspection we had received no complaints.

What has improved since the last inspection?

Work has been undertaken to redecorate areas of the home. Further work is planned to continue with the home's redecoration.

Care plans and risk assessment have been reviewed to provide up to date information on the needs of the people who live there.

What they could do better:

At this inspection a three requirements have been made.
One requirement is in relation to health and safety fire practices at the home.

Alternative arrangements need to be made for staff facilities to ensure the respect and dignity for all people who live at the home are maintained.

The manager needs to ensure all aspects of risk are identified and actions taken to ensure risks are minimised.

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.

Information is provided for prospective users of the service and their families to help them to decide if the agency can meet their needs.

People can be confident that their individual needs will be fully assessed prior to being offered a service.

Evidence:

The home's Statement of Purpose was looked at as part of the inspection. This document clearly identifies the levels of service that could be offered to specific user groups. It was detailed, informative and reflective of the actual service being provided.

No new residents have moved to live at this service since the last inspection, therefore the pre-assessment process was not examined in detail as part of this inspection. The home currently has one vacancy.

On the day of the inspection the manager had made arrangements to visit a
Evidence: prospective resident of the service. The manager discussed the home's pre-assessment process, and explained that the home was at the information gathering stage of the process. We were provided with a social services assessment about this person and informed that this assessment, along with other information, will be used to help the service determine if it can meet this person's needs before any offer of placement is made. It was evident that the manager has given consideration to how this process will be managed and the impact a new resident will have upon existing residents at the home.
Individual needs and choices

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

<table>
<thead>
<tr>
<th>People’s needs and goals are met. The home has a plan of care that the person, or someone close to them, has been involved in making. People are able to make decisions about their life, including their finances, with support if they need it. This is because the staff promote their rights and choices. People are supported to take risks to enable them to stay independent. This is because the staff have appropriate information on which to base decisions.</th>
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<tbody>
<tr>
<td>People are asked about, and are involved in, all aspects of life in the home. This is because the manager and staff offer them opportunities to participate in the day to day running of the home and enable them to influence key decisions. People are confident that the home handles information about them appropriately. This is because the home has clear policies and procedures that staff follow.</td>
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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.

Personal health, social, communication, and emotional care needs are recorded and planned for in good quality care plans.

People are actively supported to make decisions and choices about their own lives.

Evidence:

Care plans of two residents were examined. These were good in providing detailed guidelines for staff in supporting the people who live there.

Each person living at the home has a care file. Care files were looked at case track both people's experience of the service. Care records include important background information about them, and identify their care needs with any support needed to meet them. The home's approach to care planning is appropriately person centred (PC) in that the plans focus on the preferences, skills, and goals of each person.

Particular care staff are allocated to every resident as their key worker and they take
Evidence:

specific responsibility for aspects of their care. They can provide some one to one support, and have a role in drawing up and reviewing their plans. This offers residents some individual attention and means key workers get to know them, their needs, likes and dislikes and so can advocate for them better.

Relevant risk assessments are carried out to promote each resident's safety. Risk assessments seen in care records sampled are recorded in a format that is personalised and comprehensive. When necessary, specific plans had also been put in place to manage particular behaviours in the best way, and to keep residents and other people as safe as possible whilst promoting their independence.

Records show a detailed understanding of each person's individual needs and how staff need to respond to minimise the risk occurring. For example, two people have swallowing difficulties, the risk assessment guides staff on how to minimise the risk of choking for each person. At lunchtime staff were seen to follow these guidelines when one person started to choke on their food. Staff responded immediately and appropriately in a calm way offering reassurance to individual. This person has a risk assessment in place relating to the risk of choking. Records also show that a Speech and Language Therapist has visited and developed a management plan for eating and drinking.

Residents are encouraged to make daily life decisions although for some this can be limited due to their disabilities. Staff were seen to show a high level of understanding and to try to offer them choices.

From discussion with staff and people's care plans, it was evident that people are encouraged to maintain and develop their independence. For example, one person at the home was observed attending to their own washing of clothes and hanging the clothes on the line outside this was done with minimal support from staff and occasion prompts when appropriate.

All the staff spoken with were enthusiastic and had a positive attitude on promoting people's independence. Staff receive training that covers respect, privacy, dignity, equality and diversity.

People met at the inspection were well dressed in appropriate clothing suited to the weather. One person spoken to told us 'I like it here', and agreed that all the staff were nice. For the people who live here who have communication difficulties staff were observed communicating effectively and respectfully.
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.

The people living in this home are supported to make choices about their lifestyle and to develop life skills. Daily activities promote independence and opportunity for people to live ordinary and meaningful lives in the community where they are living.

Evidence:

Activity planners were seen in individual care plans and showed that people do different things each day either in small groups or on a one to one basis with staff. From looking at the information in the care plans of the two people case tracked, it was evident that the activity planners reflected individual preferences.

Daily records looked at showed that during the week, activities to meet identified needs are regular, and support ordinary and meaningful lifestyles. There is evidence on care plans and in photographs that activities are wide and varied.
Evidence:

Daily records were looked at which showed that people had access to a range of activities such as going out to places of interest, including the shopping, swimming, going to such places as Stratford Butterfly Farm and Jephson Gardens in Leamington Spa. We were told that people have planned to go on holiday to Devon this summer.

The AQAA states 'family and relationships are maintained for the well being of the individual, actively encouraging trips out together and involvement in reviews'

Some of the people maintain links with their family. There was evidence in daily records that people's needs with regard to keeping in touch with friends and relatives had been recorded. Families are invited to attend people's reviews, and their views on the service have been sought through questionnaires in a recent quality audit. Comments given from the audit include, 'we are always very satisfied with the treatment and care the X was and still is receiving'.

Mealtimes are relaxed and unhurried. A lunchtime meal was observed and staff were seen to give assistance where needed and in such a way that maintained individual's dignity and safety. The lunchtime meals were very well presented and appeared appetizing.

Menus were sampled to establish that a balanced and varied diet is provided that meets people's needs and preferences. A range of food had been offered including Sunday roasts and other traditional English dishes that reflect the cultural needs of people living in the home. One person likes to make their own fruit juice drinks, staff have purchased a juicing machine to enable them to do so.

All food being stored in the kitchen looked fresh and was well within the use by date.
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 benefit from the consistency of care delivered by staff. Person centered care plans are in place to guide staff, this helps ensure care is provided in the way that meets with each person's own needs and preferences. Generally all residents benefit from their privacy and dignity being upheld. |
| People can be confident that their medication is stored and administered to them in a safe way. |

Evidence:

| Residents were all smart in their appearance, their clothes were clean and fresh and appropriate to their individual lifestyle and needs. Staff were heard to compliment people on their choice of clothing and appearance. |
| Residents receive personal support in the way they prefer and require as evidenced through observations during the inspection, discussions with staff, and examination of records. For example, on the morning of the inspection not all residents were up and dressed. Residents arose at varying times and made choices about where to have breakfast and what they wished to eat. |
Evidence:

Staff provide personal care in private, and were sensitive and discreet when supporting people with any aspect of their personal care and support.

The AQAA tells us that the service 'supports people in accessing healthcare from GP and Hospital services. Attending well lady/man clinics'.

During the inspection we found evidence in health records and care plans to show that people who live at this home have access to good quality physical and mental health care support. We read records that show that as part of promoting people's health, staff support individuals to access regular visits from the dentist, optician, specific health consultants, learning disability nurses, their GP, and a chiropodist when needed.

Since the last inspection one person who has lived at the service for a number of years passed away. This had a significant impact upon the staff and in particular one person who lives at the home. The manager and staff discussed the care provided to this person in their final stage of life, and how support was provided to other residents. The home continues to provide support to all residents following their loss. Comments from one professional from the home's quality audit questionnaires states 'terminal patients cared for on a one to one basis, and all needs met by staff as a priority'.

During the inspection we met with a physiotherapist. The physiotherapist spoke positively about the care and support provided by staff to two people she visits each week. We were told that both individuals have access to all the equipment they need to support them to move safely in the home, and staff have demonstrated their knowledge and ability to use the equipment appropriately. Another professional commented in the home's recent audit questionnaire 'staff are using correct manual handling procedures'.

The physiotherapist told us that staff are proactive in meeting people's needs and have demonstrated their ability to recognise a change in people's needs.

Records show that people who live here are having access to annual reviews of their care by social services. Information also shows that individuals are supported to participate in the meetings and other 'best interest' meetings. There are good communication plans in place to help staff understand what each person likes, dislike, wants or needs. For example, for one person when they shake their hands it means that they feel agitated. The communication plan tells staff 'come and talk to me and
Evidence:

try to settle me. If I am very agitated then leave me alone as I am not happy with you being with me'. Staff spoken to were able to discuss the approaches they use to support this person, information from staff reflected that in this person’s careplan. This shows that this person receives consistent support from staff.

One person was observed to hit themselves on the head. Records tell us that this is an indication that this individual may be unhappy. The care plan tells staff how they should respond when they observe this 'may need another staff to sit with me to try and distract me, place my blue helmet on to protect my face, try to distract me with a drink, if that doesn't work keep your distance so you don't come to any harm'. We saw staff responding consistently to this person actions through the inspection.

Concern about how one person's privacy and dignity is being managed was discussed with the manager. Female staff use this person's ensuite bathroom for staff toilet facilities. This means that staff need to go into this person bedrooms during the day or at night time to use the bathroom. This individual is unable to give their agreement for the use of the ensuite. The manager needs to look at alternative ways to ensure this person's privacy and dignity are upheld, whilst providing appropriate facilities for staff.

Another person was observed sitting in a recliner chair that was in a reclined position. This person appeared relaxed and calm whilst in the chair, and staff were available should this person need any help. Due to the position of the chair, we expressed our concern to the manager that this individual may not be able to get out of the chair should they wish to do so. There are no records maintained to show how the staff ensure that this person is not restrained in the chair. Following our discussions with the manager, a risk assessment plan was put into place for this person and another individual. This should guide staff on the use of the chair and minimise the risk of restraint.

Medication policies and procedures are good with medication being stored safely labeled correctly and administered safely. Staff spoken with said that they have received training in medication administration.

The pharmacist delivers medication in blister packs. The medication sheets show that the number of tablets received into the home so that they can be accounted for and that staff are signing for the medication given out. A suitable lockable cabinet is in place for the safe storage of medication at the home. The cabinet was well ordered. The temperature of the cabinet is being maintained to ensure medications are stored below the required 25 degrees.
Evidence:

The home currently carries no controlled drugs that would necessitate any special storage and recording arrangements. There are no drugs that need to be stored in the fridge.

The pharmacist delivers medication in blister packs. The medication sheets show that the number of tablets received into the home so that they can be accounted for and that staff are signing for the medication given out.

There are a range of policies and procedures in place relating to administration, covert practices, training and disposal of medication.
Concerns, complaints and protection

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

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 use this service can feel confident that they are safeguarded from abuse or harm. Staff training arrangements ensure training in safe working practice is regularly updated.

The agency has relevant policies and procedures in place to ensure health, safety and welfare is maintained for the people who use the service and for the staff who work in the service.

Evidence:

The complaints procedure 'Letting us know' was not available in the home at the start of the inspection. On request the manager arranged for a copy to be sent to the home for us to see during the inspection. The manager needs to ensure a copy of the complaints procedure is available in the home at all times, and should be clearly displayed throughout the service. This will help to ensure that people who use the service, staff and visitors have a clear understanding of how to make a complaint.

The AQAA and records seen during this inspection showed that there had been no complaints made about the home since the last inspection. We have not received any complaints or concerns about this service since the last key inspection. Staff spoken to were aware of the complaints procedure.

Staff were seen to be attentive to the needs of the individuals, using knowledge
Evidence:
gained from other professionals, the home's care plans, and their own experience of working with each person. We observed staff taking time to listen and observe signs and cues to ensure they understood people's views. Individuals who live at the home appeared relaxed with staff which may indicate that they feel safe.

There have not been any referrals made about matters that could affect the safety and welfare of the vulnerable adults living at the home since the last inspection. Required policies and procedures are provided to promote residents welfare and protect them which include multi agency procedures for the protection of vulnerable adults (POVA) recognising abuse and whistle blowing. Staff are expected to read all these documents and to sign a checklist confirming they have done so and that they understand and will adhere to them in their working practices.

The manager, team leader, and the staff team have received training on POVA procedures, and those spoken with are clear about their role and responsibility for safeguarding the vulnerable adults who live at the home. Relevant instruction is also part of the home's induction programme and the accredited training course for staff working with people who have learning disabilities LDAF which all new staff are expected to complete.

Staff were able to confirm that they had attended training related to the protection of vulnerable adults. Two members of staff were able to explain the action they would take if they saw abuse. Both answered appropriately.

As previously mentioned, one person was observed sitting in a recliner chair that was in a reclined position. This person appeared relaxed and calm whilst in the chair, and staff were available should this person need any help. Due to the position of the chair, we expressed our concern to the manager that this individual may not be able to get out of the chair should they wish to do so. There are no records maintained to show how the staff ensure that this person is not restrained in the chair. Following our discussions with the manager, a risk assessment plan was put into place for this person and another individual. This should guide staff on the use of the chair and minimise the risk of restraint.

Clear audit trails and financial management guidelines were in place for individual personal spending monies. Each person's money is checked on a daily basis and two members of staff are required to sign for each transaction undertaken. Monies checked during the inspection tallied with balances recorded and receipts available.
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.

People who live here benefit from a home that is well maintained and furnished so that people live in a clean, comfortable environment.

Evidence:

A tour of the building was undertaken at the start of the inspection. There is a warm and welcoming atmosphere in the home at the time of the visit.

The accommodation comprises of two self-contained bungalows next to each other. The impression obtained of them is homely and comfortable and that they are maintained, furnished and decorated to a good standard.

The home has carried out some redecoration of people's bedrooms and communal areas, this includes painting of walls and new carpets.

Residents bedrooms are well personalised to reflect their individual interests and needs including such as specialist beds, sensory lights and music systems.

One lounge has recently been redecroated with the help of one resident. Staff supported this person to go to IKEA to purchase new sofas and furniture for the home.
Evidence:

As previously discussed female staff use the ensuite bathroom facilities in one person’s bedroom. The manager needs to look at alternative arrangements to ensure this person’s privacy and dignity are upheld whilst providing appropriate facilities for staff.

One fire door was seen to be wedged open. This could create a risk to the people living and working at the home in the event of a fire. If doors need to be held open, appropriate devices linked to the fire alarm system and approved by the fire service need to be provided. This will ensure that the doors close automatically when the fire alarms sound preventing or delaying any spread of smoke and fire.

Both bungalows were found to be clean, tidy, warm, fresh and airy. Whilst most residents are not able to take an active part in household tasks staff clearly make sure that cleanliness and good hygiene are promoted and take pride in the bungalows.

The home has relevant policies and procedures in relation to infection control and health and safety. The laundry area has good systems of infection control. The laundry room is equipped with sufficient commercial equipment to manage the soiled laundry for the home and is satisfactory for the control of infection. The home also provides staff with disposable gloves and aprons and paper towels. Staff were observed to wears aprons and gloves when providing support with personal care.

All areas of the home were clean to a good standard. There is a choice of two lounges for people to relax in. Individual bedrooms are spacious for people to spend private time in the their room or with any visitors.

The home has been visited by Environmental Health prior to this inspection, the home has been awarded a Gold rating.

The kitchen was clean and well organised. Records were kept of the fridge and freezer temperatures showing appropriate temperatures to maintain good food safety.
Staffing

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

<table>
<thead>
<tr>
<th>People have safe and appropriate support as there are enough competent, qualified staff on duty at all times. They have confidence in the staff at the home because checks have been done to make sure that they are suitable. People’s needs are met and they are supported because staff get the right training, supervision and support they need from their managers.</th>
</tr>
</thead>
<tbody>
<tr>
<td>People are supported by an effective staff team who understand and do what is expected of them.</td>
</tr>
</tbody>
</table>

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 benefit from a well trained staff team who the knowledge and skills needed to carry out their job.

People who use this service are protected by robust recruitment procedures that have been consistently followed to ensure staff are suitable to work with vulnerable adults.

Evidence:

The total number of staff within the home is fifteen; this includes the post of a full time manager who hours are supernumerary.

The manager states that 9 members of care staff are qualified to National Vocational Qualification in Care Level 2 (NVQ level 2). This is above the national Minimum Standard for 50% of staff to be qualified. This should mean that residents benefit from having their needs met by staff that are appropriately experienced and qualified.

Pre-inspection information and the training chart in the home shows that staff have completed training in the full range of mandatory, health and safety related training, (e.g. medication, first aid, adult protection, food hygiene and fire safety) as well as specialist care courses, such as bereavement, epilepsy, and communication.
Evidence:

All staff receive regular individual supervision. Staff spoken to feel well supported by senior staff and management. It is also confirmed that staff meetings are held regularly. Brief records are kept of issues discussed in supervisions and meetings, with agendas and minutes taken. Staff clearly work together well as a team and there are good and open communication channels within the home. Two staff files were seen, they included all of the necessary documentation to demonstrate that the staff are suitable to work with people living at the home. They included CRB (Criminal Records Bureau) checks and two references.

Staff present during this inspection were able to answer our questions about meeting the needs of people who live in the home and have clearly got to know them well. Staff interacted with people, in a positive, relaxed and calm manner, being attentive to needs, no matter how expressed, and responding in ways that upheld their dignity and well-being.

The home does not have any domestic or catering staff. Care staff take on these duties during their shifts. All care staff are trained in food hygiene.

Staff spoken to were clear about their lines of accountability and were able to tell us who they would speak to if they had any queries.
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.

People benefit from being supported by a service that is consistent, well planned and managed.

Evidence:

The manager is well qualified to manage this service, and discussions with her show an open, positive and inclusive approach to management.

The service has access to equipment and resources to ensure the service runs efficiently for the benefit of the people of use this service. There is good and safe storage for records, and sufficient space and equipment such as telephones and computers to enable the manager and staff to conduct their duties efficiently.

There is evidence of evaluation systems that provide an opportunity to improve the service by consultation with people who use the service, their families, professionals, and staff. A questionnaire was sent to relatives, professionals and staff in March 2009. Each completed questionnaire was seen and all responses were positive.
Evidence:

The service manager visits Hancox Close on a regular basis to report on the standard of care provided of which reports are made available within the home. From the most recent reports, minutes of meetings and discussion with the staff team, it was evident that the views of people who live in the home had been actively sought with regard to the way in which the service is being run. We were told that there are regular house meetings so that people have an opportunity to discuss issues that are important to them, such as planning activities and menus.

The Annual Quality Assurance Assessment (AQAA) completed by the manager was completed to an adequate standard. Information provided could be better supported by a greater range of evidence. The Annual Quality Assurance Assessment (AQAA) informed us about the development of the service and future plans for improvement. During the visit staff appeared confident in their roles, the home was relaxed and the people who live here appeared at ease and comfortable.

Records show that there are regular staff meetings minutes are recorded. Information provided by the manager in the pre-inspection questionnaire indicates that relevant Health and Safety checks and maintenance are being carried out at the home. There are comprehensive policies and procedures in place. Risk assessments are also carried out in relation to the environment including for hazardous substances (COSHH). The AQAA confirms all necessary checks and servicing are being carried out by staff and or approved contractors including the fire safety system and equipment, electrical appliances, heating, hoists and other equipment. Accident and incident records are kept and notified appropriately to the Commission and relevant other agencies.

The personal monies of the two people were audited. The was able to demonstrate good and safe practices in the management of peoples monies. Monies are kept securely and accurate records of income and expenditure are kept. The audit of people’s personal monies was found to be correct.
Are there any outstanding requirements from the last inspection?

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<tr>
<td></td>
<td>Yes</td>
<td>No</td>
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</table>

### Outstanding statutory requirements

These are requirements that were set at the previous inspection, but have still not been met. They say what the registered person had to do to meet the Care Standards Act 2000, Care Homes Regulations 2001 and the National Minimum Standards.

<table>
<thead>
<tr>
<th>No.</th>
<th>Standard</th>
<th>Regulation</th>
<th>Requirement</th>
<th>Timescale for action</th>
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</table>
### Requirements and recommendations from this inspection:

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

<table>
<thead>
<tr>
<th>No.</th>
<th>Standard</th>
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#### Statutory requirements
These requirements set out what the registered person must do to meet the Care Standards Act 2000, Care Homes Regulations 2001 and the National Minimum Standards. The registered person(s) must do this within the timescales we have set.

<table>
<thead>
<tr>
<th>No.</th>
<th>Standard</th>
<th>Regulation</th>
<th>Requirement</th>
<th>Timescale for action</th>
</tr>
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<tbody>
<tr>
<td>1</td>
<td>18</td>
<td>13</td>
<td>The manager must ensure that arrangements are in place to safeguard people's privacy and dignity through the provision of appropriate staff toilets. This is to ensure that action is taken to protect people's privacy and dignity.</td>
<td>14/08/2009</td>
</tr>
<tr>
<td>2</td>
<td>24</td>
<td>23</td>
<td>Fire doors at the home must not be wedged open. If doors need to be held open, appropriate devices linked to the fire alarm system and approved by the fire service need to be provided. This will ensure the appropriate precautions against the risk of fire are in place.</td>
<td>09/07/2009</td>
</tr>
<tr>
<td>3</td>
<td>42</td>
<td>13</td>
<td>The manager must ensure that all areas of risk are identified, and appropriate plans in place to minimise any risk. This relates</td>
<td>30/07/2009</td>
</tr>
</tbody>
</table>
Statutory requirements

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<td>specifically to the use of recliner chairs.</td>
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<td></td>
<td>This is to ensure that people are not subject to inappropriate restraint.</td>
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</tbody>
</table>

Recommendations

These recommendations are taken from the best practice described in the National Minimum Standards and the registered person(s) should consider them as a way of improving their service.

<table>
<thead>
<tr>
<th>No</th>
<th>Refer to Standard</th>
<th>Good Practice Recommendations</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>22</td>
<td>A copy of the complaints procedure should be made available in the home at all times and should be clearly displayed throughout the service. This will help to ensure that people who use the service, staff and visitors have a clear understanding of how to make a complaint.</td>
</tr>
</tbody>
</table>
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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