



Making Social Care
Better for People

Inspecting for better lives

Key inspection report

Care homes for older people

Name:	Forget-me-not Residential Home
Address:	151 Burnham Lane Slough Berkshire SL1 6LA

The quality rating for this care home is:	two star good service
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A quality rating is our assessment of how well a care home, agency or scheme is meeting the needs of the people who use it. We give a quality rating following a full assessment of the service. We call this a 'key' inspection.

Lead inspector:	Date:
Denise Debieux	1 0 1 1 2 0 0 8

This is a report of an inspection where we looked at how well this care home is meeting the needs of people who use it. 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.

Copies of the National Minimum Standards – Care Homes for Older People 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 Commission for Social Care Inspection aims to:

- Put the people who use social care first
- Improve services and stamp out bad practice
- Be an expert voice on social care
- Practise what we preach in our own organisation

Our duty to regulate social care services is set out in the Care Standards Act 2000.

Reader Information

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Internet address	www.csci.org.uk

Information about the care home

Name of care home:	Forget-me-not Residential Home
Address:	151 Burnham Lane Slough Berkshire SL1 6LA
Telephone number:	01628668902
Fax number:	01628668902
Email address:	
Provider web address:	

Name of registered provider(s):	Mr Roger William Pell, Mrs Tania Pell
Name of registered manager (if applicable)	
Ms Shirley Elizabeth Fairley	
Type of registration:	care home
Number of places registered:	16

Conditions of registration:		
Category(ies) :	Number of places (if applicable):	
	Under 65	Over 65
old age, not falling within any other category	0	16
Additional conditions:		
Date of last inspection		

Brief description of the care home
Forget-me-not Residential Home is a care home providing personal care and accommodation for 16 service users aged 65 years and over. Mr R. W. and Mrs T. Pell privately own the home, which was opened in 1995. The two storey home is situated in a quiet road just off a main thoroughfare on the outskirts of Slough. All the home's bedrooms are single, and 7 have en suite facilities. There is a passenger lift. The home has a large, easily accessible garden.

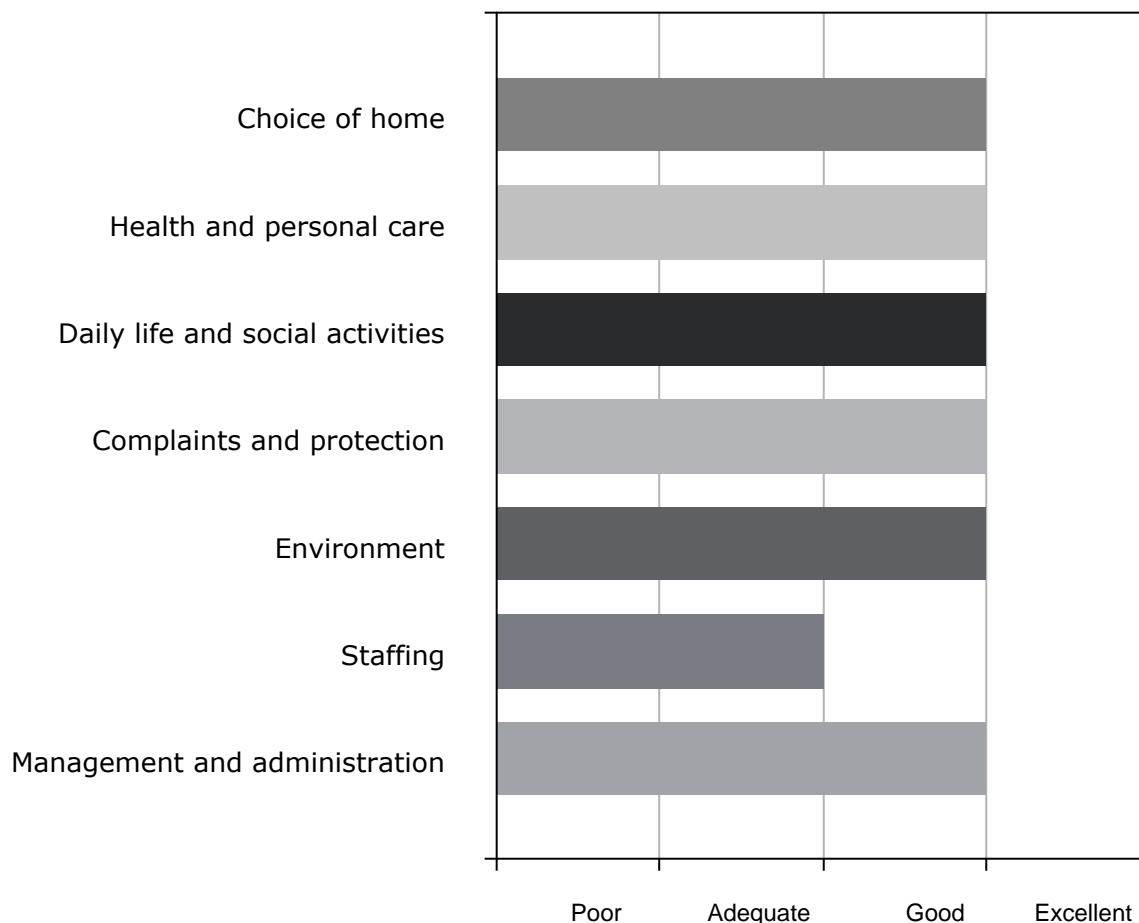
Summary

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

The quality rating for this care home is:

two star good service

Our judgement for each outcome:



How we did our inspection:

The Commission has, since the 1st April 2006, developed the way it undertakes its inspection of care services. This unannounced visit formed part of a 'key' inspection and was carried out by Denise Debieux, Regulation Inspector. Ms Shirley Fairley, Registered Manager and Mrs Tania Pell, one of the proprietors, were present as representatives for the service. It was a thorough look at how well the service is doing. It took into account detailed information provided by the manager and any information that CSCI has received about the service since the last key inspection on 8th November 2006.

Service users at this home prefer to be referred to as 'residents'. For clarity and consistency this term will be used throughout this report.

A tour of the premises took place. On the day of this visit the inspector spoke with six of the sixteen residents and three on duty staff. Prior to the inspection, survey forms were sent to the home for distribution to residents, staff employed at the home, care managers and GPs. Survey forms were returned by four residents, no other survey forms were received prior to the day of this inspection. These survey forms were correlated and the results were shared with the manager during the inspection. Comments made on the survey forms, both positive and negative, were included in the correlation and shared with the manager. Care was taken to exclude any comments that could identify the writer. The manager demonstrated a very pro active attitude to the results of our survey and plans to explore the results further as part of the home's quality assurance process. Some of the comments made to the inspector and made on the survey forms are quoted in this report.

The home had completed an annual quality assurance assessment (AQAA) and residents' care plans, staff recruitment and training records, menus, health and safety check lists, activity records, policies, procedures, medication records and storage were all sampled on the day of this visit.

The inspector looked at how well the service was meeting the standards set by the government and has in this report made judgements about the standard of the service.

Fees range from 495 to 525 pounds per week. This information was provided on 10th November 2008.

The inspector would like to thank the residents and staff for their time, assistance and hospitality during this visit and the residents who participated in the surveys.

What the care home does well:

The staff work hard to ensure that residents' needs are appropriately assessed and that their care is planned to ensure that these needs are met, whilst encouraging and enabling residents to maintain their independence where possible.

Residents spoken with expressed their satisfaction with their quality of life at the home. Comments received from residents included: 'It is a very happy place and the staff are wonderful and kind' and 'The staff are excellent and caring'.

All interactions observed between the management, staff and residents evidenced that the home has a close and caring staff team.

What has improved since the last inspection?

The ongoing maintenance, redecoration and refurbishment programme provides residents with a comfortable and homely environment in which to live.

The three requirements and seven recommendations made at the last inspection have been met.

What they could do better:

A requirement has been made regarding improving future staff recruitment procedures in order to protect the residents from the potential risk of harm or abuse.

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 set out on page 4.

The report of this inspection is available from our website www.csci.org.uk. You can get printed copies from enquiries@csci.gsi.gov.uk or by telephoning our order line -0870 240 7535.

Details of our findings

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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 and the support they need. People who stay at the home only for intermediate care, have a clear assessment that includes a plan on what they hope for and want to achieve when they return home.

People can decide whether the care home can meet their support and accommodation needs. This is because they, or people close to them, have been able to visit the home and have got full, clear, accurate and up to date information about the home. 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 them 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.

Each resident is only admitted to the home following a comprehensive needs assessment to ensure that the home can meet the resident's identified needs.

This home does not offer intermediate care.

Evidence:

In their AQAA the home described their admission procedure: 'On inquiry to the home, details of the prospective resident's needs is noted and Manager will assess, based on the verbal information supplied, if Forget me not has the facilities to meet prospective resident's needs. The home encourages prospective residents to visit and stay at the home for several hours, so that they can give their own opinion on whether the home is what they are looking for. During this stay, the manager assesses the prospective resident's needs to check that the home has the facilities, experience and staff to provide appropriate care. Information is also obtained from relatives, social worker, GP

Evidence:

and any other agency involved.'

Two care plans were sampled during this visit. In both cases comprehensive pre admission assessments had been carried out to ensure that the home could meet the residents' identified needs, prior to the person moving into the home.

Data provided in the home's AQAA does not identify any residents with specific religious, racial or cultural needs at this time. However, from the evidence seen by the inspector and comments received, the inspector considers that this service would be able to provide a service to meet the needs of individuals of various religious, racial or cultural needs.

Residents surveyed all felt they had received enough information prior to moving to the home. One resident commented that: 'The staff were very helpful, showed us around and how they operated.'

Health and personal care

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 health, personal and social care needs are met. The home has a plan of care that the person, or someone close to them, has been involved in making. If they 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. People's right to privacy is respected and the support they get from staff is given in a way that maintains their dignity.

If people are approaching the end of their life, the care home will respect their choices and help them 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.

Personal care and healthcare support and assistance is planned and was seen to be provided, where needed, in a respectful and sensitive manner. Policies, procedures and practices are in place to ensure the safe administration of medication.

Evidence:

The home has a small and close care team and the staff demonstrate an in depth knowledge of each individual residents' needs, abilities and preferences in how they wish their care to be delivered.

Of the four residents who returned survey forms three said they always receive the care and support they need and one resident answered 'usually'. One resident commented 'There is an understandable delay, sometimes, in answering my buzzer' and another that 'The staff are excellent and caring'.

The two care plans sampled during this visit were both based on pre admission assessments and had been drawn up shortly after each resident's admission to the

Evidence:

home. These care plans set out the actions which need to be taken by care staff to meet the health and personal care needs of the residents. Care plans are reviewed on a monthly basis and daily notes are kept that reflect the care given. The daily notes demonstrated that any changes or new concerns are promptly acted upon and newly identified needs are added to the care plans. The care plans also included risk assessments relating to falls, skin condition and nutrition. At the last inspection it was recommended that residents' risk assessments be developed to include more specific information for staff. It was seen that this recommendation has been met.

The proprietor explained that they are currently reviewing and improving their care planning system and are in the process of developing individualised activity/social care plans for each resident.

Care planning training sessions were seen to be scheduled for all staff over the next few weeks with the aim that all staff will gain confidence and become more involved in planning, updating and reviewing care plans.

The lunchtime medication round was observed and the medication administration records, medication storage, policies and procedures were all sampled and found to be in order. The home have also introduced a stock control system for 'as needed' medication, meeting a recommendation made at the last inspection. The manager is aware of the new legislation relating to the storage of controlled drugs in care homes and plans to double check that their current storage arrangements still meet the requirements of the new legislation.

In the AQAA, to demonstrate what the home does well, the manager stated that: 'Personal care is provided according to resident's needs and preferences. We respect their preference of time to get out/retire to bed and personal care is provided in a friendly, unrushed manner. Each resident is encouraged to maintain their independence and staff will provide assistance where needed. Appropriate aids and equipment are provided to encourage maximum independence, however, staff remain observant to offer assistance where needed.'

During the tour of the home staff were observed to always knock before entering the residents' bedrooms and all interactions observed between staff and residents were seen to be caring and respectful.

All residents spoken with felt that their privacy was always respected.

Daily life and social activities

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 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. They are as independent as they can be, lead their chosen lifestyle and have the opportunity to make the most of their abilities. People have nutritious and attractive meals and snacks, at a time and place to suit them.

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 provides a varied activity programme that includes contact with the local community both within and outside the home. Contacts with family and friends are encouraged.

Meals are well balanced and varied with individual choices and preferences catered for.

Evidence:

The routines of daily living are arranged to suit individual resident's preferences and choices. This was confirmed by residents spoken with.

The activity programme was sampled at this visit. In their AQAA the manager stated that: 'A weekly activity timetable is provided for all residents and they are reminded and offered each day to participate. All staff respect residents' wishes to decline to participate. Activity timetable is drawn up with the current individual interest at the forefront, also taken into consideration is the time of year and local and national celebrations. For example: Olympics, summer carnival etc. Residents are offered to participate in local clubs such as the Monday Club and local events: Spring Night Out, Dance show at the West Wing. Residents feel part of the community as we have visits from Brownies, schools, Monday Club members, PAT dog and local choir.'

Evidence:

Two of the four residents who returned survey forms stated that there were always activities they could participate in, one answered 'usually' and one left this answer blank. As discussed in the previous section of this report, the home are in the process of developing individualised activity care plans for each resident.

Residents' individual rooms were all seen to contain many personal possessions which were arranged to suit their individual wishes.

There are no restrictions to visiting times and staff support and encourage residents to maintain family links and friendships inside and outside the home.

Menus sampled showed that the home offers a varied and well balanced menu, with residents able to choose alternatives if they do not want the dish that is on the menu on the day. The lunchtime meal was taking place during this visit, the food was well presented, there was a family atmosphere in the dining room with staff eating with the residents and offering assistance where needed or requested.

In the AQAA, to demonstrate what the home does well, the manager stated that: 'Residents are encouraged to participate in decisions running the home, such as meals, activities and being involved in choice of decoration for communal rooms. Most residents enjoy eating meals in the dining room, which has a comfortable relaxed atmosphere and tables are adorned with colourful flowers from the homes' garden. For those who have difficulty cutting, chewing or swallowing food, staff provide assistance discreetly and sensitively.'

Of the four residents surveyed, all said that they usually liked the meals at the home. One resident commented: 'The food is excellent and plenty of it. All home cooked.'

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. Any concern is looked into and action taken to put things right. The care home safeguards people from abuse and neglect and takes action to follow up any allegations.

People's legal rights are protected, including being able to vote in elections.

This is what people staying in this care home experience:

Judgement:

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

The home has a simple, clear and accessible complaints procedure which includes timescales for the process. Policies and procedures are in place to protect residents from potential harm or abuse.

Evidence:

The home has a complaint's procedure in place that is available to all residents and their relatives and is also included in the residents' guide. No complainant has contacted the Commission with information regarding a complaint or allegation made to the service since the last inspection. All residents surveyed said that they always knew who to talk to if they were not happy, with one resident adding that: 'We discuss between us any problems and they are sorted out promptly' and another that: 'I can speak to any of the staff but I have to say everyone is very kind.'

There is a whistle blowing policy in place and the home have a copy of the latest Berkshire Safeguarding Adults Policy and Procedure. Training in safeguarding adults is included in the home's staff induction. The training log showed that all staff have had safeguarding adults update training this year, meeting a recommendation made at the last inspection.

In the AQAA, to demonstrate what the home does well, the manager stated that: 'We encourage people to provide views of their experiences, especially if they are not

Evidence:

happy with the service provided. We take complaints seriously and like to deal with them quickly. Complaints are logged and dealt with efficiently and confidentially. All staff are trained in Safeguarding Adults and whistle blowing policy.'

All residents spoken with said that they felt safe at the home with one resident adding 'very' and another commenting 'I feel very safe here.'

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, 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.

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 location and layout of the home and gardens are suitable for their stated purpose. An ongoing maintenance and redecoration programme provides the residents with clean, pleasant and homely surroundings in which to live.

Evidence:

Residents spoken with expressed their satisfaction with the accommodation provided at the home. Residents surveyed all said that the home was always fresh and clean with one residents adding: 'They do their very best to keep the home clean and tidy.'

The home was toured during this visit. Communal areas were all well presented and a number of residents commented on the new carpeting in the lounge that they had helped to choose. The residents' bedrooms seen had been personalised to suit each individual resident's wishes. The maintenance and redecoration programme for the home was seen to be ongoing. Since the last inspection there have been a number of improvements, in their AQAA the manager stated that they have: 'Redecorated upstairs hallway, replaced lighting and curtains. Redecorated and replaced carpets in vacant rooms. Replaced flooring in laundry room. Replaced flooring in en suite toilets for ease of cleaning and infection control.' The new carpet in the communal areas and the replacement of the laundry flooring means that a requirement and recommendation made at the last inspection have been met.

Evidence:

Laundry facilities are sited on the ground floor. The manager stated that, at present, the home have no need for washing machines with sluicing facilities and have not needed to replace their washing machines, for this reason a recommendation from the last inspection has been removed. The manager described the current procedure followed if any 'accidents' occur and, in discussion, agreed to seek advice to ensure that their current practice is in line with recognised best practice guidance and recommendations for infection control.

On the day of this visit the home was found to be warm and bright with a homely atmosphere and a good standard of housekeeping apparent.

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 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 to care for them. Their needs are met and they are cared for by staff who get the relevant training and support from their managers.

There are no additional outcomes.

This is what people staying in this care home experience:

Judgement:

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

The numbers and skill mix of the staff meets residents needs. Current staff recruitment policies, procedures and practices do not meet the requirements of legislation and are potentially placing residents at risk of harm or abuse.

The home has a staff training programme which is designed to ensure that service users are supported by competent and qualified staff and that, as far as reasonably possible, they are protected from harm.

Evidence:

The current staff group consists of the manager, one senior carer and ten carers. The staff rota evidenced that staff are provided in sufficient numbers to meet the needs of the residents at the home. The day (8am to 4pm) shift is covered by two carers plus the manager, two carers plus a carer's assistant cover the afternoon/evening shift (4pm to 10pm) and the night staff consists of one waking carer with the manager and proprietor on call if needed.

Of the four residents who returned surveys, two stated that staff are always available when needed and two answered 'usually'. One resident commented that: 'They are always there to help.'

Of the eleven care staff, ten hold a National Vocational Qualification (NVQ) level 2 in

Evidence:

care.

The home have an established staff team and low staff turn over. During this visit the files of the two most recently recruited carers were sampled. Both files were seen to contain proof of identity and a completed application form. One file did not have a recent photograph, only had one reference and there was no evidence that enhanced Criminal Record Bureau (CRB) and Protection of Vulnerable Adult (POVA) list checks had been obtained. The manager and proprietor were unaware of new regulations that came into force in July 2004 and had not been verifying applicants' reasons for leaving previous employment with vulnerable adults; had not been obtaining full employment histories and there was no written explanation of gaps in employment.

A copy of the amended Schedule 2 of The Care Homes Regulations 2001 (detailing new recruitment checks and documents required) was explained to and left with the manager and provider and copies of the CSCI guidance documents that fully explain the amended requirements relating to recruitment and staff supervision were left at the home.

It is positive to note that, on the day following this inspection the provider contacted the inspector via email and confirmed that they had now located all missing information and had obtained full employment histories for both members of staff. The provider also confirmed that they had checked all files for staff employed after the new regulations came into effect in 2004 and that all files now contained the required Schedule 2 information. The inspector was advised by the provider that they have amended their application form and reference request letters and devised a recruitment checklist to ensure that all future recruitment complies with the new Schedule 2 of The Care Homes Regulations 2001. the home need to review their policies and procedures relating to future staff recruitment and a requirement has been made.

Staff induction is in line with the new, mandatory Skills for Care common induction standards and the inspector was advised that staff are supervised until they have completed their induction, although the manager and proprietor were not aware that the requirements for staff supervision during induction had been substantially amended with the new regulations discussed above. These amendments are fully explained in the CSCI guidance documents left at the home.

The training log sampled evidenced that staff have received all mandatory safe working practice training and updates and that staff are provided with additional training to enable them to meet the needs of the residents living at the home.

Evidence:

In the AQAA, to demonstrate what the home does well, the manager stated that: 'Staffing levels are good to ensure the good levels of service, however, we are currently reviewing staffing levels to coincide with the changing needs of residents. The Proprietor and Manager support all staff including night staff by being available on call for any emergencies. Training is provided in house and is performed according to the changed needs of the residents and to ensure that staff are competent and confident in providing the necessary care and understand resident needs.'

All residents who returned survey forms said that the staff always listen and act on what they say.

All interactions observed between the management, staff and residents evidenced that the home has a close and caring staff team.

Management and administration

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 led and managed appropriately. People control their own money and choose how they spend it. If they or someone close to them cannot manage their money, it is managed by the care home in their best interests. The environment is safe for people and staff because appropriate 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. The people staying at the home are safeguarded because it follows clear financial and accounting procedures, keeps records appropriately and ensures their staff understand the way things should be done. They get the right care because the staff are supervised and supported by their managers.

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.

Residents benefit from the clear management approach at the home providing an open, positive and inclusive atmosphere.

The home has an effective quality assurance and monitoring system in place that is based on seeking the views of the residents.

Policies and procedures are in place to protect residents' financial interests.

All policies, procedures and practices are in place to ensure, so far as is reasonably practicable, the health safety and welfare of residents and staff.

Evidence:

The manager is currently undertaking her Health and Social Care NVQ level 4, which leads into her Registered Manager's Award (RMA) training and expects to have completed her RMA in about twelve months time. This meets a recommendation made at the last inspection. Her management style is inclusive and the residents benefit from the ethos, leadership and clear management approach of the home.

Evidence:

The home has an effective quality assurance and monitoring system in place that is based on seeking the views of the residents and their relatives. The inspector was advised that the home carry out yearly resident and relative surveys, correlate the responses and then formulate an action plan to address any issues that are raised. The recent quality assurance report from July 2008 was seen at this inspection and showed the improvements the home have made, based on the findings of their survey.

Policies and procedures are in place to protect residents' financial interests. The manager stated that the home does not handle the financial affairs for residents.

At the last inspection requirements were made that the kitchen fire door be repaired and that the COSHH cupboard be kept locked. Both these requirements have been met. A recommendation was also made that advice should be sought from the local fire officer regarding identifying a suitable hold open device for the kitchen fire door. On the tour of the home a heavy weight was seen to be propping this door open, the inspector was advised that this is for ease of access for three service users who have to enter the dining room through this door. On the recent fire assessment carried out by the proprietor, this had also been identified as a risk. When the use of the weight to prop the fire door open was questioned by the inspector, the manager immediately removed the weight and advised that she will make sure the door is never propped open in future. The inspector was advised following the inspection that there is now a sign on the door saying that the door must be kept shut at all times and all staff have been advised.

The home now provide paper towels in the laundry area but it was noted that paper towels are not provided in all staff hand washing areas, this was discussed with the manager who is going to seek advice on the current guidelines for staff hand washing facilities, to ensure that the home complies.

Health and safety monitoring check sheets were sampled and found to be well maintained and up to date. All staff have received required safe working practice training and updates. Staff were observed to be following appropriate health and safety practices as they went about their work.

In the AQAA, to demonstrate what the home does well, the manager stated that: 'Staff follow infection control procedures and are monitored. Some staff have commenced infection control distance learning training and have made suggestion to improve infection control. Changes have been made. Temperatures of food stored and heated are logged and are within required levels. Any urgent safety matters are dealt with promptly.'

Evidence:

All interactions observed between the staff and residents were inclusive, caring and respectful.

One resident commented on their survey form that: 'It is a very happy place and the staff are wonderful and kind.'

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
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Requirements and recommendations from this inspection:

Immediate requirements:

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

No.	Standard	Regulation	Requirement	Timescale for action
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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.

No.	Standard	Regulation	Requirement	Timescale for action
1	29	19	<p>The registered person must ensure that the home's recruitment policies, procedures and practices are amended to comply with the requirements of the Care Homes Regulations 2001 as amended by The Care Standards Act 2000 (Establishments and Agencies) (Miscellaneous Amendments) Regulations 2004.</p> <p>In order to protect the residents from the potential risk of harm or abuse.</p>	10/12/2008

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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Helpline:

Telephone: 0845 015 0120 or 0191 233 3323

Textphone: 0845 015 2255 or 0191 233 3588

Email: enquiries@csci.gsi.gov.uk

Web: www.csci.org.uk

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