



Making Social Care  
Better for People

Inspecting for better lives

# Key inspection report

## Care homes for older people

<b>Name:</b>	Eastfield House
<b>Address:</b>	Eastfield Lane Whitchurch on Thames Oxfordshire RG8 7EJ

The quality rating for this care home is:

three star excellent service

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.

<b>Lead inspector:</b>	<b>Date:</b>
Delia Styles	2 6 0 2 2 0 0 9

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](http://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](http://www.tso.co.uk/bookshop)

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- 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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## Information about the care home

Name of care home:	Eastfield House
Address:	Eastfield Lane Whitchurch on Thames Oxfordshire RG8 7EJ
Telephone number:	01189842586
Fax number:	01189842179
Email address:	eastfieldhouse@majesticare.co.uk
Provider web address:	

Name of registered provider(s):	Eastfield House Limited
Name of registered manager (if applicable)	
Mrs Mary Bayliss	
Type of registration:	care home
Number of places registered:	27

Conditions of registration:		
Category(ies) :	Number of places (if applicable):	
	Under 65	Over 65
old age, not falling within any other category	0	27
Additional conditions:		
The maximum number of service users to be accommodated is 27		
The registered person may provide the following quality of service only: Care home only (PC) to service users of the following gender: Either whose primary care needs on admission to the home are within the following category: Old age, not falling within any other category (OP)		

Date of last inspection								
Brief description of the care home								
<p>Eastfield House is situated in the village of Whitchurch-on-Thames. The home is registered to provide personal care for 27 male and female service users aged 65 years and over. District nurses visit the home to provide nursing care.</p> <p>Communal space comprising two lounges and a separate dining room is located on the ground floor. Bedroom accommodation is situated on the ground and first floors and there are also five flats for independent living in the grounds of the home. Room sizes</p>								

### Brief description of the care home

and amenities are listed in the homes Statement of Purpose and Service User Guide. A good range of activities is provided and regular trips to places of interest are arranged. The gardens surrounding the home are well maintained and provide extremely pleasant outdoor amenities.

The current fees for this home range from 500 to 750 pounds per week.

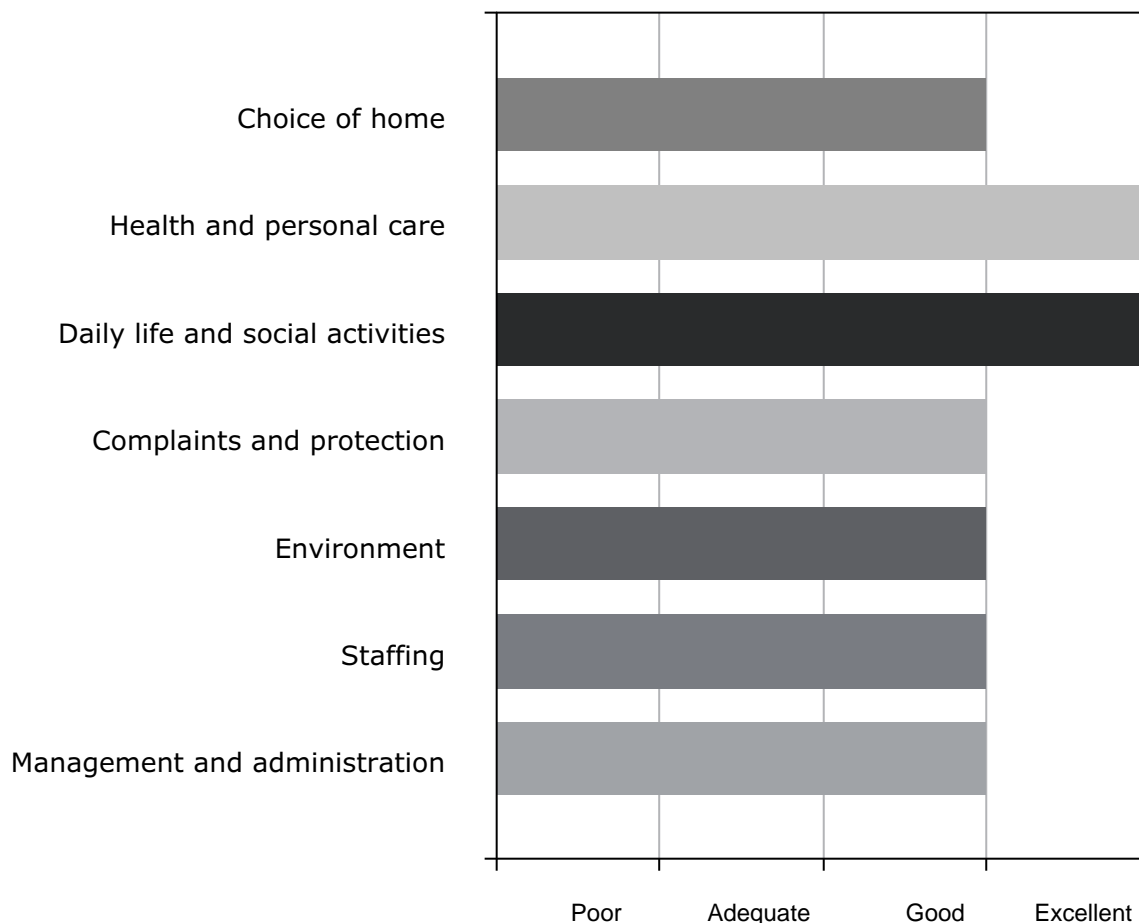
## Summary

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:

The inspection visit took place over 6 hours and was a thorough look at how well the service is doing. We took into account detailed information provided by the homes manager in the form of the Annual Quality Assurance Assessment (AQAA) - a self-assessment and summary of services questionnaire that all registered homes and agencies must submit to the Commission each year; and any information that the Commission had received about Eastfield House since the last inspection.

A tour of the building, and inspection of a sample of the records and documents about the care of the residents and the recruitment and training of staff, were part of the inspection. Talking with a number of residents and staff gave us information about the home and people's opinions about what it is like to live here. We sent some of our

questionnaires (surveys) to residents, relatives and visiting health and social care professionals. Completed surveys from 5 residents, 6 relatives, 1 health care and 1 social care professional were received and taken into account when writing this report.

At the end of the inspection, feedback about our findings was shared with two managers from Majesticare company who was also visiting the home and the registered manager, Mary Bayliss.

We would like to thank all the residents and staff for their welcome and the time taken to help us with the inspection process and to the residents and relatives who completed surveys.

## What the care home does well:

This home provides a comfortable, clean and homely environment for the people who live here. The gardens and grounds are well kept and offer an attractive outdoor space for residents to enjoy.

People especially commented on the friendliness and 'family atmosphere' For example - 'This is a home, not a Home. Friendliness excellent' 'There is always a happy atmosphere at Eastfield House' 'Good staff relationships with each other and the residents (also includes friends and relatives)'.

The staff team work well together and there is a commitment to training and development so that residents benefit from good continuity of care and support from skilled staff. Survey comments included - 'Most of the staff have worked at Eastfield House for a number of years...there is no doubt they have the right skills and experience' 'I note that in-service training is an important feature of support to all staff'

The home provides a good range of activities and opportunities for people to be involved in meaningful and enjoyable hobbies and social events - 'Visits to local shopping areas, cultural and recreational centres is an important feature of the weekly activities of the care home' 'Activities provided are excellent keeping people stimulated' 'Helping residents to obtain a good quality of life'.

Peoples individuality and independence are respected by staff-  
'(the home) tries to keep them (residents) independent'  
'(people) have the freedom to live in a style they wish'  
'Care to residents is kindly but not intrusive'

## What has improved since the last inspection?

The standard of record keeping has improved so that people's care plans are written in enough detail to give staff the information they need to provide the care and support that meets each individual resident's preferences.

The home has continued to improve the range of training and development opportunities for staff. Ninety per cent of the care staff now have achieved the nationally recognised qualification in care that is the expected training standard.

Prompt action was taken by the home to address the requirements and recommendations made at our last inspection.

More links with the local community and social events have been arranged so that residents can have additional opportunities to go out, and to invite their families and friends to meals and gatherings in the home.

The home has appointed a maintenance manager who is available on site so that routine maintenance and repair jobs are done promptly and the records of safety checks are up to date.

There is a regular and thorough audit of the quality of care and environment that means any problems are quickly identified and can be put right. Development of the computer systems in the home has helped the manager to complete the audits effectively.

**What they could do better:**

The manager and staff work well together and there is good communication with residents and their families so that suggestions for improvements are readily shared and action taken to follow them up. Our observations and surveys we received support one relative's view that 'this home continually strives to improve'.

We have made just one recommendation for improvement and that relates to the information we require that the home sends us each year - the Annual Quality Assurance Assessment (AQAA). The most recent AQAA (November 2008) self-assessment section gives only a brief picture of the current situation in the home with little supporting evidence or detail about how they have improved and intend to improve in the next year. The AQAA should be completed as fully as possible giving clear relevant information so that we know about the changes the home has made and showing that they are aware of where they still need to make improvements.

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.cqc.org.uk](http://www.cqc.org.uk). You can get printed copies from [enquiries@cqc.org.uk](mailto: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 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.

Prospective residents care needs are assessed before they come into the home, so that they can be confident that the home will suit them and provide the level of care they need.

Evidence:

The pre-admission assessments for three of the most recently admitted residents were examined. The manager visits prospective residents in their homes or in hospital (if they have needed hospital treatment) to assess whether the home can meet their care needs. Information from other health and social care professionals is also taken into account.

The assessment information was detailed and included a 'life history' that gives a picture of people's interests and preferences about the way they wish to be supported and the help they may need from staff.

## Evidence:

Four of the 5 residents who completed our survey said they had received enough information about the home before they moved in to help them decide if it was the right place for them. One person said they had not received information, because they came straight from hospital but they were pleased with the choice and 'soon picked up after coming here'.

The homes Annual Quality Assurance Assessment (AQAA) tells us that they have created a photograph album which consists of the history of the home and a directional guide illustrated with coloured photographs, to show prospective residents when they visit to assess them.

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

Since our last inspection the standard of record keeping about peoples care and support needs has improved. The health and personal care that people receive is based on their individual needs. The principles of respect, dignity and privacy are put into practice.

Evidence:

A sample of 3 residents care records was examined. These were well organised in individual indexed files for each person. The improvements we recommended at our last inspection have been acted on. The standard of the care plans are good, with clear information for care staff about the care and support needs of each person. A 'care plan access' form is signed by the resident or their representative, and shows that they are involved in drawing up their care plans and have agreed to 'authorised' people such as staff, having access to the information in them.

There was good evidence that risk assessments - for example, peoples risk of falls, nutritional problems or developing skin damage (pressure sores) - are carried out and

## Evidence:

repeated at regular intervals. Action is taken if assessment indicates that the person is 'at risk'.

All care plans are reviewed at least monthly and a total review and evaluation is done every 3 months. Care staff maintain a 'tick list' record of personal care and write a daily record about the care and support they have provided during their shift. The care plans seen were up to date and showed that where a resident's care needs have changed, prompt medical attention and advice has been sought and the care plans amended to add any new information. The standard of the social care plans and evaluation are particularly good and showed that attention is given to how well the social and psychological care needs of residents are met.

The responses to our surveys showed that people are satisfied that they receive the care and support they need. All 6 of the family members who completed surveys are satisfied that the home meets the needs of their relative in ways that they expect or agreed, and that the home keeps them informed about any important issues affecting them.

A GP who completed our survey was positive about the skills and level of care that staff provide for the people living here - staff 'always' seek advice and act upon it to manage and improve individuals' health care needs, and individuals' health care needs are 'always' met by the care service.

The home has a 'key worker' system so that each resident has a named carer who is responsible for making sure that their care plans are updated and that the person receives the care and support agreed. A photo and the name of the staff member is displayed in the resident's room.

In practice, care staff are allocated to different residents on a daily basis so that the up to date information about each resident has to be written in their care records, as well as staff using the verbal handover report at the change of shifts to share information. We consider that the home has improved the written records since our last inspection, so that everyone has accurate and detailed information about what they need to do to carry out the planned care.

The home has policies and procedures in place for the safe management of medication. Where a resident wishes to store and manage their own medicines they are encouraged to do so, subject to a risk assessment that they can do so safely.

At our last inspection we made recommendations about improving the way residents Medicine Administration Record (MAR) charts are completed, especially where

## Evidence:

residents have prescribed ointments and creams, or have a variable dose of a medication. The home has acted on our recommendations.

The homes procedures for the receipt, storage, administration and disposal of prescribed medicines were looked at and are well managed. A sample of the MAR charts of 3 residents was checked and were found to be correctly completed and up to date. the home undertakes its own internal audit of medicines to ensure that all care staff continue to follow the homes policies and procedures correctly to protect residents from potential harm from drug errors.

Staff have the required training in safe medicines administration before being authorised to give residents their medication. The home manager confirmed that the most recently recruited member of care staff was undertaking a 'Medication Awareness' course.

From observation during the inspection, conversation with residents and the written survey comments, it is clear that people living here feel that they are treated with respect and that staff listen to them and act upon what they say. Comments received included -

'I have never witnessed anything other than sensitive care for all residents'

'The care staff encourage residents to be as independent as possible'

'Care to residents is kindly but not intrusive'.

We consider that the home would be able to provide a service to meet the needs of individuals of various religious, racial or cultural backgrounds.

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

There is a good range of activities within the home and community so that residents have the opportunities to join in social and recreational events that interest them. The residents enjoy meals and mealtimes and menus offer choice and variety.

Evidence:

The home employs an activities organiser who works between 10 am and 4 pm each weekday. From conversations with the activities organiser, residents and other staff, it is clear that the social and recreational aspects of residents care are given high priority. There is a varied programme of activities and entertainments that appear to suit the needs of most residents. Four out of the 5 residents who completed a survey answered that there are always activities arranged by the home that they can take part in and one person answered that this is usually the case.

The home has the use of a minibus (shared with two other homes owned by the same company, Majesticare) and residents have regular opportunities to go shopping and to visit local garden centres and places of interest.

Residents are regularly consulted about the types of outings and activities they would

## Evidence:

like and it is evident that the activities coordinator and staff team do a good job in arranging opportunities for individual and group activities.

Since our last visit, the home has made further progress in the range of outside activities and contacts with local groups and organisations to encourage more social opportunities for residents. The home links with local churches, tea dances, Bingo trips, talks held in the village hall. Residents have enjoyed trips to the Pantomime, theatre and the Rain Forest.

In the week that this inspection visit took place, a group of residents had been invited to the nearby primary school to have lunch with the children - an occasion that was clearly very much enjoyed and residents said they hope will be repeated.

Since our last inspection, the home has started a supper club - about four times a year, residents invite their family members to dine with them. This has proved to be an enjoyable and social occasion for all involved.

A new wall mounted large screen TV has been provided to improve the enjoyment of residents with visual impairment. Large size Scrabble boards have enabled more residents to enjoy playing this game and a Scrabble club has been started. Another innovation has been the purchase Wii equipment for residents to enjoy playing games on.

The social and recreational life of the home is seen as having a very positive effect on the well being and quality of life for people living here. Almost all the people who completed our surveys highlighted this as one of the things the home does well. Comments included - 'They encourage the residents to take part in all activities provided eg. trips out, games, craft making and entertainment' 'Provides activities for the residents. Visits to local shopping areas, cultural and recreational centres is an important feature of the weekly activities of the home' 'Activities provided are excellent, keeping people stimulated' 'Offers lots of extras, such as activities, church services, singing' 'I think they do well with activities, keeping the residents minds stimulated. Also with exercises to keep them mobile. They never just leave them watching TV. There are always different activities each week to suit everybody's different likes and dislikes'.

The activities coordinator organises a small trolley shop stocked with items requested by residents (toiletries, sweets, etc) and bought and sold at cost price to residents.

All of the current residents have a Christian faith background. Links with local churches and social events are advertised in the home. Residents, who wish to and are able,

## Evidence:

attend the local church services. Local clergy visit the home regularly and offer a regular service of Holy Communion for those (of any Christian denomination) who cannot go out to a place of worship.

Conversation with residents, and their written responses to questions about meals in the residents comment cards, confirmed that the quality and variety of meals is good. Two of the 5 residents who completed a survey questionnaire stated that they always like the meals and the remaining 3 that this is usually the case.

The standard of the environment in the dining room is also regularly checked as part of the homes own quality audit. The dining room is attractively decorated and the dining tables (each seat up to four residents) are set with linen tablecloths and napkins, small flower vases, cruets and condiments.

Residents are asked for their opinions and suggestions about menu choices. People spoken with during the inspection said that the manager and cooks do take note of their requests and change the menus. One of the main course dishes was a chefs special - the chef had prepared a dish with lamb and a cheese sauce topping and residents gave their opinions and said whether they would like to have this on the menu again.

## 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.

Residents feel safe and listened to. There are safeguarding systems in place and staff understand and implement the homes procedures.

Evidence:

Comment cards we received showed that people know how to make a complaint and who to speak to if they are not happy. Most people said they had had no cause to complain. One person wrote that they have had a good response to any concerns raised with the home although these have been few and their relative has certainly not expressed any.

Several comments emphasised peoples satisfaction with their care and support and sense of safety that they have living here.

'The care staff encourage residents to be as independent as possible. There is always a happy atmosphere at Eastfield House' 'It has always been a very friendly and happy house'.

The homes complaints procedure was on display on the doors of residents rooms, in the reception area, and is included in the Service User guide booklet.

The home manager confirmed that they have not received any complaints, and the

Evidence:

Commission has not been informed of any concerns complaints or allegations about the home.

All staff have training in safeguarding of adults about how to notice the signs and indications of suspected abuse and report any concerns so that they can be followed up by the local authority that has the lead responsibility for investigating allegations. New care staff have training as part of their induction. Mandatory training includes safeguarding training and regular updates.

## 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 standard of decor and furnishings is good, providing residents with attractive and comfortable accommodation. Outside the gardens and grounds are well maintained and since our last inspection further improvements and features have been added for the enjoyment of residents.

Evidence:

The home is clean and smells fresh throughout. Residents rooms are well decorated and personalised with their own possessions and ornaments. Residents appreciate the good standard of cleanliness and the decor - 4 of the 5 people who completed our survey said that the home is 'always' fresh and clean, and 1 stating this is 'usually' the case. A relative commented 'This is a home not a Home. Cleanliness is excellent'.

A programme of maintenance and redecoration continues to improve the environment. The sash windows are being repainted and repaired and new window opening restrictors fitted.

A part-time gardener is employed and the gardens and grounds are very attractive. Since our last visit, a new fountain water feature and trellis fencing have been added.

The home uses a commercial laundry service for bed linen and towels. Residents

Evidence:

personal clothing is laundered in-house. The laundry facilities are not ideal, with washing machines in one small outhouse, driers in a garage area and a separate small room for ironing laundered clothes. The home owners are planning a new extension to the home that will include a new laundry facility. This will meet the relevant standards and improve the working environment for the laundry assistants.

## 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 **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 consistent staff team and there is a good system of training in place, so that residents benefit from care and support by reliable and skilled staff.

Evidence:

The home benefits from having a low staff turnover so that residents and staff get to know each other well creating a relaxed and positive atmosphere in the home. Relatives made particular reference to their confidence in the staff team, for example, 'Most of the staff have worked at Eastfield House for a number of years and the home has a family feel about it. I have no doubt that they (staff) have the right skills and experience'. 'I note that in-service training is an important feature of support to all staff'. 'I feel that the good staff relationships with each other and the residents (also includes friends and relatives), together with the in-service staff support provide ample opportunity to make improvements' (if these are needed).

Ninety per cent of the care staff have a National Vocational Qualification (NVQ) at Level 2. The home therefore exceeds the recommended 50 per cent of care staff with a nationally recognised qualification in care. Examination of a sample of staff induction and training records show that the home is committed to providing ongoing training and development opportunities for all staff.

## Evidence:

The staff rota for the week February 23 to March 1 2009 showed that there is consistently a senior carer (or the deputy manager) and two care staff on duty in the morning (from 8 am to 2 pm) and a senior carer and 2 care staff in the afternoons (from 2 until 8 pm). One carer is on duty overnight, with another carer on call within the home. One of the managers or senior staff are also on call overnight to respond to any emergencies in the home. Additionally, during the day, the registered manager is available (but supernumerary to the listed care staff) and the homes administrator works from 9 to 3 each week day.

Ancillary and support staff - chef manager, relief chef, kitchen assistant, domestic staff, laundry worker, and activities coordinator - complete the staff team.

At our last inspection we considered that the staffing numbers needed to be reviewed to make sure that there were enough staff available to meet the needs of all the residents living here and to cover shifts when staff are on leave, study leave or off sick. The manager said that they have the full complement of staff, but are hoping to recruit another person to cover some care and laundry shifts. Since our last inspection the home has been successful in recruiting a maintenance man to be available on site. During the inspection Mrs Bayliss confirmed that the staffing numbers and skill mix do meet the current care and support needs of the 25 residents.

Examination of two staff members employment files showed that the homes recruitment process is thorough and well organised and protects residents from potential harm from unsuitable workers. The home had received the necessary references and checks prior to appointing new staff to work in the home.

There is evidence that staff have regular formal supervision meetings with senior managers to discuss their work and progress and any training needs they have.

## 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.

The management arrangements in the home are good and meet the needs of the residents. Residents views are valued and influence the running of the home. The home has effective quality assurance systems in place. The health and safety of residents and staff are protected by the homes policies and procedures. There is a system of regular monitoring in place to ensure that staff maintain safe working practices.

Evidence:

The registered manager, Ms Mary Bayliss, has extensive experience in her role and has achieved the Registered Managers Award and NVQ Level 4, the required formal qualifications for managers of registered care homes and agencies.

There are regular residents and relatives meetings held in the home - a list of dates for forthcoming meetings is displayed in the entrance hall. Conversation with residents, and their comment cards, confirm that people feel that their opinions are listened to

Evidence:

and acted upon by the staff and managers.

The home undertakes regular quality reviews covering 'Living at the Home', 'Catering', 'Activities' and 'Care Delivery'. This involves sending out surveys questionnaires to residents and their relatives (for 'Visitors Views') every three months. The results of the surveys are fed back as part of the agenda at Residents meetings. Residents meetings are held approximately 6 weekly.

The home also produces a quarterly newsletter that contains news of past and forthcoming events and entertainments, birthday wishes and welcomes to new residents.

The providers monthly unannounced visit reports were seen - these are required to be completed following a visit by a representative of the provider company to show that the provider is checking the quality of service in the home and is listening to and acting on, the views of residents and staff.

The Annual Quality Assurance Assessment (AQAA) was completed by the manager and returned to us by the date requested in November 2008. It gave a brief account of the home - what it does well and future plans for improvement. Some of the information was not relevant to the section of the self assessment completed. For example, in relation to information about the home and how the home assesses the needs of potential residents, the manager has written that the home's evidence that it does this well is 'obtained I.I.P, Accreditation from West Berks Social Services and compliments'.

The AQAA is intended to give the opportunity for the home to provide us with information about how they are meeting outcomes for the people using their service and helps us to develop an accurate picture of how well it is achieving this. The home should improve the content of the AQAA self assessment to provide more relevant evidence to support the comments made and to illustrate what the home has done in the last year and how it is planning to improve.

The home undertakes to look after small amounts of residents personal allowances ('pocket money') when they are unable or prefer not to do this for themselves. The procedures for keeping a check on the money received and spent by residents are good so that they are protected from financial abuse.

The homes accident records, fire safety log book and a sample of maintenance records were looked at. The appointment of a maintenance man who is available on site has meant that the records of repair and routine maintenance work are up to date and accessible, which was not the case at our last inspection when this post was vacant.

## Evidence:

When we looked at the areas of the home where laundry work is done - the washing machine room, tumble driers housed in a garage area, and a separate ironing room - the fire safety precautions did not appear to be satisfactory. This was particularly so in the machine room, where pipework in the ceiling area was exposed and venting to the adjoining boiler room and residents rooms above. The home manager said she would seek further advice from the maintenance and fire safety officer to make sure that adequate fire precautions are in place to reduce the risk to residents and staff.

An external specialist company oversees the Health and Safety policies and procedures in the home. There was evidence that staff have attended training in health and safety topics, such as First Aid, Care of Substances Hazardous to Health (COSHH), infection control and safe food handling.

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
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### Recommendations

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

No.	Refer to Standard	Good Practice Recommendations
1	37	Ensure that the Annual Quality Assurance Assessment document is accurately completed and has the relevant supporting evidence to reflect the current quality of the service and any planned improvements.

## Helpline:

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**Textphone:** or

**Email:** [enquiries@cqc.org.uk](mailto:enquiries@cqc.org.uk)

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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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