

Care and Social Services Inspectorate Wales

Care Standards Act 2000

**Inspection report
Care homes for older people**

College Fields Care Home

College Fields Close
Barry
CF62 8LE

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Contact telephone number:	01446 747778
Registered provider:	Middlepatch Ltd
Registered manager:	Rachel Mary Kemp
Number of places:	68
Category:	Care Home Nursing - Older
Dates of this inspection episode from:	19 January 2011 to: 02 March 2011
Dates of other relevant contact since last report:	None
Date of previous report publication:	26 March 2010
Inspected by:	Victoria Davies

Introduction

College Fields is a care home that is registered to provide accommodation and nursing for 68 older adults. The registered manager is Mrs Rachel Kemp and the organisation that runs the home is known as Middlepatch Limited.

College Fields is not a purpose built care home and the accommodation is over three floors. There is access to all floors via a lift.

Apart from three rooms all the accommodation is single and at the time of the inspection the three double rooms had only single occupancy.

The registered manager explained that all the people who live at the home do not wish to be referred to as service users for the writing of the report but as residents.

Summary of inspection findings

Residents benefit from a well managed establishment that is operating as described in the homes statement of purpose.

Residents are actively involved in the running of the homes through their own committee.

Residents at College Fields have access to relevant information about the home.

Residents explained that they enjoy and appreciate the care at the home.

Residents living at College Fields have many opportunities to participate and engage in community activities.

Residents are supported by a trained workforce to maintain their choices and personal autonomy.

What does the service do well

College Fields ensures that residents are involved as much as is possible in their decision to move into the home.

College Fields is managed to ensure that the residents all receive person centred care.

College Fields has a warm homely ambience and there is a strong sense of community that the residents who reside at the home were happy to talk about.

Residents living at College Fields are empowered to continue to achieve success in their local community and in their own lives through the engagement of meaningful activities.

What has improved since the last inspection?

College Fields maintains its commitment to ensuring that residents continue to have an excellent quality of life while they live at their home.

A resident said directly to the inspector "I want you to include this statement - When they wrote the book about care – they based it on this place (College Fields)."

What needs to be done to improve the service?

a.) priorities

No priorities were identified as the home was able to demonstrate that the service benefits from the on-going quality assurance systems that they have in place.

b.) other areas for improvement

The registered manager must write to all prospective residents following their initial assessment that the home can meet their identified care needs.

Inspection methods

The inspection was completed in the following way:

- The registered persons completed a very comprehensive and detailed self-assessment form. This provided the inspector a good baseline of what the service was achieving and how it proposes to develop the service over the forthcoming year.
- The inspector analysed this data which informed the inspection plan.
- The inspection was completed with one unannounced inspection.
- The inspector visually checked the physical environment of the home and also verified the information that was contained in the self-assessment form against that practice observed on the day.
- The inspector walked around the building and spoke with many residents in the privacy of their rooms.
- The inspector spoke with the registered manager and the deputy manager.
- The inspector reviewed 3 sets of care documentation.
- The inspector reviewed 5 sets of staff records.
- Discussion with the registered nurses.
- Discussion with the homes divertional therapist.

A thematic inspection on infection control standards was undertaken during this inspection. A separate section for the report on this thematic inspection will be found at the end of the report headed Infection Control.

Choice of home

Inspector`s findings:

College Fields has its own website. There are copies of the statement of purpose and the service user guide available on it to download or read. The registered manager explained that by the time a referral is made - the prospective resident usually has accessed the available information about the home. This was confirmed by some of the residents who spoke with the inspector. The statement of purpose and the service user guide are also available in hard copies and are sent directly in response to other enquiries made about the home. Both documents contain the required information. The documents are easy to read and handle.

The residents explained that they had heard about the home's reputation prior to making a decision about wanting to move in. Residents continued to add that they had felt consulted about their moves into College Fields. A resident said, "I never thought I would need a care home - it came as a shock-I suppose I was uncertain about what to expect but now I'm here. The home and the staff are wonderful. It really is home I can have my family and friends here whenever I want. I suppose I have a good a relationship with my family now as I did when I was at home-now that cannot be bad".

Residents are assessed by the registered manager and the deputy manager. The registered manager explained that they make appointments with the prospective resident in the first instance and will ensure that they have all the unified assessments or local authority care plans to ensure that they have full details of the needs of the prospective resident. The assessment is conducted so that the views of the resident are included in all care plans. Following this assessment the registered manager completes a pre-printed assessment sheet that informs the electronic care documentation that the home uses.

In discussion with the registered manager it was evident that all relevant agencies commissioning the service are informed of a resident's admission to College Fields. However it has not been usual practice for the registered manager to write directly to the resident advising them of the outcome of their assessment. The registered manager explained that they would ensure they would do this from the next residents' admission.

Written in the statement of purpose is a clear invitation for prospective residents and their relatives to look around the home. The home also gives each resident a month's trial before taking up a permanent residency. The residents that the inspector spoke with confirmed that they were aware of the trial period. As one resident explained, "Yes, I knew about it, I was glad it was there but I didn't think I would need a trial here-I knew all about the home before I came here. So did my daughter-she said- it was good and it is."

Arrangements to help people choose whether they want to live at College Fields are thorough and comprehensive. Therefore the inspector does not make any requirements or practice recommendations.

Requirements made since the last inspection report which have been met:

Action required	When completed	Regulation number

Requirements which remain outstanding:

Action required (previous outstanding requirements)	Original timescale for completion	Regulation number

New requirements from this inspection:

Action required	Timescale for completion	Regulation number

Good practice recommendations:

Planning for individual needs and preferences

Inspector`s findings:

Residents care needs are identified at their pre-admission assessment. These care plans are then inputted into the homes electronic documentation system by the registered nurse of the unit that they will be moving onto.

All of the care-plans that the inspector viewed were electronic copies.

The inspector reviewed 3 sets of care documentation and found that the plans of care are written out using a core set of documentation. The core care-plans prescribe and describe in detail the technical care that is required for the resident. The care plans are reviewed at least monthly and updated as required by the registered nurses. This process is overseen by the registered manager who also participates in the review of care for the residents.

There was evidence that all residents had risk assessments in respect of moving and handling; management of falls; nutrition and the completion of the Braden scale-a tool for predicting pressure sore risk in an individual.

The residents confirmed that they all felt that they had been included in the reviews of their planned care. Furthermore the residents who the inspector spoke with explained that they knew who the staff were on their unit and knew the registered manager and the deputy manager. This comment was made by a resident, "It is easy to become lost in a place that is as big as this –well it is big-if you're use to living alone- but I know everyone here. They all make a fuss of me, I know who they are and I feel genuine warmth from all of them."

At College Fields there is a full-time diversional therapist who has been engaging all residents in recording their biographies referred to as "life stories" which are used by the care staff to inform them of the residents preferred habitual way of carrying out their daily activities. This ensures that the care approach used throughout College Fields is person centred. A resident expressed the following directly to the inspector, "Look -I didn't ever expect to end up living in a care home, but it really is like being at home. I am able to carry on my life as if I were at my own home do things in my own way. Obviously I can't be as independent as I would like-I wouldn't be here otherwise. The staff here are so considerate and sensitive to who I am and what I am that I have no concerns and I do feel better for it. I have a lot to be grateful for."

The records maintained at the home were observed to be stored securely with electronic records being password protected.

The inspector concluded that the residents care-plans reflect the individual needs of the residents and that the home has introduced a system for ensuring that the individual preferences for the residents are identified and maintained.

Requirements made since the last inspection report which have been met:

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Requirements which remain outstanding:

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New requirements from this inspection:

Action required	Timescale for completion	Regulation number

Good practice recommendations:

Quality of life

Inspector`s findings:

Residents who spoke with the inspector said that they, “Benefitted from living at the home. “ The residents explained that they felt empowered to make decisions about all aspects of their lives while living at the home. The residents explained that they can have their choice of daily papers which are delivered to their rooms as well as their personal mail. The residents explained that there is a “shop on a trolley” which gives them the opportunity to purchase small items as needed.

Residents also added that they were pleased that the staff welcomed their relatives and friends into the home. A resident said, “I know they make me feel special but that is also extended to my relatives and friends. I know my visitors feel relaxed when they visit me. I was concerned that I might lose my friends but they are always here.”

Residents who spoke with the inspector explained that they have a choice of meals and if they do not like what they have chosen the staff will ensure that they will make an alternative. On the day of inspection the inspector was in discussion with a resident who said “I didn’t fancy what I ordered tonight-well-that’s not a problem-I told the girls (the care staff) who asked me what I fancied and within moments they came back with it. It’s no bother to them, they are like my family. They really are very good.”

Another resident explained, “I know the food is excellent. The chef runs an excellent service. The food is of the highest standard.”

Residents living at College Fields have opportunities to engage with activities that lead to achievement in older life such as entering local competitions; the planning and building of the gardens surrounding the home; looking after and caring for the animals living within the gardens at the home. At College Fields residents have their own residents committee that plan their activities.

Residents at College Fields have their own mini bus which is used for outings and shopping trips. The residents who spoke with the inspector explained that they enjoyed all the excursions that were available to them.

The inspector spoke with a resident about the activities at the home, “We can do a lot of activities if we choose....but I can’t – it’s not me. I like to talk and I do get that. But the other residents like everything.”

Another resident speaking directly to the inspector said, “This is home; they look after me brilliantly. I am happy here.”

Residents at the home have a full-time divertional therapist who works with residents on either an individual basis or as a facilitator for group activities. The divertional therapist uses a research based occupational profiling tool to ensure that all residents are able to engage in meaningful activity. This means that the therapist is able to engage residents in the same activity but may facilitate individual resident participation by using various occupational approaches.

After spending the time talking with the residents at College Fields the inspector concluded that they are empowered by the staff to maintain their autonomy and choice in their activities of daily living.

Requirements made since the last inspection report which have been met:

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Requirements which remain outstanding:

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New requirements from this inspection:

Action required	Timescale for completion	Regulation number

Good practice recommendations:

Quality of care and treatment

Inspector`s findings:

A resident spoke at length to the inspector and said "I have a lot of (medical) equipment to stop me from becoming poorly. They have worked hard to keep me well. Nothing is too much. I know I'm safe here. I have everything I need. They really look after me. I get involved in all sorts of things. I know all about my treatment. The care is exceptional."

The residents care is supported by the use of specialised equipment that all the care staff have had annual training in using correctly. Such equipment includes hoists and their associated slings, slide sheets, profiling beds, specialised mattresses and any identified specialist equipment specific to the residents care needs. The inspector verified this by being allowed by the resident to check their equipment. It was found that all equipment was as it was described in the residents care plan.

Residents who originally lived in the Barry area are able to keep their own general practitioners otherwise residents are registered with a local surgery. The resident's health is monitored by the registered nurses and there was evidence in the care documentation viewed that referrals were made to the general practitioner as well as other healthcare professionals.

The inspector noted that on each floor there is a nurses' office. In each office the inspector observed that there are systems in place for carers to record the daily activities of the residents which included the nutritional and fluid intake for residents which were observed to be completed by the care staff as the care event occurred.

Residents have their own locked medicine cabinets within their rooms. Their medication administration sheets are kept on top of these cupboards. All medications are administered by the registered nurses directly from the cupboards. All equipment that is used to dispense medication is kept in the residents rooms.

Residents who spoke with the inspector affirmed that they felt that they have always been treated with respect by the staff at the home. The inspector directly observed the staff carrying out their care duties. It was pleasing to see that all the residents received their personal care in the privacy of their own rooms and that the conversations that the inspector heard between residents and staff was therapeutic, appropriate and inclusive of the residents considerations throughout. There was strong evidence of partnership working with all residents again evidence that the staff are providing person centred care. It was evident that all the staff knocked at the doors of the residents and waited permission to enter the room.

The inspector heard the staff speaking with the residents using calm tones and the pace of language that was used was sensitive to the residents needs. The residents were given time to think and respond to any request made of them. It was evident that the staff did not rush any resident and that the staff maintained their focus on the resident throughout all care activity.

The inspector heard the interactions between the staff and the residents-particularly as residents were settling down to sleep for the night and it was strongly evident that residents are highly regarded by the staff in the language and the therapeutic touches that were used to ensure that the resident was comfortable.

A resident who spoke with the inspector said, " I don't know what I'd do without them, I know they are here because its their job – but they mean so much more to me. It's the little things-the sentiments that make me consider them as friends."

Another resident explained" I know they are busy-but they always respond when I call (using the electronic alarm bell). Also, if they can't do whatever I need immediately - You're told that they will be back in 10 minutes and do you know they are-always!"

During the inspection there was a medical emergency within the home, the inspector observed a quick but calm response. The staff team ensured that residents were not left unattended while the emergency was resolved. It was evident that the staff team are trained to manage such events. The inspector also noted that while some staff were managing the emergency another staff member was already recording notes on the homes electronic documentation system which was later printed off to accompany the resident to casualty. There was excellent communication between the staff.

The statement of purpose states that residents can have their meals in the dinning room on the ground floor or in their rooms. This was confirmed by the residents and by direct observation of practice. There are small kitchens on every floor that residents and relatives have access to for making drinks and snacks. The residents confirmed that they enjoyed the food and had a choice. A resident explained, "I know I made my choice for supper but when it arrived I just didn't fancy it-you get like that. The girls knew straight away that I didn't want it and they made me something else straight away."

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Requirements which remain outstanding:

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New requirements from this inspection:

Action required	Timescale for completion	Regulation number

Good practice recommendations:

Staffing

Inspector`s findings:

The inspector reviewed 5 sets of staffs' records. The records are kept in a locked cupboard within a filing cabinet. Only key personnel have access to these records.

The inspector found that two sets of the records were jumbled and there was evidence of misfiling within the files. The administrator who manages the records explained that they would conduct an audit of the staff files as a result of the inspector's findings. The inspector advised the registered manager of the findings who said that they would resolve the situation and ensure that the files would be maintained correctly.

The review of the records evidenced that the staff have completed an application form that includes a full employment history; that the home had received two references from previous employers for all staff; all staff have an enhanced criminal record bureau check that is renewed every 3 years.

The home ensures that all the registered nurses personal identification numbers are renewed annually and kept evidence of this renewal with the relevant personnel files.

In the personnel files there were records of supervision sessions with staff and evidence of their annual appraisals. All staff have a record made of their training during the year and certificates of training were also kept in the files.

The home has more than 50% of the care staff qualified and the registered manager confirmed that the home is proactive in ensuring that staff are enrolled onto relevant courses and qualifications to support them in their roles within the home.

The registered manager and the deputy manager are both lead trainers for moving and handling within the home. Also the registered manager holds a relevant teaching qualification and is able to deliver bespoke care training for the care staff and nurses as needed.

It was evident that the staff are trained to have a high degree in technical skill delivery such as moving and handling and the control of infection. However it was also evident that the staff team are also comfortable in delivering an effective therapeutic relationship with residents. This comes directly from the ethos and leadership of the management of the home.

The staff who spoke with the inspector commented how they enjoyed working at the home. It was evident that the staff team are collectively very proud of the homes achievements and were appreciative of the management style within the home.

Requirements made since the last inspection report which have been met:

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Requirements which remain outstanding:

Action required (previous outstanding requirements)	Original timescale for completion	Regulation number

New requirements from this inspection:

Action required	Timescale for completion	Regulation number

Good practice recommendations:

Conduct and management of the home

Inspector's findings:

College Fields is operated and managed so that any future planning is inclusive of residents opinions. This is done directly by the staff in conversation with residents; or through the one- to-one work of the divertional therapist with residents; the residents committee or through surveys and external audits.

It was evident that the residents living at the home all recognised and knew the registered manager and the deputy manager. On the day of inspection the inspector directly observed the registered managers' positive leadership and management style of the home.

The residents who spoke with the inspector clearly communicated that they have a sense of belonging to a local community and were aware that the home has been successful in this- as evidenced by the many community successes the home has achieved-recently being awarded first prize in the local "Vale in Bloom" competition. From speaking with the registered manager it was evident that it is her ethos and drive that ensures the home is managed to ensure that College Fields is run with a strong sense of community and that the home is part of the local civic culture. College Fields is awaiting the results of an external audit that was completed as part of its commitment to the "My Home Life Campaign."

The registered manager is also a registered nurse and is self motivated in maintaining her professional skills and recently has completed training about dementia and challenging behaviour. The registered manager is also a trainer for moving and handling and is able to offer bespoke training for the staff as is the deputy manager. This means that the residents can be assured that the staff team have access to prompt supervision and support in all tasks relating to moving and handling. The registered manager is also a trained educationalist and regularly observes the staffs practice to ensure that all training has been assimilated into direct care practice. It also means that the registered manager is able to train and update her staff team as required. However, the home does use external trainers for specialised training such as dementia care.

The inspector saw evidence of strong communication systems between all members of the staff team working at the home-particularly with regard to the clinical care of the residents. In every nurses office there is a computer portal that every registered nurse can use to access resident information immediately from the electronic records of the resident. All the computers are password protected and only registered nurses are allowed to input new data onto the system. This means any of the registered nurses can deal with an incoming telephone call from a professional in a timely manner. As previously stated there was an emergency while the inspector was at the home and the inspector saw the registered manager taking a call from a professional and immediately being able to access the electronic notes of the resident and therefore was able to deal with the call. It was evident that the residents benefit from the registered nurses discipline in their record keeping.

The care staff keep daily logs that describe details of the care that they have carried out for individual residents; these notes are kept in the offices and the registered nurses check them daily and at every handover between staff.

A resident directly told the inspector "When they wrote the book about care-they based it on this place."

The residents at College Fields spoke very highly of the registered manager and her team.

Requirements made since the last inspection report which have been met:

Action required	When completed	Regulation number

Requirements which remain outstanding:

Action required (previous outstanding requirements)	Original timescale for completion	Regulation number

New requirements from this inspection:

Action required	Timescale for completion	Regulation number

Good practice recommendations:

Concerns, complaints and protection

Inspector`s findings:

College Fields has a complaints policy that is found within the statement of purpose and the service user guide. The registered manager is able to investigate any complaint at a local level.

College Fields has had no complaints investigated by the Care and Social Services Inspectorate since the last inspection.

Since the last inspection there has been one investigation under the local authority’s protection of vulnerable adult procedure which was not substantiated. According to the self assessment form the staff have received annual updating in this procedure and when in discussion with the inspector the registered nurses understood the relevant procedures for this policy.

There have been no applications made by the home under the procedure for the deprivation of liberty safeguards since the last inspection.

Requirements made since the last inspection report which have been met:

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Requirements which remain outstanding:

Action required (previous outstanding requirements)	Original timescale for completion	Regulation number

New requirements from this inspection:

Action required	Timescale for completion	Regulation number

Good practice recommendations:

The physical environment

Inspector`s findings:

College Fields is an old teaching college that has been converted into a care home. Residents have their own rooms which are personalised to their directions. There are three double rooms available however they are currently used as single rooms.

College Fields accommodation covers three floors that are accessed by a lift and a wide staircase.

On each floor there are different lounges. The home has a well maintained front garden that the residents are involved in keeping. There are benches that are used to sit out when the weather is suitable.

College Fields is clean and orderly throughout. The furniture throughout the home is of a good specification and was seen to be clean and free from any damage.

College Fields is maintained to a high standard and has a system for continually re-furbishing the environment as needed.

In parts of the home the carpet has been taken up and the original wooden floor has been re-polished which has proven to be easier to clean and maintain. The plan is to continue with the removal of the carpet but it has to be completed in small areas so that the resident`s lives are not disrupted. There are also plans to refurbish the lift in the near future.

On the day of inspection the fire officer was also in attendance completing their own inspection of the premises.

The home has service contracts for all the essential equipment that is used throughout the home.

Requirements made since the last inspection report which have been met:

Action required	When completed	Regulation number

Requirements which remain outstanding:

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New requirements from this inspection:

Action required	Timescale for completion	Regulation number

Good practice recommendations:

A note on CSSIW's inspection and report process

This report has been compiled following an inspection of the service undertaken by Care and Social Services Inspectorate for Wales (CSSIW) under the provisions of the Care Standards Act 2000 and associated Regulations.

The primary focus of the report is to comment on the quality of life and quality of care experienced by service users.

The report contains information on how we inspect and what we find. It is divided into distinct parts mirroring the broad areas of the National Minimum Standards.

CSSIW's inspectors are authorised to enter and inspect regulated services at any time. Inspection enables CSSIW to satisfy itself that continued registration is justified. It also ensures compliance with:

- Care Standards Act 2000 and associated Regulations whilst taking into account the National Minimum Standards.
- The service's own statement of purpose.

At each inspection episode or period there are visit/s to the service during which CSSIW may adopt a range of different methods in its attempt to capture service users' and their relatives'/representatives' experiences. Such methods may for example include self-assessment, discussion groups, and the use of questionnaires. At any other time throughout the year visits may also be made to the service to investigate complaints and to respond to any changes in the service.

Readers must be aware that a CSSIW report is intended to reflect the findings of the inspector at a specific period in time. Readers should not conclude that the circumstances of the service will be the same at all times.

The registered person(s) is responsible for ensuring that the service operates in a way which complies with the regulations. CSSIW will comment in the general text of the inspection report on their compliance. Those Regulations which CSSIW believes to be key in bringing about change in the particular service will be separately and clearly identified in the requirement section.

As well as listing these key requirements from the current inspection, requirements made by CSSIW during the year, since the last inspection, which have been met and those which remain outstanding are included in this report. The reader should note that requirements made in last year's report which are not listed as outstanding have been appropriately complied with.

Where key requirements have been identified, the provider is required under Regulation 25B (Compliance Notification) to advise CSSIW of the completion of any action that they have been required to take in order to remedy a breach of the regulations.

The regulated service is also responsible for having in place a clear, effective and fair complaints procedure which promotes local resolution between the parties in a swift and satisfactory manner, wherever possible. The annual inspection report will include a summary of the numbers of complaints dealt with locally and their outcome.

CSSIW may also be involved in the investigation of a complaint. Where this is the case CSSIW makes publicly available a summary of that complaint. CSSIW will also include within the annual inspection report a summary of any matters it has been involved in together with any action taken by CSSIW.

Should you have concerns about anything arising from the inspector`s findings, you may discuss these with CSSIW or with the registered person.

Care and Social Services Inspectorate Wales is required to make reports on regulated services available to the public. The reports are public documents and will be available on the CSSIW web site: www.cssiw.org.uk

Thematic Inspection: Infection Control

Summary of inspection of infection control findings

- College Fields has policies and procedures about the management of the control of infection within the home.
- Staff have annual training in the control of infection.
- The domestic staff have cleaning schedules and adhere to a colour coding system for all their cleaning equipment.
- The laundry has a work system in place that ensures there will be no risks for cross contamination from dirty laundry to clean laundry.
- The building throughout was clean and well managed.
- The registered manager is able to tailor the homes training needs and spot checks staff with a special light box that can reveal whether a staff member has used the correct hand-washing techniques.

What does the service do well?

At College Fields the care staff carry out their duties in a way that actively promotes good control of infection within the home.

The registered manager does spot checks on all staff to ensure that they are using the correct hand-washing techniques and to ensure that the standards expected for control of infection within the home are maintained.

What needs to be done to improve the service?

a.) priorities

None were identified.

b.) other areas for improvement

The registered manager showed the inspector an audit that had recently been conducted within the home concerning the control of infection. This audit was done using a recognised tool for use within a hospital environment. The manager has completed an action plan to improve on the few deficit areas that the audit identified.

Inspection methods

Review of the information contained within the self-assessment form.

Direct observation of practice.

Discussion with staff.

Discussion with the registered manager.

Quality of care and treatment

Inspector`s findings:

- Hand hygiene – every member of staff was observed to wash their hands after every care activity. There are hand-washing facilities in every service user's room, clinical area, bathrooms and toilets.
- Personal protective equipment- the staff wear uniform and have access to aprons and gloves.
- Cleanliness of the environment – the home has a team of domestics who have cleaning schedules and keep the home clean.
- Handling of the linen – the home had policies and procedures for the management of all laundry items. The laundry is purpose built but does not have two doors to ensure that dirty laundry enters through one door and clean leaves the laundry via the other door. Instead they have a through put procedure for linen to ensure that there is no cross contamination.
- Disposal of waste – the home has a policy and procedure for managing clinical waste and household waste.
- The registered manager regularly audits the home for aspects of control of infection.

Requirements from this inspection:

Action required	Timescale for completion	Regulation number

Good practice recommendations:

Staffing

Inspector`s findings:

- Staff have had annual updates in the control of infection and the registered manager has the skills to be able to tailor the staff training to the needs of the home. The registered manager uses a light box to ensure that the staff are using the correct hand-washing techniques.
- Staff have uniforms and have access to protective personal equipment such as disposable gloves; aprons and wipes.
- Staff have an induction into the home and are supervised regularly to ensure that they are applying best practice for control of infection within the home.
- The domestic staff have training in control of infection, health and safety including the control of substances hazardous to health.
- The domestic staff have colour coded equipment to ensure there is no cross contamination between critical care areas.

Requirements from this inspection:

Action required	Timescale for completion	Regulation number

Good practice recommendations:

Conduct and management of the home

Inspector`s findings:

- The registered manager recently completed a control of infection audit and has implemented a plan of action to improve on some areas.
- The home is managed effectively in that staff have access to all equipment and training required to maintain an effective standard of control of infection.
- The registered manager explained that on every floor there is a maintenance book that is completed by the staff if they find any problem with the home. The inspector saw records that indicated that the system was an effective and responsive one.

Requirements from this inspection:

Action required	Timescale for completion	Regulation number

Good practice recommendations:

Concerns, complaints and protection**Inspector`s findings:**

There have been no concerns, complaints or protection issues in the home with regard to control of infection.

Requirements from this inspection:

Action required	Timescale for completion	Regulation number

Good practice recommendations:

The physical environment

Inspector`s findings:

- The home is well maintained. It was clean and free from odours.
- The furnishings in the home were clean and free from damage.
- The home has a maintenance person who is able to deal with most domestic repairs to the fabric of the building.
- Bed frames and surrounding surfaces in service user’s rooms were clean and dust free.
- Mattresses are wiped down and cleaned regularly.
- There is a sluice on each floor and commode pans are transported to the sluice with their lids in place.
- All the clinical areas were clean and kept in an orderly manner.
- There are hand-washing facilities available in every service user’s room and at critical points throughout the home.

Requirements from this inspection:

Action required	Timescale for completion	Regulation number

Good practice recommendations: