



Making Social Care
Better for People

inspection report

CARE HOMES FOR OLDER PEOPLE

Preston Lodge

**20 Kingfisher Avenue
Humberstone Road
Leicester
LE3 6QR**

Lead Inspector
Linda Clarke

Unannounced Inspection
4th August 2008 09:30

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

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This is a report of an inspection to assess whether services are meeting the needs of people who use them. The legal basis for conducting inspections is the Care Standards Act 2000 and the relevant National Minimum Standards for this establishment are those for *Care Homes for Older People*. They can be found at www.dh.gov.uk or obtained from The Stationery Office (TSO) PO Box 29, St Crispins, Duke Street, Norwich, NR3 1GN. Tel: 0870 600 5522. Online ordering: www.tso.co.uk/bookshop

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SERVICE INFORMATION

Name of service	Preston Lodge
Address	20 Kingfisher Avenue Humberstone Road Leicester LE3 6QR
Telephone number	0116 2622159
Fax number	0116 2629278
Email address	socis216@leicester.gov.uk
Provider Web address	socis209@leicester.gov.uk
Name of registered provider(s)/company (if applicable)	Leicester City Council
Name of registered manager (if applicable)	Paul Morris
Type of registration	Care Home
No. of places registered (if applicable)	40
Category(ies) of registration, with number of places	Dementia (9), Dementia - over 65 years of age (20), Mental disorder, excluding learning disability or dementia (9), Mental Disorder, excluding learning disability or dementia - over 65 years of age (20), Old age, not falling within any other category (40), Physical disability over 65 years of age (5), Sensory Impairment over 65 years of age (10)

SERVICE INFORMATION

Conditions of registration:

1. Preston Lodge Care Home is registered to provide personal care to male and female service users who fall within the following categories:-

Mental Disorder, excluding learning disability or dementia over 65 years of age MD(E) 20

Dementia over 65 years of age DE(E) 20

No one falling within categories DE(E) or MD(E) may be admitted into Preston Lodge when there are 20 persons who fall within categories/combined categories DE(E) or MD(E) already admitted into the home

2. Physical Disability over 65 years of age PD(E) 5

No one falling within category PD(E) may be admitted into Preston Lodge where there are 5 persons of category PD(E) already accommodated in the home

3. Sensory Impairment over 65 years SI(E) 10

No one falling within category SI(E) may be admitted into Preston Lodge where there are 10 persons of category SI(E) already accommodated within the home

4. Old age not falling within any other category OP 40

No one falling within category OP may be admitted into Preston Lodge where there are 40 persons of category OP already accommodated within the home

5. Dementia DE 9
Mental disorder, excluding learning disability or dementia MD 9

No person to be admitted into Preston Lodge under categories DE or MD when there are 9 persons in total of these categories/combined categories already accommodated within the home

6. No person under 50 years of age who falls within categories DE or MD may be admitted into Preston Lodge

7. The maximum number of persons accommodated within Preston Lodge is 40

Date of last inspection 8th September 2006

Brief Description of the Service:

Preston Lodge is a care home registered to accommodate up to forty older people, who may have additional care needs which include mental disorder, dementia, physical disability or sensory impairment and is owned by Leicester City Council. The home is situated in a residential area near to shops and has a car park. The home is close to the main link road to the city centre, which is a ten-minute bus journey.

Preston Lodge is a large purpose built property. Accommodation is offered on the ground and first floor level, which can be accessed by a passenger lift. Bath/shower and toilet facilities are located throughout the home. There is a separate short-stay/respite unit within the home for people with mental health difficulties. Preston Lodge has a secure courtyard garden, which is accessible from the home, and provides a range of mature plants and shrubs and seating areas.

Information is located on site detailing the range of services offered, which includes the Statement of Purpose. Preston Lodge has copies of the Commission of Social Care Inspections (CSCI), Inspection Reports, which are available upon request.

The maximum weekly fee is £393.00; which was provided in information submitted by the Registered Manager. An individual's financial contribution to their care is dependent upon a financial assessment. There are additional individual expenditure such as hairdresser, chiropodist, newspapers, magazines and personal toiletries and the fee will depend on the services received.

Inspection reports regarding the Home are available and can be accessed via the CSCI website: www.csci.org.uk. Further information about the home is available from the Registered Manager.

SUMMARY

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

The quality rating for this service is 2 star. This means the people who use this service experience good quality outcomes.

'We' as it appears throughout the Inspection Report refers to 'The Commission for Social Care Inspection.'

The inspection process consisted of pre-planning the inspection, which included reviewing the Annual Quality Assurance Assessment (AQAA), which is self-assessment tool completed by a representative of the service, reviewing previous Inspection Reports, and any information we have received. We sent surveys to ten people who use the service of which two were completed and returned, five staff surveys were sent out of which none were returned, and seven health professional and social care professional surveys were sent of which three were returned. The unannounced site visit commenced on the 4th August 2008, and took place between 09:39 and 17:45

The focus of the inspection is based upon the outcomes for people who use the service. The method of inspection was 'case tracking'. This involved identifying people with varying levels of care needs and looking at how these are being met by the staff at Preston House. Four people accessing services were selected. Discussions were held with the four people chosen, along with six other people living at the Home, three members of care staff were spoken with along with the Registered Manager.

What the service does well:

People considering moving into Preston Lodge can be confident that their needs will be assessed before they move in to ensure that the home and its staff can provide the appropriate care and support. People living at the home are involved in the development of their care plan, ensuring that the care they receive is as they expect and wish.

People living at the home, along with health and social care professionals are satisfied with the care provided at the home. An enthusiastic staff team that has the appropriate experience and training provides care.

We sent surveys to health and social care professionals and asked them what they thought Preston Lodge did well, they wrote: -

- Address the individual needs, whilst maintaining the dignity of each person, and provide a care service, which meets all aspects of any individuals needs, practical, emotional, and medical.
- Preston Lodge is a home providing an excellent service as I have continually observed.

Preston Lodge is managed well, with people who live at the home having a good rapport with the Registered Manager, the management team and all care staff. People we spoke with highly praised the Management Team and were confident that any concerns they express are effectively managed, to their satisfaction.

What has improved since the last inspection?

Environmental improvements have taken place, which includes the redecoration of some of the communal areas and bedrooms, and one lounge being designated for those people living at the home who wish to smoke. A secure garden area has been provided, with direct access from the garden room.

What they could do better:

People who regularly access respite care at Preston Lodge to be involved in the development of a care plan, which records their wishes, preferences and expectations of care to assist staff in offering appropriate support, with particular reference to their mental health.

The level of information recorded about peoples daily lives could be improved upon, by reflecting all aspects of a person's daily life, and to include any comments they express.

People living at the home are encouraged to complete questionnaires about the care they receive at the home, but a system needs to be developed to ensure that everyone is aware of the outcome of the process and is advised as to what changes will be implemented as a result of their comments.

Please contact the provider for advice of actions taken in response to this inspection.

The report of this inspection is available from enquiries@csci.gsi.gov.uk or by contacting your local CSCI office. The summary of this inspection report can be made available in other formats on request.

DETAILS OF INSPECTOR FINDINGS

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Scoring of Outcomes

Statutory Requirements Identified During the Inspection

Choice of Home

The intended outcomes for Standards 1 – 6 are:

1. Prospective service users have the information they need to make an informed choice about where to live.
2. Each service user has a written contract/ statement of terms and conditions with the home.
3. No service user moves into the home without having had his/her needs assessed and been assured that these will be met.
4. Service users and their representatives know that the home they enter will meet their needs.
5. Prospective service users and their relatives and friends have an opportunity to visit and assess the quality, facilities and suitability of the home.
6. Service users assessed and referred solely for intermediate care are helped to maximise their independence and return home.

The Commission considers Standards 3 and 6 the key standards to be inspected.

JUDGEMENT – we looked at outcomes for the following standard(s):

1 and 3. Standard 6 is not applicable.

Quality in this outcome area is **good**.

This judgement has been made using available evidence including a visit to this service.

People considering moving into the home have access to information about the services provided, and can be confident their needs will be assessed to ensure that the home is best suited to them.

EVIDENCE:

We were shown the home's Statement of Purpose and Service User Guide, which, provides information about the services offered by the home and includes information on meals, activities, how to respond in an emergency and how to make a complaint and information about staff. A separate booklet has been provided for people who access respite services.

We asked people who live at the home whether they had been given information about Preston Lodge, everyone we spoke with had, and said that they kept the information within their bedroom; one person commented that

their photograph was included within the brochure. Everyone we spoke with had made an informed choice to move into the home, either because they had visited and liked the home, or it had been recommended to them or they liked its location. One person said, "I wanted to come into care, I'd lost my confidence being at home, it's what I needed."

We looked at the records of four people, three of which lived at the home, the fourth person accessing respite care. Everyone had had an assessment of his or her needs carried out by a Social Worker, to ensure that their care needs could be met by the staff at the home.

Preston Lodge does not provide intermediate care.

Health and Personal Care

The intended outcomes for Standards 7 – 11 are:

7. The service user's health, personal and social care needs are set out in an individual plan of care.
8. Service users' health care needs are fully met.
9. Service users, where appropriate, are responsible for their own medication, and are protected by the home's policies and procedures for dealing with medicines.
10. Service users feel they are treated with respect and their right to privacy is upheld.
11. Service users are assured that at the time of their death, staff will treat them and their family with care, sensitivity and respect.

The Commission considers Standards 7, 8, 9 and 10 the key standards to be inspected.

JUDGEMENT – we looked at outcomes for the following standard(s):

7, 8, 9, 10 and 11.

Quality in this outcome area is **good**.

This judgement has been made using available evidence including a visit to this service.

People accessing services at Preston Lodge are consulted and involved in the development and review of their care package, and have their health and care needs met.

EVIDENCE:

We looked at the care plans of three people living at Preston Lodge, and found them to be comprehensive. Care plans contained information about an individual's life prior to moving into the home, including information on family, work life and social events, this provides staff with information that enables them to support people in a manner which reflects their lifestyle and experiences.

The care plans are person centred in that they are written from the perspective of the individual, and contain information as to their preferences and views about the care and support they wish to receive, with emphasis on a person's

ability therefore promoting and maintaining their independence. Care plans provide information about a persons wish in the event of their death. The care plans we viewed had recently been reviewed and had been signed by the individual and a member of staff.

We spoke with six people, of which three peoples care plans we viewed. Everyone we spoke with was complimentary about the care and support they receive, and the attitude and approach of care staff. One person said, "The care and support is as I'd like it to be, the girls are very pleasant." Whilst someone else said "I like it here we've got a good Manager, the care staff are friendly and helpful." One person told us "The staff here are fantastic, they're always their when I need them, and they're very helpful and kind." People we spoke with were aware of their care plan, and had been involved in its development.

We spoke with three members of staff who were on duty, all had a clear understanding of the needs of people living at Preston Lodge, staff were enthusiastic about their role in providing support, and were positive about the training they received. They all said that they were responsible for the development of care plans and were supported by a senior member of staff.

Additional information could be included within care plans to further promote the care people living at the home receive, it was suggested to the Registered Manager that information about known 'triggers' and behaviours which indicates how a person is feeling be included, along with the support that staff need to provide to reduce a persons anxiety and promote their well-being.

People who access respite care have a care plan developed by a Social Worker, it was recommended to the Registered Manager that for those individuals who regularly visit Preston Lodge for a break, that they have a care plan developed by the home, which provides additional information enabling care staff to provide a more tailored service reflective of the wishes and preferences of the individual.

People living at the home are involved in the care they receive, and are confident about the support they receive from health care professionals. One person said that they had not gone out that day as they were awaiting a visit from their Doctor; whilst one person spoke about the support they were currently receiving from a District Nurse.

We received two surveys from people living at the Preston Lodge, both indicated that their care needs are met, and they receive the medical support they need and indicate staff listen and act on what they say.

We received two surveys from General Practitioners who support some of the people who live at the home; both indicated that the service seeks their advice and acts upon it, and that the health and care needs of people are met and

that the home respects the privacy and dignity of people living at the home. One question within the survey is what do you feel the service does well one General Practitioner wrote 'sensitive, responsive and professional.'

We also received a survey completed by a Social Worker, who wrote 'my experience as a Social Worker has always indicated that the health care needs of the individual are extremely well monitored by care managers and the care team. The ethos provided by the care service places great emphasis on the privacy and dignity of individuals where and whenever possible.'

We looked at the medication and medication records of three people whose records we viewed, all of which were found to be in good order. Amendments to legislation require that Controlled Drugs stored in care homes are in a cupboard designed for the specific person, it is the responsibility of the Registered Manager to ensure that storage facilities comply with current legislation and good practice.

We observed throughout the day staff supporting people with consideration to their privacy and dignity, and providing care and support in a sensitive manner, this included the appropriate use of equipment for moving and handling people who require the use of additional aids and staff support. Staff in all instances knocked on the door of people's bedrooms, this included ancillary staff performing additional duties such as cleaning.

Daily Life and Social Activities

The intended outcomes for Standards 12 - 15 are:

12. Service users find the lifestyle experienced in the home matches their expectations and preferences, and satisfies their social, cultural, religious and recreational interests and needs.
13. Service users maintain contact with family/ friends/ representatives and the local community as they wish.
14. Service users are helped to exercise choice and control over their lives.
15. Service users receive a wholesome appealing balanced diet in pleasing surroundings at times convenient to them.

The Commission considers all of the above key standards to be inspected.

JUDGEMENT – we looked at outcomes for the following standard(s):

12, 13, 14 and 15.

Quality in this outcome area is **good**.

This judgement has been made using available evidence including a visit to this service.

People residing at Preston Lodge are encouraged to live a lifestyle of their choosing, and are encouraged to access activities, which reflect their cultural and individual needs.

EVIDENCE:

Preston Lodge does not employ an activities organiser, and therefore staff are responsible for involving people living at the home in activities and recreational pursuits, there is a timetable with regards to specific events, but other activities are organised ad-hoc.

Care plans we looked at provided information about a person life before moving into the home, including information on social, family and work. One person we spoke with said that having moved into Preston Lodge they had continued to be a member of two social clubs, which regularly held social events that they attended. One person said, "I join in the bingo, card and board games, but I don't win very often, and I like it when entertainers come in, it's a good sing-a-long. I also went on a barge trip a short while ago and

really enjoyed it, I hope to go again." One person we spoke with said, "the ladies from the library visit, and ask me what books I would like." We spoke with one person who said, "I'm not one for activities, I prefer to stay in my room and read." One person told us that they visited a day centre three days a week, and that the day centre catered for their specific cultural requirements, they also told us that they enjoyed playing bingo and knitting.

We observed during the day people walking around the home independently, some watching television, the television in the main lounge having subtitles to promote understanding for those with a hearing impairment, others sat talking with each other, whilst others read a newspaper or magazine.

The lunchtime meal in the main dining room was relaxed, with serving dishes being placed on the table to encourage people to help themselves. The menu was displayed on a board, and it was suggested to the Registered Manager that menus be placed on the dining tables to make it easier for people to view. We asked people in the home if they liked the meals, all indicated that they did, and that a choice is always available. One person said, "I'm a diabetic, and I don't know which choices are suitable to me, so I have to ask." It was suggested to the Registered Manager that meals choices on the menus could indicate whether they were appropriate for people with specific dietary needs.

Complaints and Protection

The intended outcomes for Standards 16 - 18 are:

- 16.** Service users and their relatives and friends are confident that their complaints will be listened to, taken seriously and acted upon.
- 17.** Service users' legal rights are protected.
- 18.** Service users are protected from abuse.

The Commission considers Standards 16 and 18 the key standards to be.

JUDGEMENT – we looked at outcomes for the following standard(s):

16 and 18.

Quality in this outcome area is **good**.

This judgement has been made using available evidence including a visit to this service.

People's welfare is supported by staff that are aware of their responsibility in reporting any suspicions, which puts the welfare of an individual at risk, and by the complaints procedure, which enables people to express their concerns.

EVIDENCE:

We spoke with people living at Preston Lodge, all said that they knew how to raise a concern or make a complaint, in that they would speak with the Manager or a member of their family, the homes brochures contains information about how to make a complaint, which people are given a copy of when moving into the home. One person said "I like it here, we've got a good manager, if anything's wrong he'll sort it out." Whilst someone else told us "Paul, (the manager) is very good, he's always been there for me, and helped me sort a lot of things out."

People we spoke with were not aware of advocacy services, although information about advocacy services is available in the visitor's room. It was suggested to the Registered Manager that people upon moving into Preston Lodge are provided with information that enables them to seek independent advice if they so choose, and that meetings are used to remind people of their rights and the accessibility of information and support available.

We looked at the homes complaint record; four complaints have been received this year, two of which were from people living at the home, and two being from relatives of people in residence at Preston Lodge. The complaints had been documented and the outcome of the complaint was recorded, along with a letter of response.

We looked at staff training records and spoke with staff, in some instances staff have received training on 'safeguarding adults from abuse', the training provides staff with information on the forms in which abuse may occur, and the possible signs individuals may display if they are suffering abuse. All staff we spoke with were able to confirm their role in reporting any suspicions or allegations of abuse.

Environment

The intended outcomes for Standards 19 – 26 are:

19. Service users live in a safe, well-maintained environment.
20. Service users have access to safe and comfortable indoor and outdoor communal facilities.
21. Service users have sufficient and suitable lavatories and washing facilities.
22. Service users have the specialist equipment they require to maximise their independence.
23. Service users' own rooms suit their needs.
24. Service users live in safe, comfortable bedrooms with their own possessions around them.
25. Service users live in safe, comfortable surroundings.
26. The home is clean, pleasant and hygienic.

The Commission considers Standards 19 and 26 the key standards to be inspected.

JUDGEMENT – we looked at outcomes for the following standard(s):

19, 20, 21, 24, and 26

Quality in this outcome area is **good**.

This judgement has been made using available evidence including a visit to this service.

People in residence at Preston Lodge live in a homely and well-maintained environment, which is suitable to their individual and collective needs.

EVIDENCE:

Preston Lodge on the ground floor benefits from a large lounge, and smaller lounges, including one for people who wish to smoke, the main dining room is located on the ground floor, and the smoking lounge has a dining table which was requested by people living in the home, so that they can eat their meal and relax and have a cigarette if they so choose. The first floor of the home has additional small lounges, and also incorporates a separate respite facility, which is self-contained.

Bedrooms, toilet, bathing and shower facilities are located on the ground and first floor, and are accessible to people who require equipment to maintain their personal hygiene and care.

Preston Lodge has a garden room on the ground floor, which has direct excess into a secure courtyard garden, which provides mature plants and shrubs along with flowers within garden beds and containers. Seating and tables are provided and shady areas to escape the sun.

The home was decorated to a good standard throughout, and people we spoke with were happy about the standard of accommodation, the Registered Manager has developed a programme of redecoration, which is ongoing.

Staffing

The intended outcomes for Standards 27 – 30 are:

- 27.** Service users' needs are met by the numbers and skill mix of staff.
- 28.** Service users are in safe hands at all times.
- 29.** Service users are supported and protected by the home's recruitment policy and practices.
- 30.** Staff are trained and competent to do their jobs.

The Commission consider all the above are key standards to be inspected.

JUDGEMENT – we looked at outcomes for the following standard(s):

27, 28, 29 and 30.

Quality in this outcome area is **good**.

This judgement has been made using available evidence including a visit to this service.

People living at Preston Lodge receive timely care, which is delivered by enthusiastic, experienced and trained care staff that are able to meet their individual needs.

EVIDENCE:

We looked at the staff rota, which indicated that there are six members of care staff on duty in the morning and five in the evening, with designated staff working within the respite facility. Ancillary staff that are responsible for cleaning, maintenance, laundry and the provision of meals support care staff. We spoke with people living at Preston Lodge and asked them for their views with regards to staffing levels, and as to whether when they required assistance the response of staff was timely. One person told us that "they always come if I ring the buzzer." Whilst someone else said, "nothing is too much trouble, you can always rely on them."

We spoke with three members of staff who were on duty, and asked them their views about staffing levels, all indicated that they were confident that the staffing levels in the home enabled them to meet the needs of people in residence, and commented that a recent increase in staffing numbers in the respite facility had improved the care people within the respite facility receive.

We spoke with staff who provided information about the training they receive, training is related to the safety and welfare of people using the service, along with training which is specific to their health and care needs to which the home provides a service, such as mental health including Schizophrenia, Alzheimer's and Dementia Awareness. Staff said the training enables them to understand why some people living at the home behave or act in a certain way, and enables them to develop their care plan to support them appropriately.

Information provided by the Registered Manager prior to the site visit states that 74% of staff have attained a National Vocation Qualification (NVQ) in Care, which provides staff with an understanding as to their role in supporting and caring for people appropriately whilst promoting peoples privacy, dignity and choices.

The Human Resource Team of Leicester City Council oversees the recruitment of staff at Preston Lodge. All records with regards to staff recruitment including application forms, references and Criminal Record Bureau (CRB) disclosures are stored centrally; therefore we could not view these. Information supplied by the Registered Manager as part of the inspection process states that there is a rigorous recruitment procedure and that all staff have a satisfactory CRB. Newly recruited staff undertake a probationary and induction period, where they undergo training relevant to their role.

Management and Administration

The intended outcomes for Standards 31 – 38 are:

- 31.** Service users live in a home which is run and managed by a person who is fit to be in charge, of good character and able to discharge his or her responsibilities fully.
- 32.** Service users benefit from the ethos, leadership and management approach of the home.
- 33.** The home is run in the best interests of service users.
- 34.** Service users are safeguarded by the accounting and financial procedures of the home.
- 35.** Service users' financial interests are safeguarded.
- 36.** Staff are appropriately supervised.
- 37.** Service users' rights and best interests are safeguarded by the home's record keeping, policies and procedures.
- 38.** The health, safety and welfare of service users and staff are promoted and protected.

The Commission considers Standards 31, 33, 35 and 38 the key standards to be inspected.

JUDGEMENT – we looked at outcomes for the following standard(s):

31, 32, 33, 35, 36, 37 and 38.

Quality in this outcome area is **(excellent, good, adequate or poor)**.

This judgement has been made using available evidence including a visit to this service.

People living at Preston Lodge reside in a home, which is managed well and are provided with opportunities to influence and contribute towards the care they receive.

EVIDENCE:

The Registered Manager, Paul Morris has held his current position for three years, and has attained a National Vocation Qualification at level 4 and the Registered Managers Award, and continues to attend training which enables him to update his knowledge and skills.

We asked staff their views with regards to the support they receive from the Senior and Management Team, all staff were highly complimentary, saying that if they had any concerns with regards to the welfare of people living at the home, these were listened to and acted upon.

One survey received from someone living at the home, answered the question 'is there anything else that you would like to tell us, wrote 'all the staff are very friendly – the manager Paul is a gem.'

People living at Preston Lodge and their relatives have the opportunity to participate in the homes quality assurance system, which includes completing questionnaires about the service they receive at the home. The Registered Manager said that issues recorded within questionnaires, where the person has identified themselves, is addressed directly with them, however this and any action taken is not recorded. We discussed with the Registered Manager that when questionnaires are completed, they are analysed and a brief report is produced detailing the outcome, along with an action plan as to how the Registered Manager intends to address any issues raised, and that the report is made available to all relevant parties.

Financial records we looked at with regards to peoples finances were in good order, one person we spoke with said that they had been supported by the Registered Manager to manage their finances, and that he had helped them during a difficult time.

Staff we spoke with said they receive regular supervision from a senior carer, and that they found supervisions to be useful, as it provided them with an opportunity to review the care needs of the people for whom they are keyworker to, and review care plans as needed. All staff said that the Management Team respected their views and acted upon them, and were generally supportive. In addition staff said that they attend regular staff meetings, which enables them to keep update with any changes.

Daily records are used for each person living or staying at the home to record information about them, these could be used to greater affect by including information about the views of people, their participation in activities, whether they have received a visitor, or any other issues which has affected their day.

Information provided by the Registered Manager states that systems within the Home including central heating, fire systems and electrical systems are regularly maintained.

SCORING OF OUTCOMES

This page summarises the assessment of the extent to which the National Minimum Standards for Care Homes for Older People have been met and uses the following scale. The scale ranges from:

- 4** Standard Exceeded (Commendable) **3** Standard Met (No Shortfalls)
2 Standard Almost Met (Minor Shortfalls) **1** Standard Not Met (Major Shortfalls)

"X" in the standard met box denotes standard not assessed on this occasion

"N/A" in the standard met box denotes standard not applicable

CHOICE OF HOME	
Standard No	Score
1	3
2	X
3	3
4	X
5	X
6	N/A

HEALTH AND PERSONAL CARE	
Standard No	Score
7	3
8	3
9	2
10	3
11	3

DAILY LIFE AND SOCIAL ACTIVITIES	
Standard No	Score
12	3
13	3
14	3
15	3

COMPLAINTS AND PROTECTION	
Standard No	Score
16	3
17	X
18	3

ENVIRONMENT	
Standard No	Score
19	3
20	3
21	3
22	X
23	X
24	3
25	X
26	3

STAFFING	
Standard No	Score
27	3
28	3
29	3
30	3

MANAGEMENT AND ADMINISTRATION	
Standard No	Score
31	3
32	3
33	2
34	X
35	3
36	3
37	3
38	3

Are there any outstanding requirements from the last inspection? N/A

STATUTORY REQUIREMENTS

This section sets out the actions, which must be taken so that the registered person/s meets the Care Standards Act 2000, Care Homes Regulations 2001 and the National Minimum Standards. The Registered Provider(s) must comply with the given timescales.

No.	Standard	Regulation	Requirement	Timescale for action
1	OP9	13(2)	<p>The Registered Manager to establish whether the cabinet which stores Controlled Drugs at Preston Lodge complies with the Misuse of Drugs (Safe Custody) Regulations 1973.</p> <p>If it is found current storage facilities do not meet the regulations then a storage system, which does comply with the Misuse of Drugs (Safe Custody) Regulation 1973 is to be purchased and installed.</p>	04/11/08

RECOMMENDATIONS

These recommendations relate to National Minimum Standards and are seen as good practice for the Registered Provider/s to consider carrying out.

No.	Refer to Standard	Good Practice Recommendations
1	OP7	People who regularly access respite services at Preston Lodge have a care plan developed by staff at the home,

		that includes information about the care and support the individual requires and includes information as to the persons, wishes, and expectations of care.
2	OP15	Menus to be displayed on dining tables at mealtimes, which clearly indicate whether meal options cater for specific dietary requirements.
3	OP16	People upon moving into the home to be given information on agencies and professionals who they can contact if they wish to raise a concern or feel frightened or unsafe, including advocacy services.
4	OP33	People accessing services to receive a report, which is in a format appropriate to their needs, which provides the outcome of their involvement in the quality assurance process, and details the aims of the service to address issues raised and improve the quality of care.
5	OP37	Daily records, which record a person's personal care, should be extended to encompass all aspects of their daily lives, and reflect a holistic approach to care.

Commission for Social Care Inspection

Eastern Region

Commission for Social Care Inspection

Eastern Regional Contact Team

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