

Key inspection report

Care homes for older people

Name:	The Good Companions
Address:	Criffel Street Silloth Cumbria CA7 4BT

The quality rating for this care home is:	two star good service
--	-----------------------

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

Lead inspector:	Date:
Margaret Drury	2 4 0 5 2 0 1 0

This is a review of quality of outcomes that people experience in this care home. We believe high quality care should

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

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

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

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

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

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

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.

We review the quality of the service against outcomes from the National Minimum Standards (NMS). Those standards are written by the Department of Health for each type of care service.

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

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

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

Reader Information

Document Purpose	Inspection report
Author	Care Quality Commission
Audience	General public
Further copies from	0870 240 7535 (telephone order line)
Copyright	© Care Quality Commission 2010 This publication may be reproduced in whole or in part in any format or medium for non-commercial purposes, provided that it is reproduced accurately and not used in a derogatory manner or in a misleading context. The source should be acknowledged, by showing the publication title and © Care Quality Commission 2010.
Internet address	www.cqc.org.uk

Information about the care home

Name of care home:	The Good Companions
Address:	Criffel Street Silloth Cumbria CA7 4BT
Telephone number:	01697331553
Fax number:	01697331553
Email address:	info@goodcompanionscumbria.co.uk
Provider web address:	

Name of registered provider(s):	Good Companions Cumbria Ltd
Name of registered manager (if applicable)	
Mrs Jacqueline Derrane	
Type of registration:	care home
Number of places registered:	39

Conditions of registration:		
Category(ies) :	Number of places (if applicable):	
	Under 65	Over 65
dementia	38	0
old age, not falling within any other category	0	38
physical disability	1	0
Additional conditions:		
<p>The registered person may provide the following category of service only: Care home only - Code PC. To service users of the following gender: Either. Whose primary care needs on admission to the home are within the following categories: Old age, not falling within any other category - Code OP (Maximum places - 38), Dementia - Code DE (Maximum places - 38), Physical disability - Code PD (maximum places - 1). The maximum number of service users who can be accommodated is: 39.</p>		

Date of last inspection								
Brief description of the care home								
<p>The Good Companions is owned by Good Companions Cumbria Ltd with Mr Mark Newby being the responsible individual. The home is run on a day to day basis by Mrs Jacci Derrane. The home is situated in Silloth, a seaside town overlooking the Solway</p>								

Brief description of the care home

Firth. The Good Companions is an older property that has been adapted and extended for its present use as a care home. Accommodation for service users is on three floors that are served by a passenger lift and stair lifts. All of the bedrooms are for single occupancy, with all but two having en-suite toilet and washbasin facilities. There are three lounges and a large dining room and a smoking area for those residents wishing to smoke. The toilets and bathrooms are equipped to assist people with disability. There are well kept gardens around the building and car parking facilities are provided. The home does not provide intermediate care.

Full details of the facilities, services and weekly charges at The Good Companions may be obtained by contacting the manager.

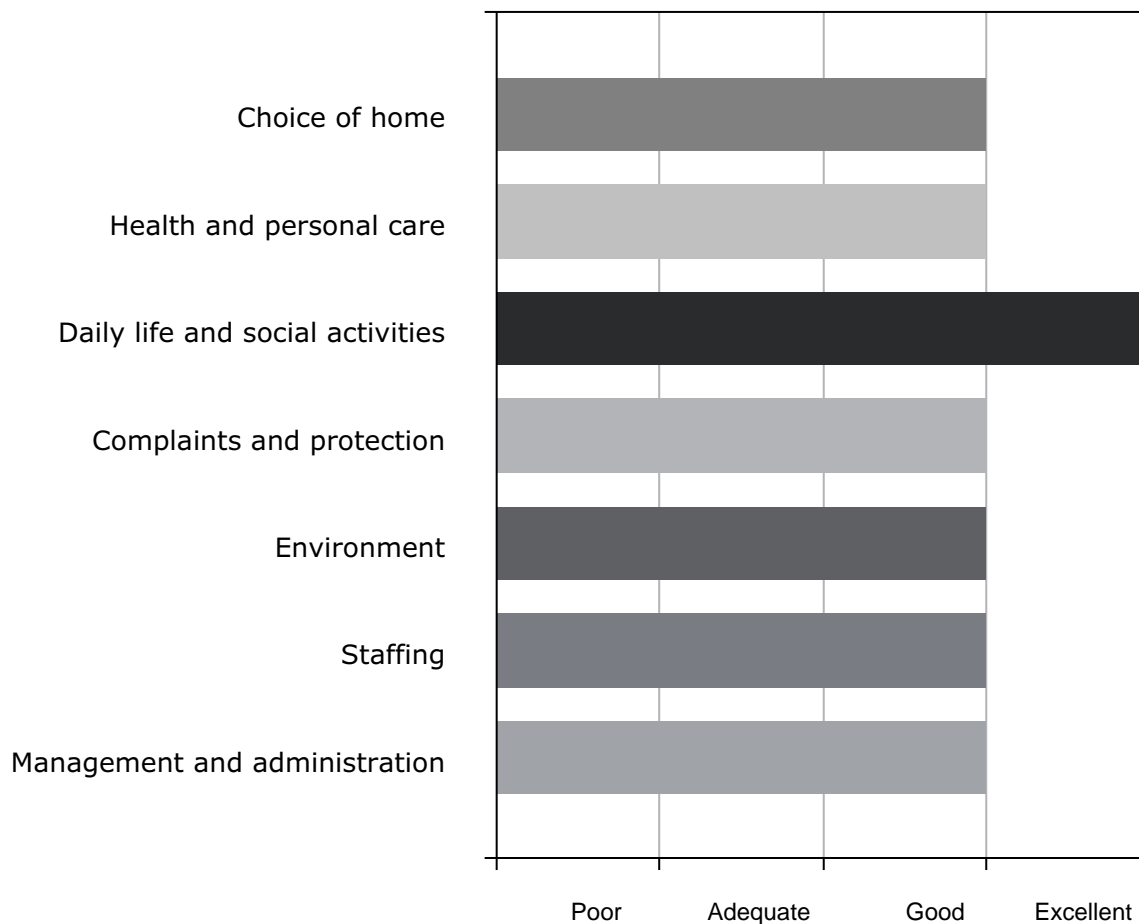
Summary

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

The quality rating for this care home is:

two star good service

Our judgement for each outcome:



How we did our inspection:

The inspection of this service took place over several weeks and included a visit to the service by a regulatory inspector and a pharmacy inspector. We took into account information received from previous inspection reports, returned survey questionnaires and that from other agencies when assessing this service. During our visits to the home we looked at a variety of records the home is required to keep, including those for the safe handling of medications.

What the care home does well:

The manager ensures that any person wishing to move into the home is fully assessed prior to an offer of accommodation being made. An invitation to visit the home to meet the staff and other residents is given and the manager encourages all the interested parties to take up the offer. The home has prepared an information pack that is available to anyone wishing to move in. This gives sufficient information for an informed decision to be made about moving into the home.

Each resident has a detailed plan of their care and support needs that is reviewed and updated on a regular basis. Care plans are developed after discussion with residents and taking into account information from the initial assessment of needs.

As part of the inspection a specialist pharmacist inspector visited the home on 27th May 2010 to check whether medicines were being safely handled. Overall we found some improvements had been made since our last visit but found further improvements in the medicines records are needed so that all medicines can be easily and fully accounted for.

We found some good improvements in the records of medicines given to people because they were now usually signed and up to date. When medicines had been omitted, for example, if they were refused, we found the key code was used properly and any other reasons for not giving them were clearly explained. When people had their medicines changed or had new medicines prescribed for them a good record of the GP visit was usually recorded. Since our last visit a new fridge had been obtained and this was secure.

We spoke to residents and visitors during our time in the home and they were all positive in their comments about the care and support provided. These included;

'My mother comes for regular periods of respite and I would not let her go anywhere else. The staff are so kind and caring'.

'The lasses are lovely and look after me very well'.

'I am well cared for. It is like home from home'.

'The manager and staff helped my relative to settle down when she moved in'.

'The service is a homely, caring environment'.

'I am satisfied with all the services my relative receives.'

Staff all agreed that they worked well as a team and they enjoyed their job. Comments from staff on returned surveys included;

'The complete package is well delivered. All areas of the home are excellent'

We also received comments from health care professionals that included;

'Happy environment, plenty of stimulation and there is nothing they could do better. would be happy to have myself in in 40 years'. (Doctor)

We found that staff are recruited safely and correctly and are now well supported in their work through supervision and personal development plans.

What has improved since the last inspection?

There have been a great many improvements made throughout the home since the last inspection in particular to the environmental standards.

A new roof is now in place that has stopped the damp seeping through. The bathrooms and showers have been improved making the bathing experience more pleasurable. New windows have been installed and locks have been fitted to bedroom, toilet and bathroom doors. Work to improve the external space has been completed and the building has been externally decorated. Internal decoration had been almost completed on the day of our visit.

Care plans have been improved to make them more person centred. Regular and informative reviews and updates are now being completed.

Staff supervision now includes personal development plans and reviews. Staff are able to take part in an incentive scheme that will provide financial rewards for performance.

We found some good improvements in the records of medicines given to people because they were now usually signed and up to date. When medicines had been omitted, for example, if they were refused, we found the key code was used properly and any other reasons for not giving them were clearly explained. When people had their medicines changed or had new medicines prescribed for them a good record of the GP visit was usually recorded. Since our last visit a new fridge had been obtained and this was secure.

What they could do better:

Records of medicines received into the home, given to people and disposed of must be clear, accurate and complete. This will help make sure all medicines can be fully accounted for and are safely handled.

Care plans and supporting paperwork should have detailed information about how medicines should be handled including when required medicines and medicines for external use such as creams.

Arrangements for the medicines rounds should be improved so that medicines are given at times that best suit the health needs of people who live in the home.

It is recommended that information regarding the care plan reviews should be recorded in such a way as to make it more easily accessible.

As a result of this visit we made one statutory requirement and three good practice recommendations that should be given consideration.

If you want to know what action the person responsible for this care home is taking following this report, you can contact them using the details on page 4.

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

Details of our findings

Contents

Choice of home (standards 1 - 6)

Health and personal care (standards 7 - 11)

Daily life and social activities (standards 12 - 15)

Complaints and protection (standards 16 - 18)

Environment (standards 19 - 26)

Staffing (standards 27 - 30)

Management and administration (standards 31 - 38)

Outstanding statutory requirements

Requirements and recommendations from this inspection

Choice of home

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

People are confident that the care home can support them. This is because there is an accurate assessment of their needs that they, or people close to them, have been involved in. This tells the home all about them 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.

People wishing to use this service are fully assessed prior to moving into The Good Companions. This helps to ensure that the home will be suitable and able to meet their needs appropriately.

Evidence:

The home has produced an information pack that is available to any person looking for accommodation for themselves or a family member. This contains the home's statement of purpose, residents guide, terms and conditions and a copy of the complaints procedure. There is sufficient information contained in the pack to allow any prospective resident make an informed choice about moving in to the home. Added to this the manager invites all interested parties to visit the home to look round and meet the staff and those already living in The Good Companions.

As part of the admissions process the manager visits the prospective resident to complete a full assessment of needs and living skills. This information will help her

Evidence:

decide if the home is suitable to meet the needs and requirements of any one wishing to move in. Information from social workers or health care professionals is also obtained to ensure all relevant information is to hand before an offer of accommodation is made. Copies of the original assessments are held on file as part of the care planning process.

Health and personal care

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

People's health, personal and social care needs are met. The home has a plan of care that the person, or someone close to them, has been involved in making. If they take medicine, they manage it themselves if they can. If they cannot manage their medicine, the care home supports them with it, in a safe way. People's right to privacy is respected and the support they get from staff is given in a way that maintains their dignity.

If people are approaching the end of their life, the care home will respect their choices and help them feel comfortable and secure. They, and people close to them, are reassured that their death will be handled with sensitivity, dignity and respect, and take account of their spiritual and cultural wishes.

This is what people staying in this care home experience:

Judgement:

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

All those living in The Good Companions have an up to date plan of care and once the arrangements for medicine management have been tightened this home will continue to provide an very good level of care.

Evidence:

During our visit to The Good Companions we looked at a sample of the records kept regarding peoples' care and support needs. We spoke to some of the care staff and observed their working practices.

During the last inspection of this service requirements were made with regards to the care plans and the information contained in them. At that time we felt that some of the recording was insufficient to enable staff to understand the needs of the residents and the level of care required. Since then, however, there has been a great deal of work completed to ensure the care plans are a working tool that provide relevant and up to date information about the residents and their assessed needs. Personal information about the residents is now clearly documented and care plans are developed with the help of the service users and information gathered during the pre-

Evidence:

admission assessment meeting. The plans now reflect the needs and expectations of the individual and how the staff can best ensure care is delivered appropriately.

Care plans included nutritional assessments and indicated where special diets may be required to ensure good nutrition is maintained. Weights are recorded and showed that, on the whole, these were consistent for all the residents.

Details of doctors visits are kept and also other health care professional visits. The home maintains good working relationships with the doctors and district nurses who provide support when necessary. Optical, chiropody and dental services are accessed as well as input from the mental health professionals when required. Risk assessments, including manual handling assessments are completed to ensure those who may have limited or poor mobility are able to remain as independent as possible.

All care plans are reviewed and updated at least once a month. Details of the reviews are recorded in the daily notes that have greatly improved since our last inspection. However, we did recommend that the details of the reviews are highlighted or recorded separately to ensure these are more easily accessed and read by all the care staff.

As part of the inspection a specialist pharmacist inspector visited the home on 27th May 2010 to check whether medicines were being safely handled. Overall we found some improvements had been made since our last visit but found further improvements in the medicines records are needed so that all medicines can be easily and fully accounted for.

We found some good improvements in the records of medicines given to people because they were now usually signed and up to date. When medicines had been omitted, for example, if they were refused, we found the key code was used properly and any other reasons for not giving them were clearly explained. When people had their medicines changed or had new medicines prescribed for them a good record of the GP visit was usually recorded. Since our last visit a new fridge had been obtained and this was secure.

However, we found the records of medicines received into home were not always complete. None of the current stocks of medicines had been dated on receipt and we found several examples of medicines not being recorded at all. Medicines that needed to be carried forward to a new monthly cycle were not always properly recorded and we found several examples of medicines not properly transferred to the current medicines records. Records of medicines disposed of were made in two different

Evidence:

places so this made auditing them sometimes difficult to do. Accurate records of medicines are important because they help make sure medicines are handled safely.

We looked at the times medicines were given and found some were not being given at the right and best time. Medicines that should have been given before food were not always given correctly because the medicines rounds had not been properly organised. We advised the manager to review the arrangements for the medicines round so medicines are given at times that best suit the health needs of people who live in the home.

Records of external medicines such as creams were not always completed by the care staff that handled them and there were gaps on some of the records so we could not be sure they were being used properly. One recently prescribed ointment that care staff said was being applied twice a day was not recorded on the current records so we could not be sure it was being used properly.

We looked at how when required medicines were handled and found little information about their use. Several people were prescribed pain relief medicines but there was no information about how and when they should be used. One person was prescribed a strong muscle relaxant but no formal plan about how this was to be used was in place and a recent mistake was made because a carer was unclear about the correct dose to give. We gave some general advice about how to improve this because having detailed information about how medicines should be used helps make sure they are given to people correctly.

We looked at how controlled drugs, medicines liable to misuse, were handled. Since our last visit a new register had been obtained and this was being used properly. Records were correctly witnessed and stocks levels were correct. Having properly witnessed, accurate records helps prevent the misuse and mishandling of controlled drugs.

We looked at how staff were trained and found good arrangements in place. Formal training had been repeated and the manager had assessed all staff by observing them administer medicines. Audits were carried out monthly by the manager and these had found some issues. However, these audits had not identified the problems we had found and did not include detailed checks of the stocks and records so we gave some general advice about how these could be improved. Having effective audits, regular training and thorough assessments of staff competency help make sure medicines are handled safely by suitably skilled staff.

Evidence:

As a result of this visit the pharmacy inspector made 1 statutory requirement and 2 good practice recommendations.

We received a number of comments from people living in the home about the way they were treated by the staff. We also received comments on survey forms that were sent to residents and relatives. These were all positive and included;

'My mother comes to the home for regular periods of respite and I would not let her go anywhere else. The staff are wonderfully kind and I have complete confidence in the manager and staff'.

'The lasses are lovely and look after me very well'.

'The service provides a homely and caring environment'.

Observations during our visit evidenced that the staff showed a very kind and caring attitude to all those living in the home.

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.

People living in The Good Companions are able to participate in a variety of social religious and leisure activities if they choose. This helps to ensure they can enjoy a relaxed lifestyle and maintain contact with friends, family and the local community.

Evidence:

The home employs a dedicated activities co-ordinator to organise activities and entertainment for those living in Good Companions. There is a copy of the weekly/monthly programme in every bedroom, which means that those living in the home and their visitors know what is happening from day to day. The programme includes, visiting entertainers, outings out to places of interest, shopping trips to Carlisle, Maryport and Workington. Staff organise a local tea dance in Silloth for residents and people from the local community. Other activities include fashion shows, bingo, armchair exercises, board and floor games. One gentleman told us that 'preferred to stay in his room and read his paper'. He was always invited but declined the offer. There was a visiting singer in the home on the day of our visit. He is a regular entertainer and is very popular with both residents and staff. There were sufficient staff on duty to make sure the residents had a good time whilst others were serving drinks and biscuits.

Evidence:

We were able to speak to some family members who were visiting the home. They told us their relative had been living in Good Companions for 3-4 weeks and had settled down very well. They were very impressed with the care she was receiving and said how good the staff were, particularly as the resident had great difficulty hearing. They were equally impressed with the meals. They also told us they were made very welcome when visiting and offered refreshments.

Routines within the home are sufficiently flexible to ensure the residents have a very relaxed lifestyle. There are no restrictions about times of going to bed or getting up and all residents choose how they wish to spend their day. One resident likes to dust her room and continues into the corridors and reception area. When we were last in the home she said she had 'cleaned her home all her life and still liked to do so'.

Another resident was sitting in his room and spoke to us about life in the home. He was reasonably happy but sometimes sad because he realised that he 'could no longer live at home on his own' . He said 'the lasses are lovely and look after me very well'.

One visitor who had just brought her mother to the home for her usual respite break particularly asked to speak to the inspector. She told us that, 'even after reading the the last inspection report she would not let her mother go anywhere else for respite care'. She added, 'the staff are wonderful and my mother always looks better when she goes home after her break'.

Church services take place and visiting clergy visit to give Communion to those wishing to take it. This ensures spiritual support is available for those who had involvement with their church prior to moving in to the home.

Meals and menus are given a high priority and all the residents we spoke to told us how much they enjoyed their meals. Residents are given at least 2 choices at every meal usually more than this as special requests are always met. The kitchen is well-organised as the cook prepares meals on wheels for the community and also for the local luncheon club.

Special diets are catered for in accordance with the nutritional assessments recorded on the care plans. All cakes and pastries are home made with very little purchased from the suppliers. There are currently no vegetarians in the home.

Meals are served directly from the kitchen area and residents who may need assistance are supported in a calm and unobtrusive manner.

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.

People using this service know their complaints or concerns will be listened to and acted upon. Residents are safeguarded at all times.

Evidence:

There is a complaints procedure in place, a copy of which forms part of the introduction pack available to those looking for accommodation. There are also copies around the home for people to read. There have been no complaints made since the last inspection and we have not received any. Staff are now aware of their roles and responsibilities in reporting any incidents or concerns to the head of care or registered manager. Any complaints are normally investigated within the timescale set down in the complaints procedure.

There are policies and procedures in place to support the safeguarding of vulnerable adults. Staff training in this topic has been completed and this is discussed in the induction programme and will form part of the staff supervision process. Care is taken when recruiting staff to ensure all legal checks are complete and all staff have enhanced Criminal Records Bureau checks in place before starting work. These checks ensure that only suitable people are recruited to work in this service.

The manager now ensures that Social Services are informed of any incidents that may occur and also inform the Care Quality Commission through regulation 37 notifications.

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 home is now maintained to a good standard and people living in The Good Companions are provided with a warm, comfortable and safe environment in which to live.

Evidence:

The Good Companions is an older building that has been extended and adapted for its present use as a care home. Resident's accommodation is over three floors that are accessed via a passenger lift and stair lift.

During our last inspection requirements were made with regards to the environmental standards throughout. Since then a great deal of work to improve the standards has been completed with internal decoration almost complete.

The whole of the building has been re-roofed, which has meant that damp will no longer be a problem. All the windows have now been replaced and locks have been fitted to the bedroom doors. Locks have also been fitted to the communal toilets and bathrooms. Tiles in the bathrooms have been replaced or re-grouted and bathrooms decorated. The base and flooring has been replaced in the shower on the first floor and the shower room on the lower ground floor has been re-furbished. An extractor fan has been installed in the ground floor smoking room and the hairdressing room has been re-furbished. The outside space has been improved making it more accessible

Evidence:

and enjoyable for those living in the home. External decoration has been completed and the decorators were completing internal decoration on the day of our visit. All in all these improvements have meant that The Good Companions is a much more pleasant place to live and work in.

We looked at a selection of residents' rooms and found them to be pleasant and comfortable although some were a little small. The residents we spoke to were, however, pleased with their accommodation. They were all personal to each resident with pictures, ornaments and photographs. Residents had also brought in radios and televisions from home.

Communal space is provided by a large lounge on the ground floor and a smaller one on the lower ground floor. Residents also like to sit in the large reception area. The bright, airy dining room is on the ground floor adjacent to the kitchen from where the meals are served.

Some rooms have en-suite facilities and there are sufficient communal toilet facilities around the home for use by residents. A new toilet has been installed on the ground floor near to where residents sit.

There is garden space for the residents to use and car parking facilities to the side of the building.

The home employs domestic staff and the home was very clean the day of our visit. The manager is currently looking to employ a week-end domestic to assist those that work during the week. There is protective clothing provided for the staff to assist with cross infection.

The home has a supply of hoists and other equipment to assist people who may have mobility difficulties and there are handrails on all corridors to help with movement throughout the home.

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.

People living in The Good Companions are supported by an experienced and trained staff team.

Evidence:

The Good Companions is registered to support up to 39 older people but there are usually a maximum number of 37 residents as the 2 rooms registered to accommodate 2 people are currently used for single occupation.

We looked at the staffing rotas and noted that there sufficient staff on duty to provide a high level of care to those living in the home. When we arrived the staff were busy assisting people to get up or serving breakfast. There are 5 carers plus the newly appointed head of care on duty in the morning. This is reduced to 4 carers plus the head of care in the afternoon. During the night there are 2 carers on duty but the manager assured us that extra night staff would be used should the need arise. Hospice at home has been used in the past to supplement the night staff when this has been necessary. In addition there is the manager who works Monday to Friday, the administrator, domestic staff and catering staff. The home also employs dedicated staff to organise activities and outings. As the day progressed, although the staff were busy they still had time to spend with the residents in the lounge or their rooms. Many of the staff have worked at the home for a number of years and this has provided a consistency of care to all that live in the home.

Evidence:

Currently there is 93% of the care staff qualified to NVQ level 2 or 3 with a further 5 working towards the award. Staff training is ongoing with much of it provided by an external training company. Training has been completed in the mandatory subjects such as manual handling, food hygiene, health and safety with other courses completed in aggression and challenging behaviour, dementia awareness, medication, first aid and recording and reporting events. We did recommend that the manager looked to accessing further training in human rights and the deprivation of liberty.

Staff recruitment is good in that all those wishing to work in this service must complete an application form, provide the names of 2 referees, one of which must be the current employer and attend for a formal interview. All legal checks are completed before any staff start work and these include enhanced Criminal Records Bureau and Safeguarding of Vulnerable Adults checks. This ensures only suitable people are recruited to work in this service and ensures the safety of those living there.

There is a staff handbook available and new starters are given a copy of the General Social Care Council's code of conduct.

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 manager is now providing constant leadership within the home, which means that those living there receive a safe and satisfactory service.

Evidence:

The Good Companions is managed by an experienced and qualified manager. She is a registered nurse and has completed the registered manager award and takes part much of the training organised for the staff team. Prior to the last inspection in January of this year she had spent much of her time away from the home on other projects within the organisation. This has since stopped and she is now spending all her time managing this service. This has ensured that all the requirements and recommendations made as a result of our last visit have been fully met.

There is a warm and friendly atmosphere in the home and this was evidenced by the interaction between the staff and the residents. We were able to speak to some visitors and they remarked how friendly the staff were and that the manager 'had helped with the admission of their relative'.

Evidence:

A new customer services manager has recently been appointed to work between the two services in the organisation and he will be looking at customer satisfaction and internal quality auditing. There is to be a monthly audit carried out by an external auditor and the first visit had been completed the day before our inspection. Annual quality surveys are also sent to residents and relatives. The home has also applied for the award Investors in People and the first meeting has already taken place.

There are only small amounts of residents' personal monies held at the home with records kept to support any incoming cash or out going expenditure.

Staff supervision has improved since our last visit. All the staff now have a personal performance plan and are subject to a regular personal development review as part of their staff supervision.

The responsible individual has introduced a bonus scheme as an incentive for staff to maintain their personal and professional development. All staff have been supervised by the manager since the last inspection and are now aware of what is expected from them when working as part of the staff team.

The manager is now ensuring that the Care Quality Commission is notified off all incidents that relate to the health and well-being of those that live in the home.

All risk assessments are now in place and up to date.

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

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

Statutory requirements

These requirements set out what the registered person must do to meet the Care Standards Act 2000, Care Homes Regulations 2001 and the National Minimum Standards. The registered person(s) must do this within the timescales we have set.

No.	Standard	Regulation	Requirement	Timescale for action
1	9	13	Records of medicines received into the home, given to people and disposed of must be clear, accurate and complete. This will help make sure all medicines can be fully accounted for and are safely handled.	30/06/2010

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	7	It is recommended that the details of the care plan reviews be highlighted or recorded separately.
2	9	Arrangements for the medicines rounds should be improved so that medicines are given at times that best suit the health needs of people who live in the home.
3	9	are plans and supporting paperwork should have detailed information about how medicines should be handled including when required medicines and medicines for external use such as creams.

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
4	30	It is recommended that the manager access staff training in Human Rights and the Deprivation of Liberties.

Helpline:

Telephone: 03000 616161

Email: enquiries@cqc.org.uk

Web: www.cqc.org.uk

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.

Copyright © (2009) Care Quality Commission (CQC). This publication may be reproduced in whole or in part, free of charge, in any format or medium provided that it is not used for commercial gain. This consent is subject to the material being reproduced accurately and on proviso that it is not used in a derogatory manner or misleading context. The material should be acknowledged as CQC copyright, with the title and date of publication of the document specified.