



Making Social Care
Better for People

inspection report

CARE HOMES FOR OLDER PEOPLE

The Old Vicarage

**Fig Tree House
Front Street
Churchill
North Somerset
BS25 5NG**

Lead Inspector
Juanita Glass

Unannounced Inspection
12th March 2008 10:30

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	The Old Vicarage
Address	Fig Tree House Front Street Churchill North Somerset BS25 5NG
Telephone number	01934 853211
Fax number	01934 853451
Email address	care@theoldvicarageresidentialhome.co.uk
Provider Web address	
Name of registered provider(s)/company (if applicable)	Mr William Dunnett Jackson
Name of registered manager (if applicable)	Mr William Dunnett Jackson
Type of registration	Care Home
No. of places registered (if applicable)	19
Category(ies) of registration, with number of places	Old age, not falling within any other category (19)

SERVICE INFORMATION

Conditions of registration:

Date of last inspection 23rd October 2006

Brief Description of the Service:

The Old Vicarage is just off the A38, in the village of Churchill. It is registered to provide personal care to up to 19 people over the age of 65 years. They aim to provide a high standard of care in a homely atmosphere. They do not offer nursing care but receive support from the local GP practice.

There are 17 single bedrooms and 1 double. All have en-suite facilities and all have a pleasant outlook. Some have French doors onto the garden allowing freedom to explore the well-maintained very pleasant gardens. The house is decorated and furnished to a high standard. There is a main lounge and a conservatory area as well as a dining room. A passenger lift gives access the first floor. There is an emergency call system throughout.

Current fees are:

Single room per week £455

Double room occupied by one per week £540

Double room occupied by two per week £764

Short term respite

Single room per full week £510

Single room up to three days £98 per day

Single room for more than three days up to one week £88 per day.

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.

This unannounced inspection took place over one day in the presence of the Deputy Manager. A total of 6 hours were spent in the home.

Evidence to support the findings of this inspection was obtained through written surveys from people living in the home and their relatives. Responses to our written survey were received from 6 people living in the home, and 4 relatives.

An Annual Quality Assurance Assessment (AQAA) was completed by the homeowner and forwarded to the Commission for Social Care Inspection (CSCI). The AQAA is a self assessment that focuses on how well outcomes are being met for people using the service. It also provides some numerical information about the service.

We also carried out a review of documentation in the home. This included documentation in people's care plans, staff personnel records and records maintained for the day-to-day running of the home.

Whilst in The Old Vicarage we discussed the care provided with 4 people living there both on a one to one basis and in a group. We also spoke to 1 relative, 2 staff members working on the day of the inspection and the deputy manager.

What the service does well:

The Old Vicarage continues to provide a homely atmosphere for the people living there. As in previous inspections people spoken to said they were very happy living in the home. One person said 'if I wasn't happy I wouldn't be here. They help me live the life I want to and are very caring.' Another person said they felt that living in the Old Vicarage was as close as they could get to living in their own home now they needed care and support. One relative said they were very happy with the care and the communication between them and the managers, they said it was really nice that their relative was able to remain in an area that enable them to maintain contact with friends and family.

People living in the home are encouraged to keep their individuality, with consideration being made for personal preferences likes and dislikes. People spoken to said the care and food was of a very good standard. Lunch time was a social event which people said they enjoyed.

What has improved since the last inspection?

All the requirements from the last inspection had been met. This meant that the home had appropriate storage required for medication kept in the home. All toiletries were personal to the individual and all staff have received up to date fire instruction

What they could do better:

No requirements were made as a result of this inspection

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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Staffing (Standards 27-30)

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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, 3 and 5. 6 does not apply
Quality in this outcome area is **good**.

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

People intending to move into The Old Vicarage benefit from plenty of up to date information to help them make an informed choice and a chance to visit the home before they make the final decision. They are not offered a place unless the manager is confident the home can meet their needs.

EVIDENCE:

The homes Statement of Purpose has been reviewed and reflects the service provided by the home. A copy of the Service User guide is made available on request.

Three care plans were reviewed they all contained pre admission assessments which identified the specific needs of the prospective resident. The deputy manager confirmed that they would only take new residents when they were sure they could meet their needs. The pre admission assessment forms the basis of the full care plan, which is then agreed with the resident or relative when the resident is unable to express an opinion. The manager takes into consideration people's personal preferences, likes and dislikes to form a comprehensive plan of their needs.

People wishing to move into the home are offered the chance to visit and spend some time there when they can talk to staff and residents about their experiences. People living in the home did not comment on their experience of looking for a home. One comment noted in the homes Quality Assurance questionnaire stated that the admission process had been smooth and their relatives had settled in well.

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 and 10

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

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

People living in the home benefit from clear guidelines that enable them to receive care in a person centred way respecting their right to equality, privacy and dignity. They are also protected by robust policies and procedures for the Administration of Medication.

EVIDENCE:

We looked at three care plans chosen at random. They were all written in a way that reflected the personal needs of the person rather than a group of people or tasks that needed completing. The home uses a three folder system that means a copy is kept in the residents room so they can also read their care plan. All the care plans we looked at included the likes and dislikes and life history. Staff spoken to were clear about the way they looked after people living in the home. They knew they could read care plans to find out their personal likes and dislikes. The staff could also identify specific health care needs people had. The care plans also gave them clear guidelines about types of illnesses and conditions. People living in The Old Vicarage were happy to talk about their experience of being in the home. One person said they were very well cared for and the staff were very friendly. Another person said nothing was too much for the people working in the home. Whilst a third person said 'the staff always treat me with respect I sometimes feel like the lady of the manor.' We spoke to one relative who was very pleased with the care being provided. They said they felt that staff made the care a pleasant experience rather than a chore and had always witnessed a caring and respectful approach.

We watched the way staff spoke to people living in the home they were polite and respectful treating everyone as individuals. Some care staff in particular was noticed to have a very close rapport with some of the people living in the home. The care plans we looked at showed people living at The Old Vicarage continued to have access to healthcare specialists such as the dentist, the optician, the chiropodist and the diabetic nurse.

We carried out a random audit of the medication administration record sheets there were no errors found. We observed staff administering medication and the procedure was carried out correctly. Controlled medication was appropriately stored and records were maintained to monitor the stock.

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 living in the home benefit from appropriate activities that reflect their personal likes and dislikes. They are offered a balanced and nutritional diet, which is flexible and respects personal preferences and cultural backgrounds.

EVIDENCE:

The home provides a program of meaningful activities for residents and sufficient staff resources are in place to meet these needs. Activities are advertised on a notice board in the hall. A record is maintained, showing that residents enjoy a variety of activities appropriate to their needs and likes and dislikes. Residents also enjoy going out for walks in the village or in the garden. One resident went for a stroll in the garden on the day of the inspection. Others said they were looking forward to the warmer weather when they would sit in the garden. All residents spoken to said they could take part in an activity or opt out if they wished. There is a well library and a quiet area where people can sit and read or have a chat.

Throughout the inspection residents were observed maintaining choice and autonomy. They chose where they spent the day and whether they took part in an activity or not. Residents able to express an opinion said they had a choice.

The current menus provide a choice of meals all prepared with fresh vegetables. Residents' likes and dislikes and cultural preferences are taken into consideration when the menus are reviewed to reflect the season. Staff were aware of individual needs and whether a resident would require assistance. All residents chose to eat lunch in the dining room and the meal was a relaxed social affair. Residents said they always had a very good meal and could make requests that were listened to.

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 living in the home are protected by very clear policies and procedures that make it possible for them to feel they can raise issues and concerns with the manager and staff. Policies and procedures also included very clear guidelines protecting vulnerable people from abuse and neglect.

EVIDENCE:

The home's complaints policy and procedure shows a clear timeline and action to be taken in event of a complaint. A copy is clearly displayed in the home and in resident's rooms; subsequent copies are available on request. The policy and procedure also directs the complainant to the CSCI.

A clear record is maintained by the manager of all complaints or concerns raised by anyone involved with the home. This record includes the action taken and the eventual outcome. It was evident that the manager deals with complaints in an open and inclusive way. The manager views any complaint or concern as a learning process enabling them to improve the service provided in the home. Residents spoken to said they knew who they could talk to and would be happy that their concerns were being dealt with.

Staff spoken to were all aware of the homes policy and procedure for the safeguarding of vulnerable adults. They had all attended appropriate training and they all confirmed that they also knew of the homes whistleblowing policy and would be prepared to use the policy if they felt someone was being placed in an abusive situation.

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, 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 living in The Old Vicarage benefit from a comfortably furnished homely atmosphere. They are encouraged to personalise their room so that it reflects their interests and family. They are protected by clear Infection Control procedures followed by staff.

EVIDENCE:

We carried out a tour of the premises and looked in two private bedrooms with permission of the residents. All areas of the home were very clean and tidy and showed evidence of regular maintenance.

We spent some time in the lounge area talking to residents; they said they liked the homely feel of The Old Vicarage. They also said that they felt they could sit anywhere they chose including the garden in warmer weather.

Resident's rooms reflected their lives with personal photographs and pictures. All residents spoken to said they liked their rooms which they felt reflected home from home with their personal possessions around them.

Infection control in the home is of a good standard and staff exhibited an awareness of the importance of observing strict measures. Appropriate protective clothing was provided and staff confirmed that they had ample supply. Since the last inspection all hazardous chemicals are safely stored.

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 in the home benefit from staffing levels that are flexible and staff who have the skills and training to meet their needs. They are protected by the homes robust recruitment procedure, which the manager follows.

EVIDENCE:

We looked at past and present duty rotas, they showed that there is consistently a good skill mix of staff working at anyone time in the home. Staffing levels are flexible so extra staff can be on duty to cover events in the home, trips out or increased needs of people living there. Staff felt that although they were busy they had plenty of time to spend with residents to talk or spend time with them without feeling understaffed or over pressured. We observed staff working in the home they were cheerful and relaxed, residents said they never felt that the home was understaffed and because of the low turn over of staff they felt they knew everybody very well.

The registered provider is committed to enabling staff to continue with personal development and training. We looked at the training records for the care staff. All mandatory training had been attended and people had also attended training in areas that were specific to the needs of people living in the home. Staff spoken to said they received support to attend training and to obtain their NVQ in Health and Social Care. Staff training certificates is made available in the hall for residents and visitors to read.

The home has very robust policies and procedures for the recruitment of new staff. We looked at staff personnel records to check that these policies and procedures were being followed. All new staff members had all the relevant documentation in place. This showed that they did not start work in the home until a POVA 1st, CRB and two references had been received. This protects people living in the home from potential harm. All new staff completes a full induction and only work unsupervised when they have been assessed as competent to do so.

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, 33, 35, 36 and 38

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

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

People living at The Old Vicarage benefit from a manager with knowledge of the diverse needs of people in the home, who maintains an open and inclusive atmosphere. They are protected by a robust procedure for managing resident's money. Their opinions are sort to support the homes Quality Assurance process. Adequately supervised staff and a robust health and safety policy and procedure protect people from harm.

EVIDENCE:

Mr Jackson is the registered manager for the home he has the City and Guilds 325-3 in Advanced Management for Care, he has a Diploma in Management Studies . Mr Jackson is assisted by the care manager who has taken on many of the management tasks she is currently studying the NVQ level 4 in Health and Social Care.

The home does not generally manage money on behalf of residents however they have three residents who have requested they manage their personal finances. An audit trail is available for income and expenditure and all three amounts balanced when checked.

Formal staff supervision has been carried out for all staff working in the home, a clear record is maintained and this supports staff in recognising personal development and training needs. Staff spoken to said they received support with areas they felt uncertain in and could talk to the manager at any time as well as the formal dates set.

The deputy manager confirmed that a Quality Assurance process is carried out every six months . When this is completed a report is produced and presented to residents at their resident meeting. This would include looking at all areas of the home and taking into consideration comments raised by people living in and involved with the home. The AQAA is also used as a Quality Assurance tool giving a clear detail of how the home has improved the service they provide over the last year. Residents spoken to said they felt they had been asked about the service they received and felt they could talk to the manager and request changes if necessary.

Records relating to servicing of equipment in the home were reviewed. All records were up to date and available for inspection. The implementation of health and safety within the home was satisfactory. All residents have personal risk assessments. Generic risk assessments are in place and reviewed regularly. A review of the firelog showed all tests, training and drills were being carried out to the Avon and Somerset Fire Brigade guidelines.

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	3
6	N/A

HEALTH AND PERSONAL CARE	
Standard No	Score
7	4
8	3
9	3
10	3
11	X

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	4
20	X
21	X
22	X
23	X
24	3
25	X
26	X

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

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

Are there any outstanding requirements from the last inspection? NO

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

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

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