



Making Social Care  
Better for People

Inspecting for better lives

# Key inspection report

## Care homes for older people

<b>Name:</b>	Red House
<b>Address:</b>	St Annes Road Bridlington East Yorkshire YO15 2JB

<b>The quality rating for this care home is:</b>	three star excellent service
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A quality rating is our assessment of how well a care home, agency or scheme is meeting the needs of the people who use it. We give a quality rating following a full assessment of the service. We call this a 'key' inspection.

<b>Lead inspector:</b>	<b>Date:</b>
Jo Bell	2 1 0 1 2 0 0 9

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

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

**Outcome area (for example Choice of home)**

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

This box tells you the outcomes that we will always inspect against when we do a key inspection.

This box tells you any additional outcomes that we may inspect against when we do a key inspection.

**This is what people staying in this care home experience:**

Judgement:

This box tells you our opinion of what we have looked at in this outcome area. We will say whether it is excellent, good, adequate or poor.

Evidence:

This box describes the information we used to come to our judgement.

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

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- Put the people who use social care first
- Improve services and stamp out bad practice
- Be an expert voice on social care
- Practise what we preach in our own organisation

Our duty to regulate social care services is set out in the Care Standards Act 2000.

## Reader Information

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Internet address	<a href="http://www.csci.org.uk">www.csci.org.uk</a>

## Information about the care home

Name of care home:	Red House
Address:	St Annes Road Bridlington East Yorkshire YO15 2JB
Telephone number:	01262676836
Fax number:	01262401183
Email address:	
Provider web address:	

Name of registered provider(s):	Humberside Independent Care Association Limited
Name of registered manager (if applicable)	
Mrs Gail Burns	
Type of registration:	care home
Number of places registered:	48

Conditions of registration:		
Category(ies) :	Number of places (if applicable):	
	Under 65	Over 65
dementia	0	48
old age, not falling within any other category	0	48

Additional conditions:

To admit one service user under 65 years of age.

Date of last inspection								
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Brief description of the care home

Red House provides residential care for older people, some of who may have a dementia type illness. The building is single storey and purpose built and is situated in the seaside resort of Bridlington. The building comprises two units; Bayle and Burlington. All bedroom accommodation is provided in single rooms, some of which have an en-suite facility. The home is located in a residential area of Bridlington and is within walking distance of the seafront, shopping centre and other local facilities. Public transport passes the door. There is a car park. Communal toilets and bathrooms are suitably positioned throughout the home. There is a large secure and private outdoor garden and seating area. The standard fees charged by the home range from

### Brief description of the care home

395pounds to 440pounds with additional charges made for hairdressing, chiropody, toiletries etc. Red House provides information about the home to people in its Statement of Purpose and Service User Guide. The latest inspection report is also readily available.

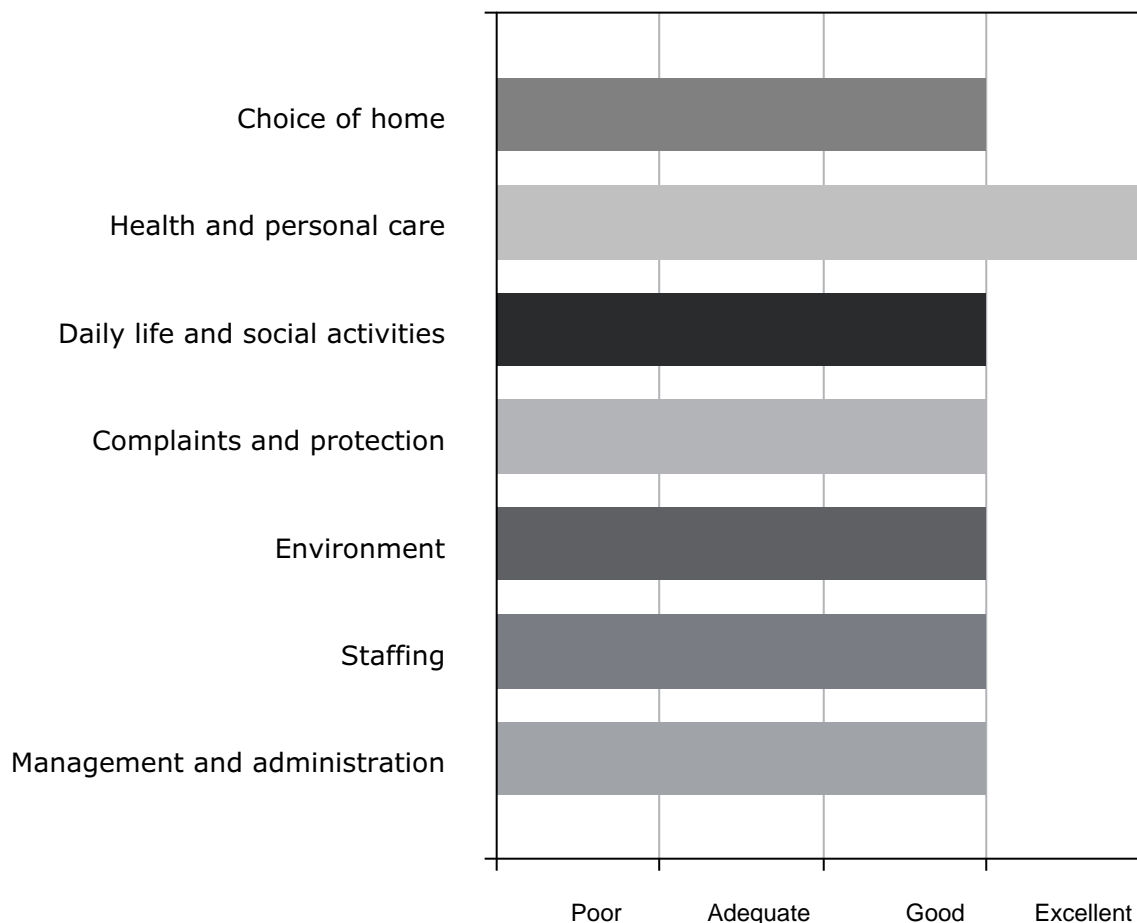
## Summary

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

The quality rating for this care home is:

three star excellent service

### Our judgement for each outcome:



### How we did our inspection:

The quality rating for this service is 3 star. This means the people who use this service experience excellent quality outcomes.

We have reviewed our practise when making requirements, to improve national consistency. Some requirements from previous inspection reports may have been deleted or carried forward into this report as recommendations, but only when it is considered that people who use services are not being put at significant risk of harm. In future, if a requirement is repeated, it is likely that enforcement action will be taken.

We went to the home without telling them that we were going to visit. This report follows the visit that took place on Wednesday 21st January 2009. The visit lasted from

9:30 until 15:30.

The purpose of the visit was to make sure that the home was operating and being managed in the best interests of people living there. Information has been used from different sources for this report. These sources include- Reviewing information that has been received about the home since the last inspection.

The annual quality assurance assessment. This is information which details what has happened during the past 12 months, along with the Annual Service Review.

10 Surveys from people using the service, five staff, and three health care professional survey.

Notifications (Regulation 37) relating to incidents in the home affecting people using the service.

Details of complaints and allegations raised by people connected to the service.

Progress of the previous recommendations made at the last site visit.

At the site visit one inspector spent 6.0 hours at the home. During this time observations of care practises took place. People using the service were spoken with along with some relatives. Discussions with the manager regarding meeting needs, mealtimes, protecting people and the environment took place. The lunchtime meal was observed and time was spent inspecting care plans, looking at individual rooms and reviewing a selection of health and safety information. Staffing and management issues were discussed and feedback was given to the manager at the end of the inspection.

### **What the care home does well:**

The home is well managed and run in the best interests of people using the service and their families.

The home offers a high standard of care in a pleasant environment. Staff understand individual needs because of the effective gathering of information, at the assessment stage and when formulating a care plan.

People are able to enjoy a wide range of activities which are planned and effectively facilitated.

The manager deals with concerns and complaints in a robust manner, this prevents issues becoming more serious.

### **What has improved since the last inspection?**

Clients are now matched to members of staff during the assessment process, this is to ensure they are compatible. Delivering care is then more likely to be positive for the person using the service.

Activities which people participate in are recorded in more detail and choices and preferences are considered.

People have access to an advocacy service, this ensures people with communication difficulties or people without a next of kin are able to express their views.

The induction process is more robust so staff are developing more in depth knowledge of this client group.

Part of the environment has had new floorings and furniture. This is easier to maintain.

### **What they could do better:**

The furniture in the dining room could be improved.

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

The report of this inspection is available from our website [www.csci.org.uk](http://www.csci.org.uk). You can get printed copies from [enquiries@csci.gsi.gov.uk](mailto:enquiries@csci.gsi.gov.uk) or by telephoning our order line -0870 240 7535.

## Details of our findings

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## Choice of home

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

People are confident that the care home can support them. This is because there is an accurate assessment of their needs that they, or people close to them, have been involved in. This tells the home all about them and the support they need. People who stay at the home only for intermediate care, have a clear assessment that includes a plan on what they hope for and want to achieve when they return home.

People can decide whether the care home can meet their support and accommodation needs. This is because they, or people close to them, have been able to visit the home and have got full, clear, accurate and up to date information about the home. If they decide to stay in the home they know about their rights and responsibilities because there is an easy to understand contract or statement of terms and conditions between them and the care home that includes how much they will pay and what the home provides for the money.

**This is what people staying in this care home experience:**

Judgement:

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

People are effectively assessed prior to admission, which helps to ensure individual needs can be met.

Evidence:

The three pre-admission assessments looked at confirmed that a senior person completes an assessment before an individual moves to the home. This is to check what type of care and support the person needs and whether the staff have the skills and knowledge to provide that care if the individual chooses to move there. The process also reassures the individual and their family that they will receive the right support.

Assessments are completed if the person has a care manager or is privately funded. These detail health, personal, nursing, social and mental health needs. All the surveys completed by people living there report that people are given enough information

Evidence:

about the service and what it provides. This means they can make an informed choice about whether to move there or not.

The manager is aware of the registration categories which enables her to accept older people with or without dementia care needs. The Annual Quality Assurance Assessment confirms that a thorough assessment of all prospective clients is carried out prior to agreeing the admission. During the past 12 months more families have been involved with this process.

Intermediate care is not offered at this home.

## Health and personal care

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

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

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

This is what people staying in this care home experience:

Judgement:

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

People have their health and personal care needs met in a dignified manner.

Evidence:

During the visit people were observed looking clean and well cared for. Attention had been paid to the cleanliness of teeth, hair and nails. Four care plans were looked at during this visit. These describe the care and support people need to stay in charge of their own lives as much as possible. The plans looked at contained a lot of information, so that an unfamiliar carer could look at them and would be able to work out how much support they needed. Detailed life histories had been obtained and these gave an excellent picture of the person's life before they moved into the home. Key workers are now more involved with updating care plans. There were written assessments as to whether people were at risk of developing pressure sores, of losing weight because of poor appetite or a health problem or needing help with moving and handling. Those identified as 'at risk' had a care plan in place describing how that risk was to be managed. Plans had been robustly reviewed and evaluated and input from families was evident. People are monitored for continence aids and staff ensure this issue is

Evidence:

dealt with sensitively and respectfully.

The medication system was inspected and this was found to be up to date and accurate. Medication charts showed that people have their medication administered, and recorded correctly. Fridge temperatures are taken and controlled drugs are understood and safely stored. Staff undertake medication training and they are knowledgeable regarding different types of medication. Three staff have been inducted into senior personal carer posts and are on hand to help with administering medications, meeting with health care workers and Doctors, and to support with in depth inductions into the home. This was discussed in the annual quality assurance assessment.

Privacy and dignity is understood and respected. People have personal possessions in their room and telephones can be fitted in individual bedrooms upon request. Staff interacted positively with people on both the unit for older people and the unit for people with dementia care needs. One comment was "the staff are wonderful", another person said "its just lovely here, staff really look after me".

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

People participate in a range of activities and visitors are welcomed. Staff encourage autonomy and choice, and people enjoy dining in pleasant surrounding with appealing food.

Evidence:

People are able to participate in a range of activities. A designated co-ordinator is available five afternoons a week and helps facilitate activities throughout the home. People enjoy music, quizzes, the television, reading, spending time in the garden and having one to one chats with staff. Some people enjoy church services and arts and crafts. Activities are discussed at Key Worker training held in house, and families are encouraged to offer suggestions and take part in activities or entertainment. Consideration is given to people with dementia needs and lava lamps, pictures and relaxation sessions are offered to individuals in their own rooms. Next month formal activity training will be offered for the whole care staff team. One person said "there are lots of activities, but I prefer to watch the television". Another comment was "I like spending time on my own, which staff respect". The home have an advocacy service which is accessible to clients and their families. Staff are also aware of the Mental Capacity Act which may affect people on the dementia unit.

## Evidence:

The lunchtime meal was observed. People are offered a choice of food and drinks and assistance is given as needed. Food is home cooked with a mix of fresh and frozen vegetables available. Portion sizes are variable depending on individual needs and plate guards and different drinking vessels are offered as needed. Surveys confirmed that people are happy with the food and drink provided. The manager audits the food and discussions take place with the catering staff regarding people's likes and dislikes.

## 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 have their concerns listened to and acted upon, with staff been alert to signs of abuse. This helps keep people safe.

Evidence:

The home have a complaints procedure in place which people and their visitors are aware of. This is discussed at the admission stage and a copy of this is displayed in the home. The manager completes a complaints audit and fully understands how this should be completed. Any issues tend to be dealt with at the concern stage before they become a formal complaint. These are still recorded though. Surveys confirmed that people know how to complain and who to go to.

Staff spoken to were aware of the safeguarding procedures in place. Staff have completed abuse awareness training, and staff knew about the different types of abuse and the action to take if an abusive situation occurs. The home have a policy in place and staff are encouraged to use the 'Whistle Blowing' policy. All staff have a protection of vulnerable adults check prior to starting work in the home and refreshers are given to staff regarding abuse awareness procedures.

## 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.

People live in a comfortable and clean environment

Evidence:

People enjoy living in this environment. Surveys confirmed that the home is clean and fresh. The home has two distinct areas. One for people with dementia care needs and the other for older people with personal care needs. All areas observed were clean and well-maintained. Health and safety procedures are followed and audits regarding effective maintenance are in place. There is a redecoration plan (stated in the annual quality assurance assessment) in place which is evident. The dining room area does need updating and this was discussed with the manager.

During the past twelve months there has been additional and flexible domestic hours put in place. Any malodorous are quickly addressed and systems are in place to maintain a high level of cleanliness. Staff receive infection control training and protective clothing and hand washing techniques were used throughout the visit.

People were observed wearing clean and well ironed clothes, the sluice facility is adequate and the laundry system works well.

## 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 are cared for by staff who are competent, well trained and recruited and in sufficient numbers to meet individual needs.

Evidence:

At the site visit there were forty six people living in the home. There is a high dependency unit and a dementia unit. Surveys returned gave a mixed response regarding availability of staff, some people felt staff were "always" available, whilst others thought "sometimes". Call bells were observed been answered quite promptly and no-one had to wait a long time for assistance. Staff spoke in a pleasant manner and people responded positively to this. It would be beneficial if the staffing levels overnight were reviewed, sometimes there are three staff for forty six people. The dependency levels need to be considered to ensure people's safety or well-being is not affected.

Care staff complete NVQ Level 2 or 3 in care, and there is a new format for staff supervision. This is pertinent to the job role of each person. Staff complete induction training (equivalent to Skills for Care) and this covers orientation, care practises and health and safety. This helps ensure that staff are skilled and competent in dealing with older people.

Evidence:

Staff are safely recruited, with two written references, a police check and protection of vulnerable adults check completed prior to starting work. Staff files and the annual quality assurance assessment confirmed this. Staff surveys were all positive, "I am really well supported to do my job" was one comment. "I have regular supervision and training" was another comment.

At the visit comments included "the staff really understand me", and "its lovely here, the staff are great".

## 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 home is run in the best interests of the people using the service.

Evidence:

The manager is registered with The Commission and has completed an NVQ Level 4 in Care and Management. She is an experienced manager with many years experience working with older people. The atmosphere in the home is calm and relaxing and visitors feel they can approach the manager and staff if they have any concerns. The annual quality assurance assessment was completed well and this contained information regarding the improvements that have taken place in the past twelve months. The evidence relating to what the service does well was detailed and this was discussed with the manager.

The home have a quality assurance system in place which includes client and visitor questionnaires and a range of audits which relate to health and safety, the environment and care practises. A senior manager also visits monthly and speaks to

## Evidence:

people using the service and identifies what improvements have been made. Records of these visits were available. There are regular review meetings, residents meetings, staff and key worker meetings, and team briefs. This ensure the service continues to improve and develop.

People can keep personal money in the home. This may be used for chiropody, hairdressing, clothes or toiletries. Well-maintained records are kept of all transactions and invoices are available which confirm the money coming in and going out.

Health and safety was discussed and a selection of policies were inspected. A fire risk assessment is in place and staff had a good understanding of the action needed in the event of a fire. Staff receive fire, moving and handling, infection control and food hygiene training. Specific training is also given relating to older people's conditions. Water temperatures are taken and both the electrical wiring certificate and gas safety checks are in place. This helps to keep people safe in their environment.

Are there any outstanding requirements from the last inspection?

Yes

No

## Outstanding statutory requirements

These are requirements that were set at the previous inspection, but have still not been met. They say what the registered person had to do to meet the Care Standards Act 2000, Care Homes Regulations 2001 and the National Minimum Standards.

No.	Standard	Regulation	Requirement	Timescale for action
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## Requirements and recommendations from this inspection:

### Immediate requirements:

These are immediate requirements that were set on the day we visited this care home. The registered person had to meet these within 48 hours.

No.	Standard	Regulation	Requirement	Timescale for action
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### Statutory requirements

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

No.	Standard	Regulation	Requirement	Timescale for action
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### Recommendations

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

No.	Refer to Standard	Good Practice Recommendations
1	19	The dining room furniture could be updated.
2	27	A review of the night time staffing levels should take place.

## Helpline:

**Telephone:** 0845 015 0120 or 0191 233 3323

**Textphone:** 0845 015 2255 or 0191 233 3588

**Email:** [enquiries@csci.gsi.gov.uk](mailto:enquiries@csci.gsi.gov.uk)

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