

Key inspection report

CARE HOMES FOR OLDER PEOPLE

Alderlea Care Home

**St Thomas Close
Humberston
Grimsby
North East Lincs
DN36 4HS**

Lead Inspector
Tony Railton

Key Unannounced Inspection
5th May 2009 10:15

This report is a review of the 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.

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

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SERVICE INFORMATION

Name of service	Alderlea Care Home
Address	St Thomas Close Humberston Grimsby North East Lincs DN36 4HS
Telephone number	01472 812588
Fax number	01472 816118
Email address	manager.alderlea@hica-uk.com
Provider Web address	
Name of registered provider(s)/company (if applicable)	Humberside Independent Care Association Limited
Name of registered manager (if applicable)	Carol Ann Wilson
Type of registration	Care Home
No. of places registered (if applicable)	40
Category(ies) of registration, with number of places	Dementia - over 65 years of age (30), Old age, not falling within any other category (40)

SERVICE INFORMATION

Conditions of registration:

Date of last inspection 31st May 2007

Brief Description of the Service:

Alderlea provides personal care and accommodation for up to forty people aged 65 and over, including thirty people who may have dementia care needs.

The home is a large two storey building with access to the top floor via a passenger lift. The majority of bedrooms are for single accommodation and some are now en-suite. There is a large lounge/ conservatory and a large dining room which is currently being extended and improved. There is currently building work at the front of the home to improve the reception area and extend the offices.

There are pleasant gardens surrounding the home and ample car parking to the front of the home.

The home is close to the local church and village shop and is situated on a main bus route to Cleethorpes and Grimsby.

Alderlea is owned by Humberside Independent Care Association, which is a not for profit organisation.

On 5th May 2009 the fees charged by the home range from £361.00 to £490.00 with additional charges made for hairdressing, chiropody, toiletries etc.

Alderlea provides information to people living in the home about its facilities in its Statement of Purpose and Service User Guide.

SUMMARY

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

Following this visit the home has been given **Two Stars** which means people living in the home experience good quality outcomes.

This visit commenced at 10:15 and ended at 14:15. During this visit there was the opportunity to speak to people living in the home, some visiting relatives, the visiting hairdresser, the Registered Manager, Deputy Manager, care workers, domestic and laundry staff, activities coordinator and the homes chef. Some peoples' records were seen and include assessments, care plans, reviews, daily and medical records. Some staff records were seen and include references, police and POVA (Protection of Vulnerable Adult List) checks. Other documents seen include staff training records, staffing rota, menus, maintenance, complaints and Safeguarding records. A tour of the home was also undertaken. This was a very positive and enjoyable visit where a number of improvements were noted. The inspector would like to take the opportunity to thank people living in the home and the Registered Manager and staff team for their hospitality and cooperation throughout the visit.

What the service does well:

To make sure the service can meet peoples care and support needs these are assessed before coming to live in the home. People have a say in how they are supported and have the opportunity to comment on the quality of the services provided.

People live in a well decorated and well maintained home that is comfortable, clean and safe. People enjoy a choice of menu from a varied and balanced diet. One person says "the meals are lovely". One visiting relative says the "Meals are very good". People are offered snacks throughout the day. There are activities arranged on a daily basis for people to participate if they so wish. Some people enjoy going on holidays supported by staff from the home.

On the day of the visit there were enough staff available to meet peoples care and support needs in a relaxed and unhurried manner. Peoples' needs are met by trained and qualified staff that have a good relationship with people living in the home. One visiting relative says the "Staff are very caring" and another, "staff are very good". The visiting hairdresser says "Staff are very welcoming" and "the standards of care in the home are very high"

People are protected by the way staff are recruited and selected and they are safeguarded from any kind of abuse.

Throughout the visit people living in the home were observed to be comfortable relaxing in clean and pleasant surroundings being cared for by staff that listened, treated them with dignity and respected their wishes.

What has improved since the last inspection?

There is currently major work to the front of the home to improve the entrance and reception area, offices, dining room and garden. This also includes replacing the entrance hall carpet and redecoration throughout.

The certificate displayed shows a Five Gold Star Award for the homes kitchen and food preparation. This was awarded following a visit from the Local Authority Environmental Health Department. The Registered Manager, chef and kitchen staff are to be commended for their efforts in maintaining such high standards for people living in the home.

To make sure people have enough to eat they are now offered snacks between meals. These appeared to be very popular and people can choose from a range of hot and cold snacks.

To make sure peoples care and support needs can be fully met all staff have now had Dementia Awareness training. Records also show that over 56% of care staff now have a National Vocational Qualification Level 2 or above.

To improve standards with in the home some bedrooms have been redecorated and some provided with there own toilets.

For the convenience of people going on outings and holidays three new wheelchairs have been provided for those that have mobility problems.

What they could do better:

Although the way medicines are dealt with are safe, they are only checked by the Registered Manager every three months and checking the medicine systems does not form part of the Regulation 26 providers monthly visit report. The medicine systems have not been checked by a Pharmacist.

People were observed throughout this visit being treated with dignity and having their wishes respected. People were observed making choices and decisions about how they live. However, the daily records do not contain many descriptive words to show and reflect peoples' choices and preferences or decisions they make about how they live their lives.

Currently life in the home does not appear to be disrupted by the building work to the front of the home. However, people will be more comfortable once the building work has been completed and improvements made to the home.

There was lots of evidence to show people have the opportunity to comment on the quality of the services provided and in particular the care planning agreements, residents and relatives meetings, reviews and surveys. However, this information has not yet been collated or a report provided reflecting and showing what they think about the quality of care provided or any changes to the way the home runs as a result of what people said.

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 INSPECTOR FINDINGS

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Scoring of Outcomes

Statutory Requirements Identified During the Inspection

Choice of Home

The intended outcomes for Standards 1 – 6 are:

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

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

This is what people staying in this care home experience:

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

Standards 3 and 6.

People using the service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service. To make sure the service can meet peoples' personal and healthcare needs these are assessed before coming to live in the home. The home does not provide a specialist intermediate service.

EVIDENCE:

Discussion with the Registered Manager confirmed that the home does not provide a specialist intermediate care service for rehabilitation.

To make sure the service can meet peoples care and support needs sample of three peoples' records show these are assessed before coming to live in the home. The assessments are very comprehensive and include a social history and peoples' likes, dislikes, preferences and choices.

The assessments also show evidence of people and their relatives' involvement in the assessment process.

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.

This is what people staying in this care home experience:

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

Standards 7, 8, 9 and 10.

People using the 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 treated with dignity and their wishes are respected. Their care and support needs are set out in their plan of care and they are protected by the way medicines are dealt with.

EVIDENCE:

To protect people living in the home staff records show they are trained in how to deal with medicines safely. The Deputy Manager explained the way medicines are kept, given and recorded and a sample of peoples medicines were checked and found to be correct. The manager says they audit the medicines every three months. The Deputy manager says the medicine administration systems have not been checked by a pharmacist.

To make sure peoples' care and support needs are met these are set out in their individual plan of care. A sample of three peoples records show there are assessments, including nutritional assessments, moving and handling risk assessments. To make sure peoples' needs are being met the care plans are looked at regularly and amended to reflect their changing care and support needs. Some records showed the signatures of people and their relatives to

show their involvement in the care planning and reviewing process. But not all of the records seen had these.

Throughout the visit people were observed being treated with dignity and having their wishes respected. People appeared to be relaxed. People said they are happy living in the home. One visiting relative said "the home is lovely" and their relative has "everything they need" and are "well cared for".

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.

This is what people staying in this care home experience:

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

Standards 12, 13, 14 and 15.

People using the 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 find the lifestyle experienced matches their expectations, they have a say in what happens to them and they are offered a choice of a varied and balanced diet.

EVIDENCE:

The certificate displayed shows the home has been given a Five Gold Star Award for the kitchen and food preparation following a recent visit from the Local Authority Environmental Health Officer. The menus show people are offered a varied and balanced diet. The choice checklists show people have a choice of menu. Discussion with the chef found people are now offered snacks throughout the day between meals. The manager explained that some people have Dementia and mental health problems and the hot and cold snacks offered ensure people have plenty to eat and are offered a greater choice. This practice was observed throughout the day and appeared to be very successful with most people taking advantage of the service.

Discussion with the Activities Coordinator found activities are arranged on a daily basis. The record of activities shows people have a choice of group and individual activities. People were observed throughout the morning enjoying a group activity answering questions on and remembering the 'Good Old Days'.

People were observed throughout the visit being treated with dignity and having their wishes respected. However, the daily records do not contain many descriptive words to reflect peoples' choices and preferences.

Throughout the visit people were observed enjoying a relaxed and unhurried lifestyle even those suffering with Dementia and mental health problems were calm and not agitated. The standard of care set in this area is to be commended.

One visitor showed the inspector a special chair which had been custom made to enable them to access the gardens and local shops and parks with their relative.

Some people were observed enjoying attending the hairdresser who said they visit the home regularly. The hairdresser says they have been coming to the home for a number of years and staff are always very friendly and welcoming. They also said there is always a relaxed atmosphere with people enjoying themselves.

Records show and the Registered Manager confirmed that some people enjoy holidays to the coast supported by staff from the home. This practice is to be commended. The photographs displayed show people enjoying their holidays.

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.

This is what people staying in this care home experience:

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

Standards 16 and 18.

People using the service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service. Peoples concerns are taken seriously and acted upon and they are protected from any kind of abuse.

EVIDENCE:

The record of complaints show that what people and their relatives say is taken seriously and is acted upon. The records show there have been four complaints received since the previous visit and that these are properly recorded and acted upon. Staff records show they have complaints training as part of their induction training. The Registered Manager confirmed this. The complaints policy and procedure is accessible and displayed in the home and forms part of the Service User Guide given to people and their relatives.

To protect people from abuse there is a Safeguarding Policy and Procedure for staff to follow. To further protect people staff training records show they have Safeguarding training. The Registered Manager confirmed there has been one Safeguarding referral made to the local authority since the previous visit.

Records show that this was appropriately dealt with through the case management process. People spoken to say they know how to make a complaint but have never had to do this. One visitor says they are very happy with the services and care provided, however, "if they had any concerns they would raise them with the manager".

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.

This is what people staying in this care home experience:

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

Standards 19 and 26.

People using the 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 well decorated well maintained environment that is homely, comfortable and safe.

EVIDENCE:

People were observed relaxing in clean and pleasant surroundings. On the day of the visit there was no unpleasant odours noted and all areas of the home were clean to a good standard. Discussion with the domestics found they have everything they need to make sure the home is kept clean to a high standard. The Registered Manager and domestic team are to be commended for their efforts in maintaining such good standards of cleanliness throughout the home. It was noted that this must be particularly difficult at this time as there is major building work currently in progress to the entrance and front of the home. The Registered Manager says the work includes developing the entrance and reception area, offices and dining room. This also includes replacing the entrance hall carpet and redecoration throughout.

To improve services for people living in the home the manager says a number of bedrooms have been redecorated since the previous visit. A tour of the premises confirmed this and also shows some bedrooms now have there own toilets. One visiting relative says they are more than happy with the accommodation provided. People in there own rooms appeared to be relaxed, happy and comfortable.

To keep people safe the maintenance records show the passenger lift and hoists are serviced and the fire equipment is tested and checked regularly.

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.

This is what people staying in this care home experience:

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

Standards 27, 28, 29 and 30.

People using the service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service. Peoples' needs are met by experienced, trained and qualified staff and they are protected by the way staff are recruited and selected.

EVIDENCE:

People are protected by the way staff are selected and recruited as staff records show references, police and POVA (Protection of Vulnerable Adults List) checks are taken up before they are employed. To make sure people are safe all staff have Skills for Care induction and other training that includes Moving and Handling, Food Hygiene, Health and Safety and Safe Administration of Medicines. Records show some staff has advanced training in medicine administration provided by Grimsby College.

To make sure people are supported and appropriately cared for staff records also show they have Dementia Awareness training. The Registered Manager said to maintain standards within the home 56% of staff have a National Vocational Qualification Level 2 or above. Records show most staff has NVQ Level 2, one has Level 3, and two have NVQ Level 4. The Registered Manager confirmed a further 7 staff are registered on NVQ courses. The registered manager says they intend all care staff to have a National Vocational Qualification by the end of the year. This practice is to be commended and is over and above the recommended national standards.

Discussion with carers found they enjoy working in the home and feel supported in their work.

The Registered Manager says there is enough staff planned to be on duty to meet peoples care and support needs. The staffing rota confirmed this. On the day of the visit there appeared to be enough staff available to meet peoples' needs in a relaxed and unhurried manner.

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.

This is what people staying in this care home experience:

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

Standards 31,33, 35, and 38

People using the 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 well run, well managed home that is run in their best interests and where their health, safety, and welfare is promoted and protected.

EVIDENCE:

Throughout the visit people were observed being treated with dignity and having their wishes respected. The signatures on the assessments and care plans show people and their relatives are involved and have a say in how care is provided. The minutes of the carers and relatives meetings show people and their relatives views are sought on the services provided. The registered manager says surveys are used to seek peoples views regarding the quality of services provided. However, the information gathered has not yet been

collated or a report provided reflecting and showing what people said or any actions taken by the home as a result of their comments.

The care management systems continue to improve and show peoples care and support needs are met. The staff training records show people are cared for by staff that is trained and qualified. Records also show specific training is also provided to make sure peoples' needs are fully met.

People's health, safety and welfare is promoted and protected as staff training records show they have Health and Safety, Infection Control, Moving and Handling and First Aid training. The maintenance records show emergency equipment and fire systems are checked regularly. Health and Safety are looked at regularly as it forms part of the monthly providers visit reports.

People are protected by the way their finances are dealt with as some peoples finances were checked and found to be correct and safely administered.

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	X
2	X
3	3
4	X
5	x
6	N/A

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

DAILY LIFE AND SOCIAL ACTIVITIES	
Standard No	Score
12	4
13	3
14	2
15	4

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

ENVIRONMENT	
Standard No	Score
19	2
20	X
21	X
22	X
23	X
24	X
25	X
26	3

STAFFING	
Standard No	Score
27	3
28	4
29	3
30	3

MANAGEMENT AND ADMINISTRATION	
Standard No	Score
31	3
32	X
33	2
34	X
35	3
36	X
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
1	OP9	To make sure people remain safe the medicines should be checked more regularly by the Registered Manager and should form part of the monthly Regulation 26 Providers visit report. As a matter of good practice the medicine administration systems should be checked by the Pharmacist.
2	OP14	To show that people have a say in how they live their daily lives the daily records would benefit from the use of descriptive words to show and reflect people’s choices, preferences and any decisions they make about their lives.
3	OP19	The Registered Manger should inform the CQC when the building work; to the front of the home including replacing the entrance carpet has been completed.
4	OP33	The information gathered through quality assurance surveys should be collated and a report provided to reflect and show peoples views on the quality of services provided and any changes as to how the home runs as a result of

		their comments.
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